



## Nevada Medicaid and Nevada Check Up Diabetic Supply Program Billing Information

**Nevada Medicaid covers only the monitors and test strips listed below.\***

Recipients who are legally blind may obtain specialized monitors through the prior authorization process.

**Effective January 1, 2019**

Product Number	Description	NDC	UPC
21098	OneTouch® Ultra®2 System	53885-0448-01	3-53885-00027-7
24046	OneTouch® Ultra®2 System	53885-0046-01	3-53885-01185-3
21208	OneTouch® UltraMini® System (Silver Moon)	53885-0208-01	3-53885-00048-2
21419	OneTouch® UltraMini® System (Pink Glow)	53885-0419-01	3-53885-00128-1
21911	OneTouch® UltraMini® System (Blue Comet)	53885-0911-01	3-53885-00267-7
20245	OneTouch® Ultra® Test Strips 100 ct.	53885-0245-10	3-53885-24510-4
20244	OneTouch® Ultra® Test Strips 50 ct.	53885-0244-50	3-53885-24450-3
20994	OneTouch® Ultra® Test Strips 25 ct.	53885-0994-25	3-53885-99425-5
22595	OneTouch® Delica® Lancets 100 ct. 33g	53885-0595-01	3-53885-00850-1
20393	OneTouch® Delica® Lancets 100 ct. 30g	53885-0393-10	3-53885-39310-2
24011	OneTouch® Delica® Plus Lancet 100 ct. 30g	53885-0011-10	8-12608-03002-6
24008	OneTouch® Delica® Plus Lancet 100 ct. 33g	53885-0008-10	8-12608-03001-9
22136	OneTouch® Delica® 33-Gauge Lancets 100 ct.	53885-0136-10	3-53885-01130-3
22270	OneTouch® Verio® Test Strips 25-Strip Box	53885-0270-25	3-53885-00773-3
22899	OneTouch® Verio® Test Strips 50-Strip Box	53885-0271-50	3-53885-00976-8
22898	OneTouch® Verio® Test Strips 100-Strip Box	53885-0272-10	3-53885-00975-1
23194	OneTouch® Verio® Flex System	53885-0194-01	3-53885-01071-9
24044	OneTouch® Verio® Flex System	53885-0044-01	3-53885-01183-9
22657	OneTouch® Verio® System	53885-0657-01	3-53885-00871-6
22267	OneTouch® Verio®IQ System	53885-0267-01	3-53885-00770-2
RE4H01-01	TRUE METRIX® Meter Kit	56151-1470-02	0-21292-00605-1
REA4H01-01	TRUE METRIX® AIR Meter Kit	56151-1490-02	0-21292-00701-0
R3H01-0100	TRUE METRIX® Strips 100 ct	56151-1460-01	0-21292-00616-7
R3H01-050	TRUE METRIX® Strips 50 ct	56151-1460-04	0-21292-00618-1

\*This policy does not apply to recipients with primary insurance when Medicaid is the secondary payer.

A webpage devoted to the Diabetic Supply Program has been created at <https://www.medicaid.nv.gov> (select “Diabetic Supplies” from the “Pharmacy” menu). For complete coverage and limitations, see Medicaid Services Manual Chapter 1200 online at <http://dhcfp.nv.gov>. For additional product training, please contact the manufacturer directly. If you have billing questions, please call the OptumRx Clinical Call Center at 1-855-455-3311.