Audience: CC All Location: Benefits/A-Z List System: N/A Updated: 12.12.23

Reviewed: 7.12.22

Artificial Pancreas

Description

An artificial pancreas device system is a system of totally interactive/interconnected technologies that mimics the glucose regulating function of a healthy pancreas. These systems integrate a continuous glucose sensor, insulin pump, and a self-contained glucose control algorithm that can anticipate insulin needs automatically in order to adjust glucose levels in real time independent of user interaction. Currently, open-loop systems such as current threshold suspend systems are steps towards a fully closed-loop, self-regulating system.

These long-term monitoring systems are classified under the FDA's product classification, OZO: Artificial Pancreas Device System, Threshold Suspend.

See also

Similar, related, or easily confused documents.

- <u>Continuous Glucose Monitoring (CGM) Systems for Managing Diabetes</u> Systems are designed to replace traditional fingerstick blood glucose testing.
- <u>Diabetes Navigator</u> Benefit considerations related to diabetes.
- Insulin Pump and Supplies Delivers insulin continuously.

Table of Contents

The following topics are included in this document:

- Commercial
- Government Programs
- Individual and Family Business (IFB)

Document history

Date	Description
12.11.23	Updated to new template.
7.22.22	New A-Z sheet

Commercial

Introduction

This section applies to all Commercial brands: Dean Health Plan (DHP), Mayo Medical Plan (MMP), Medica (including MHPS), and Prevea360.

Benefits (all except MMP)

Not FDA approved. Not covered.

Mayo Medical Plan (MMP)

Not FDA approved. Not covered.

Document history

Date	Description
12.11.23	Updated to new template.
7.12.22	New A-Z sheet.

Government Programs

Introduction

This section applies to all Medicaid and Medicare products.

AccessAbility (SNBC),

Medicaid only groups:

• Refer to Medicaid below.

Minnesota Senior Care Plus (MSC+)

Medicare eligible groups:

- Not FDA approved. Not covered.
- Follows Medicare guidelines.
- Medicare is the primary payer.
- If no Medicare eligibility, Medicaid applies. Refer to Medicaid below.

AccessAbility Enhanced (I-SNBC),

Not FDA approved. Not covered.

• Medica is the only payer.

DUAL (MSHO)

Cost (Prime)

Not FDA approved. Not covered.

• Follows Medicare guidelines.

Med Advantage

Not FDA approved. Not covered.

• Medica is the only payer.

Med Supp (Select, Signature)

Not FDA approved. Not covered.

- Follows Medicare guidelines.
- Medicare supplement.
- Medicare is the primary payer.

Medicaid

Not FDA approved. Not covered.

Document history

Date	Description
12.11.23	Updated to new template.
7.12.22	New A-Z sheet.

Individual and Family Business (IFB)

Introduction

This section applies to all Individual and Family Business (IFB) brands: Dean Health Plan (DHP), Medica, Medica (formerly WellFirst), and Prevea360.

Benefits

Not FDA approved. Not covered.

Document history

Date	Description
12.11.23	Updated to new template.
7.12.22	New A-Z sheet.