

MEDICAL NECESSITY CRITERIA

BRAND NAME

CONTOUR TEST STRIPS

CONTOUR NEXT TEST STRIPS

Status: CVS Caremark Criteria Type: Medical Necessity Criteria

Ref # 1021-A

CRITERIA FOR APPROVAL				
1.	Is the patient using a Medtronic MiniMed Paradigm REAL-Time Revel insulin pump? If yes, please submit documentation including name of insulin pump	Yes	No	
2.	Is the request for Contour or Contour Next test strips for use in association with a Contour LINK or Contour Next LINK Meter?	Yes	No	

Guidelines for Approval				
Duration of Approval	12 months			
Set 1				
Yes to question(s)	No to question(s)			
1	None			
2				

RATIONALE

The intent of the criteria is to allow a patient to receive Contour or Contour Next Test Strips if used with a Medtronic insulin pump and a Contour LINK or Contour Next LINK Meter.

If the prescriber provides evidence that the patient uses a Medtronic MiniMed Paradigm REAL-Time Revel insulin pump, the request will be approved.

REFERENCES

N/A

Written by:UM Development (NB)Date Written:09/2013Revised:10/2013 (added contour strips and clarified question 2), 07/2014 (changed name to combine 1021-A and 1022-A)Reviewed:Medical Affairs 09/2013

Contour Test Strips Formulary Medical Necessity 1021-A 07-2014.docx

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