## BCBSM's Type 2 Diabetes (T2D)

## **Patient Empowerment Device Toolkit**

BCBSM is offering a type 2 diabetes patient monitoring device toolkit to support healthy behavior modification.

This device toolkit consists of:

- a. An Abbott Libre continuous glucose monitor (CGM) with six sensors
- b. A digital wireless blood pressure monitor (42cm maximum cuff size)
- c. A wireless enabled weight scale (up to 420lbs)

This benefit is available for Commercial PPO patients who are eligible for the **provider delivered care management (PDCM)** benefit at no patient copay, regardless of if a patient has BCBSM pharmacy coverage or not.



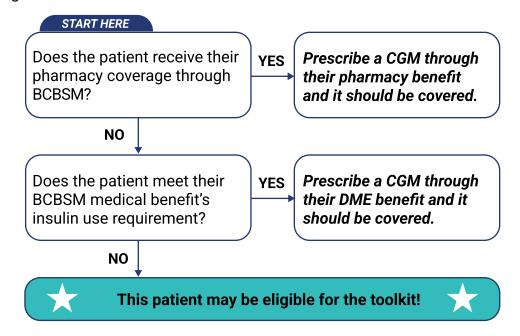
The toolkit might be right for this patient if the answer is <b>YES TO ALL THREE</b> of the statements below:				
1) Does the patient have type 2 diabetes?	YES		If NO	
2) Does the patient have BCBSM PPO medical insurance?	YES		The patient is not eligible for the toolkit	
3) Does the patient's insurance have PDCM benefits?	YES	UNSURE*	cligible for the tookit	

If yes to all three, have the patient complete the insurance worksheet on the next page and use those answers to complete the remaining questions below.

\*IF UNSURE: Only patients whose BCBSM insurance plans cover provider delivered care management (PDCM) are eligible for the Patient Empowerment Toolkit. You can check whether your patient has PDCM benefits on the BCBSM Availity website (availity.com/bcbsm) or on the PDCM members list that is sent to your physician organization.

Note: Approximately 97% of BCBSM PPO plans cover PDCM. For the 3% that do not, those patients will be denied the benefit.

Is my patient eligible for the toolkit?







## **Patient Insurance Worksheet**

## **Patient Empowerment Device Toolkit**

Do I have pharmacy coverage through BCBSM?  How do I know if I have separate drug coverage? You can contact your insurance company to find out. However, if you have a separate insurance card with a different company's name on it that you use for your medications, this is a good indication that you have separate drug coverage (also called a pharmacy carve out).				
If YES, ask your insurance these questions:	If NO, ask your insurance these questions:			
What is my preferred local pharmacy?  Name Phone Number	How many injections of insulin do I have to be on to qualify for a CGM:			
	○ None ○ Once Daily ○ 3 times Daily			
What is my preferred mail order pharmacy?  Name Website	What is my preferred Durable Medical Equipment (DME) provider?  Name Phone Number			
Ask the following questions regardless of whether you a have pharmacy coverage though BCBSM.				
How much is my copay for a Freestyle Libre 2 Plus, or Libre 3 Plus CGM?				
How much is my copay for a for a Dexcom G6 or G7 CGM?				
What is my deductible for medications, and have I met it?  Deducible:				
	Currently met: \$			

Share this information with your care team to help them decide if you are eligible for the Patient Empowerment Device toolkit.



