

PA.035.MPC External Insulin Pumps

Maryland Physicians Care considers **External Insulin Pumps** medically necessary for **ALL** the following indications:

- The patient has completed a comprehensive diabetes and self-management educational program ^(1,2)
AND
- The patient has been on a program of multiple daily injections of insulin (i.e., at least three insulin injections per day) with frequent self-administration of insulin for at least six months prior to the initiation of the external insulin pump ^(1,2)
OR
- The patient has documented blood glucose self-testing on an average of at least four times per day, for two months prior to the initiation of the external insulin pump ^(1,2)
AND
- The patient meets at least one of the following criteria while on the multiple daily injection program ⁽¹⁻³⁾:
 - History of severe glycemic excursions (including history of reoccurring hypoglycemia)
 - Glycosylated hemoglobin level (HbA1C) > 7.0%,
 - Wide fluctuations in blood glucose before or after mealtime
 - Dawn phenomenon with fasting blood sugars frequently exceeding 200 mg/dl.
 - Pregnancy
 - Not meeting glycemic targets
 - Gastroparesis
 - Hypoglycemia unawareness
 - Desire more flexibility in diabetes management
 - Desire fewer injections
 - Unpredictable eating habits
 - Variable schedules or work shifts
 - Require small doses of insulin (i.e., pediatric patients)

Continued Coverage of an external insulin pump and supplies:

- Requires that the patient be seen and evaluated by the treating physician at least every three months.
- The external insulin infusion pump must be ordered and follow-up care rendered by a physician who manages multiple patients on continuous subcutaneous

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insulin infusion therapy, and who works closely with a team including nurses, diabetic educators, and dietitians who are knowledgeable and trained in the use of continuous subcutaneous insulin infusion therapy.

Limitations

1. Patients are limited to one pump (one brand) per warranty period of the first pump.
2. Implantable insulin pumps coverage varies according to the patient's benefit plan.
3. Chronic Intermittent Intravenous Insulin Therapy (CIIT) is considered experimental and investigational, and therefore not covered.

Codes

CPT Codes / HCPCS Codes / ICD-10 Codes

Code	Description
*A9274	External ambulatory insulin delivery system, disposable, each, includes all supplies and accessories <i>*This procedure code is not a covered benefit under Maryland Physicians Care.</i>
E0784	External ambulatory infusion pump, insulin
A4230	Infusion set for external insulin pump, non-needle cannula type
A4231	Infusion set for external insulin pump, needle type
A4232	Syringe with needle for external insulin pump, sterile, 3 cc
K0552	Supplies for external drug infusion pump, syringe type, cartridge, sterile, each
K0601	Replacement battery for external insulin pump owned by patient, silver oxide, 1.5 volt, each
K0602	Replacement battery for external insulin pump owned by patient, silver oxide, 3 volt, each
K0603	Replacement battery for external insulin pump owned by patient, alkaline, 1.5 volt, each
K0604	Replacement battery for external insulin pump owned by patient, lithium, 3.6 volt, each
K0605	Replacement battery for external insulin pump owned by patient, lithium, 4.5 volt, each

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ICD-10 codes covered if selection criteria are met:	
E08	Diabetes mellitus due to underlying condition
E08.00- E09.9	Diabetes mellitus due to underlying condition
E10	Type 1 diabetes mellitus
E10.10- E10.9	Type 1 diabetes mellitus
E11	Type 2 diabetes mellitus
E11.00- E11.9	Type 2 diabetes mellitus
E13	Other specified diabetes mellitus
E13.00- E13.9	Other specified diabetes mellitus

References

1. NCD 280.14: Infusion Pumps. Centers for Medicare & Medicaid Services (CMS). December 17, 2004.
<https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?NCID=223&ncdver=2&DocID=280.14&SearchType=Advanced&bc=IAAAAAqAAAAAA%3d%3d&>
2. LCD L33794: External Infusion Pumps. Centers for Medicare & Medicaid Services (CMS). October 1, 2024.
<https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33794&ver=153&ContrId=388&ContrVer=1&articleid=55426&docid=l33642&bc=AAAAAAAAIAAAAA&=>
3. Berget C, Messer LH, Forlenza GP. A clinical overview of insulin pump therapy for the management of diabetes: Past, present, and future of intensive therapy. Diabetes Spectrum. 2019;32(3):194-204. doi:10.2337/ds18-0091

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