

2024 AvMed Medicare Part B Diabetes Supplies Covered

The chart below lists select Part B Diabetes supplies that are covered by AvMed Medicare. You must receive these drugs from a network pharmacy or supply provider and follow other rules that are listed in your plan’s evidence of coverage. This document includes only covered Part B supplies.

If you have questions or need help finding a covered drug or supply, please call AvMed Member Engagement at **1-800-782-8633 (TTY: 711)** for assistance. *

Select Part B supplies that are covered by your plan:

Product Name	Limits or Requirements
DEXCOM G6 CONTINUOUS GLUCOSE MONITOR SYSTEM	Prior authorization; Quantity limit
DEXCOM G7 CONTINUOUS GLUCOSE MONITOR SYSTEM	Prior authorization; Quantity limit
FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITOR SYSTEM	Prior authorization; Quantity limit
FREESTYLE LIBRE 2 CONTINUOUS GLUCOSE MONITOR SYSTEM	Prior authorization; Quantity limit
FREESTYLE LIBRE 3 CONTINUOUS GLUCOSE MONITOR SYSTEM	Prior authorization; Quantity limit
ACCU-CHEK GUIDE ME METER	Quantity limit
ACCU-CHEK GUIDE METER	Quantity limit
ONETOUCH VERIO REFLECT METER	Quantity limit
ONETOUCH VERIO FLEX METER	Quantity limit
ONETOUCH ULTRA2 METER	Quantity limit
ACCU-CHEK COMPACT PLUS TEST STRIPS	Quantity limit
ACCU-CHEK AVIVA PLUS TEST STRIPS	Quantity limit
ACCU-CHEK GUIDE TEST STRIPS	Quantity limit
ACCU-CHEK SMARTVIEW TEST STRIPS	Quantity limit
ONETOUCH VERIO TEST STRIPS	Quantity limit
ONETOUCH ULTRA TEST STRIPS	Quantity limit

Please note, the above chart does not include all the Part B supplies we cover.

*AvMed Member Engagement hours of operation change twice a year. From **October 1 through March 31**, you can call us seven days a week from 8 am to 8 pm. From **April 1 through September 30**, you can call us Monday through Friday from 8 am to 8 pm and Saturday from 9 am to 1 pm.