

# West Virginia Preferred Diabetic Supply List (PDSL)

Effective 1/1/2024

The West Virginia Medicaid Program has established a Preferred Diabetic Supply List for preferred test strips and sensors. For your convenience, we have provided NDC codes and special instructions for obtaining compatible blood glucose meters. Please note that West Virginia Medicaid does not pay for fingerstick blood glucose meters. Preferred meters will instead be supplied by their manufacturers (Roche Diabetes Care and Trividia Health Inc.). Instructions for obtaining these meters are located near the end of this document.

Effective April 1, 2019, West Virginia Medicaid began covering selected Continuous Glucose Meters (CGM) and the Omnipod Insulin System replacement pods with a prior authorization requirement. Please refer to our website for specific prior authorization criteria (<https://dhhr.wv.gov/bms/BMS%20Pharmacy/Pages/PA-Criteria.aspx>). The Omnipod Starter Kit and Omnipod Dash Starter Kit must be adjudicated with their manufacturer (Insulet). Instructions and a link to the manufacturer's medical necessity form are found at the end of this document.

## PREFERRED TEST STRIPS:

Test Strips: Manufacturer	NDC	Product Description
Roche Diabetes Care Inc.	65702071110	Accu-Chek Guide Test Strip 50 ct
Roche Diabetes Care Inc.	65702071210	Accu-Chek Guide Test Strip 100 ct
Trividia Health, Inc	56151146004	True Metrix - 50 ct
Trividia Health, Inc	56151146001	True Metrix - 100 ct
Trividia Health, Inc	56151081001	True Track- 100 ct
Trividia Health, Inc	56151085050	True Track - 50 ct
Trividia Health, Inc	56151146104	ReliOn Rx TMX Strip 50CT
Trividia Health, Inc	56151146101	ReliOn Rx TMX Strip 100CT

## PREFERRED METERS:

Manufacturer	NDC	Product Description
Roche Diabetes Care Inc.	65702073110	Accu-Chek Guide Meter
Trividia Health, Inc.	56151147002	True Metrix Blood Glucose Meter
Trividia Health, Inc.	56151149002	True Metrix Air Blood Glucose Meter
Trividia Health, Inc.	56151149102	Relion True Metrix Air Blood Glucose Meter

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Trividia Health, Inc.	56151088880	True Track Meter
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## Continuous Glucose Meters and supplies for the Omnipod Insulin System:

Manufacturer	NDC	Product Description
Abbott Diabetes Care Sales Corp.	57599000101	FREESTYLE LIBRE 14 DAY SENSOR
Abbott Diabetes Care Sales Corp.	57599080000	FREESTYLE LIBRE 2 SENSOR
Abbott Diabetes Care Sales Corp.	57599081800	FREESTYLE LIBRE 3 SENSOR
Abbott Diabetes Care Sales Corp.	57599080300	FREESTYLE LIBRE 2 READER
Abbott Diabetes Care Sales Corp.	57599000200	FREESTYLE LIBRE 14 DAY READER
Dexcom	08627005303	DexCom G6 Sensor
Dexcom	08627001601	DexCom G6 Transmitter
Dexcom	08627009111	DexCom G6 Receiver
Dexcom	08627007701	DexCom G7 Sensor
Dexcom	08627007801	DexCom G7 Receiver
Dexcom	086270077-1	DexCom G7 Transmitter
Insulet Corp	08508112005	Omnipod 5 Pack Pods
Insulet Corp	08508200005	Omnipod Dash 5 Pack Pods
MannKind Corp	08560940001	V-Go 40
MannKind Corp	08560940002	V-Go 30
MannKind Corp	08506940003	V-Go 20
Minimed Distribution Corporation	63000028585	Guardian Connect Transmitter
Minimed Distribution Corporation	63000041338	Guardian 4 Glucose Sensor
Minimed Distribution Corporation	63000044515	Guardian 4 Transmitter Kit
Minimed Distribution Corporation	63000044516	Guardian 4 Transmitter Kit
Minimed Distribution Corporation	63000051968	Guardian 4 Glucose Sensor
Minimed Distribution Corporation	76300000250	Guardian Connect Transmitter

## ROCHE DIABETES CARE INC.:

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To process claims for the Accu-Chek Guide meter, please use the code below, which is part of the Roche Free Meter Program. This code must be accompanied by a blood glucose meter prescription: "Please dispense one (Insert meter name and NDC) meter at no charge to the patient".

BIN #: 610524  
RxPCN#: 1016  
Group #: 40026479  
ID #: 361484851  
Issue#: (80840)

For assistance filing a Roche claim, please call the Pharmacy HelpLine at 1-800-657-7613.  
For product training, please call Accu-Chek Customer Care at 1-800-858-8072.

Any blood glucose meter dispensed pursuant to the terms of this code is dispensed as a sample and shall not be submitted to any third-party payer, public, or private for reimbursement.

## **TRIVIDIA HEALTH, INC.:**

To process claims for TrueMetrix and True Track brand meters, please use the code below, which is part of the Trividia Free Meter Program. This code must be accompanied by a blood glucose meter prescription: "Please dispense one (Insert meter name and NDC) meter at no charge to the patient".

RxBIN # 018844  
PCN # 3F  
Group Code # FVTRUEPORT50  
Identification # TRPT5023493

For assistance filing a Trividia claim, please call 1-855-282-4888.

## **INSULET:**

To obtain the No Charge Omnipod DASH Starter Kit please complete the Certificate of Medical Necessity Form and Fax to Insulet at 877-467-8538 or if you have any questions, call 800-591-3455.



Omnipod Medical  
Necessity Form