

## FAQ: DIABETES SUPPORTS FOR MANITOBANS ADVANCED GLUCOSE MONITORS

### What are advanced glucose monitors (AGM)?

- AGM include both continuous glucose monitors (CGM) and flash glucose monitors (FGM).
- CGM and FGM are relatively new technologies that track glucose levels by using a tiny electrode called a glucose sensor implanted into the skin, and reducing the need to finger poke using a conventional blood glucose monitor.
- Both systems allow users, and those they share information with, to monitor and measure glucose levels. While CGM offers continuous surveillance and reporting, FGM displays readings when scanned.
- Manitobans should work with their health care professional to determine which device is most appropriate for their needs.

### How can I get coverage for AGM and when will coverage start?

- Effective March 14, 2023, AGM coverage was expanded to include eligible clients of all ages with type 1 or type 2 diabetes who meet eligibility criteria. Previously (effective September 28, 2021), AGM were eligible benefits for clients living with type 1 diabetes aged 25 and younger who met the criteria.
- The expanded eligibility criteria for AGM is published in Bulletin 125 here: [Bulletin Archive - Manitoba Drug Benefits and Interchangeability Formulary | Health and Seniors Care | Province of Manitoba \(gov.mb.ca\)](#)
- Additionally, Manitoba Health has changed the benefit status of AGM from an Exception Drug Status (EDS) benefit, which requires a prescriber to submit an application for coverage approval, to a Part 2 benefit (which still requires that a client meets criteria but does not require an application for coverage). This means improved access to AGM for clients and reduced workload for prescribers, since an application for EDS coverage is no longer required.
- Contact your health care professional to discuss your eligibility.

### Will I have to reach my deductible first to get AGM coverage?

- Yes, AGM **are** subject to Pharmacare deductibles.
- A deductible is the dollar amount you are required to pay before Pharmacare starts to pay for eligible benefits. Once a Pharmacare application has been processed, Pharmacare will send a notification letter indicating the deductible amount. To estimate a family deductible, please go to the online [Pharmacare Deductible Estimator](#).
- Additional information can be found here: [General Questions about Pharmacare | Health and Seniors Care | Province of Manitoba \(gov.mb.ca\)](#)

### How often can I get a refill for my prescription for AGM?

- Eligible Pharmacare clients may have up to 100 days' supply filled for drugs and other items covered on the Manitoba Formulary in any 90-day period in most situations.

### Why has my approved quantity of Blood Glucose Test Strips (BGTS) changed now that I am using AGM?

- Effective March 14, 2023, the annual approved quantity of BGTS by treatment regimen was updated to reflect the BGTS requirements of clients who use AGM, including specific calibration requirements of different AGMs.
- If you are using AGM, you may occasionally need BGTS (for example, if you see an error code or if your symptoms do not match your AGM readings).
- The updated annual approved quantity of BGTS by treatment regimen is published in Bulletin 125 here: [Bulletin Archive - Manitoba Drug Benefits and Interchangeability Formulary | Health and Seniors Care | Province of Manitoba \(gov.mb.ca\)](#)

**If I purchase AGM direct from a supplier, how do I submit for reimbursement?**

- If you are eligible for AGM coverage and you purchase your AGM direct from a supplier, you can submit a claim to Pharmacare to have these costs count toward your annual deductible. Once your deductible has been reached, Manitoba Health will reimburse the cost of eligible AGM up to the established quantity limit per benefit year.
- If you submit a claim for AGM and you are **not** eligible for AGM coverage, your AGM costs will not count toward your Pharmacare deductible and will not be reimbursed.
- When adjudicating claims for reimbursement, Manitoba Health assesses each client's drug utilization history to confirm that the eligibility criteria for AGM coverage is met.
- Claims for AGM costs must be submitted within six months of date of purchase to be counted toward your annual deductible (or to be reimbursed, if you have reached your deductible). Claims must include the client's full name, Manitoba Health Registration Number, and original receipts/invoices.
- AGM reimbursement requests must be submitted to:

Manitoba Health  
Non-Insured Benefits  
300 Carlton Street  
Winnipeg, Manitoba, R3B 3M9