



Diabetes Monitoring

This is a list of blood sugar monitors (glucometers) and supplies that are covered by your insurance. If you have diabetes and need to monitor your blood sugar, ask your doctor to prescribe one of these glucometers and supplies. You can receive these covered items at your local pharmacy with a prescription.

The Accu-Chek® Guide monitor is the preferred formulary blood sugar monitor. Ask your provider to write for this monitor and supplies. If you have an Aviva or Nano meter and would prefer to continue using it, the supplies for both monitors remain covered for you. When you are ready for a new monitor, the Guide monitor must be used.

NDC	Preferred product* - Guide and supplies	Limit
65702061710	Accu-Chek® Guide Retail Care Kit (monitor)	2 kits/year
65702072910	Accu-Chek® Guide Retail Care Kit (monitor)	2 kits/year
65702071110	Accu-Chek® Guide test strips (50 count)	4 boxes/month
65702071210	Accu-Chek® Guide test strips (100 count)	2 boxes/month
65702071310	Accu-Chek® Guide 2-level glucose control solution	
65702073110	Accu-Chek® Guide Me Care Kit	2 kits/year

NDC	Accu-Chek® Aviva supplies*	Limit
65702010710	Accu-Chek® Aviva control solution	
65702040810	Accu-Chek® Aviva plus (100 count)	2 boxes/month
65702040710	Accu-Chek® Aviva plus (50 count)	4 boxes/month
50924097110	Accu-Chek® SoftClix lancets (100 count)	2 boxes/month
65702012410	Accu-Chek® SoftClix lancets (200 count)	1 box/month

NDC	Accu-Chek® Nano supplies*	Limit
65702048810	Accu-Chek® SmartView control solution	
65702049310	Accu-Chek® Nano SmartView strips (100 count)	2 boxes/month
65702049210	Accu-Chek® Nano SmartView strips (50 count)	4 boxes/month
65702040010	Accu-Chek® SoftClix lancet device	2 devices/year
50924058510	Accu-Chek® SoftTouch lancets (100 count)	2 boxes/month
65702028810	Accu-Chek® FastClix lancets (102 count)	2 boxes/month

*If you are testing more than 6 times per day and you need a supply that is greater than the limit listed, your doctor can submit a prior authorization for you.



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- Provides free (no cost) aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Information in other formats (large print, audio, accessible electronic formats)
- Provides free (no cost) language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Blue Cross Complete of Michigan Customer Service, 24 hours a day, 7 days a week at **1-800-228-8554** (TDD/TTY: **1-888-987-5832**).

If you believe that Blue Cross Complete of Michigan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

- **Blue Cross Complete of Michigan Member Grievances**
P.O. Box 41789
North Charleston, SC 29423
1-800-228-8554
(TDD/TTY: **1-888-987-5832**)
- If you need help filing a grievance, Blue Cross Complete of Michigan Customer Service is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, through the Office for Civil Rights Complaint Portal available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019
(TDD/TTY: **1-800-537-7697**)

Complaint forms are available at:
hhs.gov/ocr/office/file/index.html.

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