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1 A bill to be entitled 2 An act relating to Medicaid coverage of continuous 3 glucose monitors; creating s. 409.9063, F.S.; defining 4 the term "continuous glucose monitor"; requiring the 5 Agency for Health Care Administration, subject to the 6 availability of funds and certain limitations and 7 directions, to provide coverage for continuous glucose 8 monitors for certain Medicaid recipients; providing 9 construction; providing requirements for Medicaid recipients to continue receiving coverage for their 10 11 continuous glucose monitors; requiring the agency to 12 seek federal approval for implementation of the act, 13 if needed; requiring the agency to include the rate 14 impact of the act in certain rates that become 15 effective on a specified date; providing an effective 16 date. 17 Be It Enacted by the Legislature of the State of Florida: 18 19 20 Section 1. Section 409.9063, Florida Statutes, is created 21 to read: 22 409.9063 Coverage of continuous glucose monitors for 23 Medicaid recipients. -24 (1) As used in this section, the term "continuous glucose

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monitor" means an instrument or a device designed for the

CODING: Words stricken are deletions; words underlined are additions.

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purpose of aiding in the treatment of diabetes by measuring glucose levels on demand or at set intervals through a small, electronic sensor that slightly penetrates a person's skin when applied and that is designed to remain in place and active for at least 10 days.

- (2) Subject to the availability of funds and subject to any limitations or directions provided in the General Appropriations Act, the agency must provide coverage for a continuous glucose monitor under the Medicaid pharmacy benefit for the treatment of a Medicaid recipient if:
- (a) The recipient has been diagnosed by his or her primary care physician, or another licensed health care practitioner authorized to make such diagnosis, with Type 1 diabetes, Type 2 diabetes, gestational diabetes, or any other type of diabetes that may be treated with insulin; and
- (b) A health care practitioner with the applicable prescribing authority has prescribed insulin to treat the recipient's diabetes and a continuous glucose monitor to assist the recipient and practitioner in managing the recipient's diabetes.
- (3) Coverage under this section includes the cost of any necessary repairs or replacement parts for the continuous glucose monitor.
- (4) To qualify for continued coverage under this section, the Medicaid recipient must participate in follow-up care with

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his or her treating health care practitioner, in person or
through telehealth, at least once every 6 months during the
first 18 months after the first prescription of the continuous
glucose monitor for the recipient has been issued under this
section, to assess the efficacy of using the monitor for
treatment of his or her diabetes. After the first 18 months,
such follow-up care must occur at least once every 12 months.
(5) The agency shall seek federal approval, if needed, for
the implementation of this section.
Section 2. The Agency for Health Care Administration shall
include the rate impact of this act in the Medicaid managed
medical assistance program and long-term care managed care
program rates, as applicable, that take effect on October 1,
<u>2023.</u>