

Subject:	<b>Continuous glucose monitoring</b>
Summary:	<p>CVZ has assessed whether continuous glucose monitoring (CGM) complies with the statutory established medical science and medical practice criterion and whether this is care that is normally provided by medical specialists or 'medical devices care'.</p> <p>CVZ concluded that there are groups of patients for whom the long-term therapeutic use of (real-time) CGM makes sense. For this group of patients this intervention does fulfil the established medical science and medical practice criterion when protocols are used for determining the indication and when using CGM. This involves:</p> <ul style="list-style-type: none"> <li>• children with type 1 diabetes;</li> <li>• adults with poorly regulated type 1 diabetes (continually high HbA1c (&gt;8% of &gt;64 mmol/mol) despite standard control);</li> <li>• pregnant women with existing diabetes (types 1 and 2).</li> </ul> <p>CVZ believes that CGM only fulfils the established medical science and medical practice criterion for the above group of patients when protocols are used to determine the indication and for using CGM, including the necessary guidance. The protocolled use of CGM will promote appropriate use of this care.</p> <p>To this end the NDF drew up the protocol 'Indication criteria for the reimbursement of RT-CGM'. CVZ advises insurers to use this protocol as point of departure when purchasing care.</p> <p>As this is care that takes place subject to the ultimate accountability of a doctor (medical specialist), and a back-up function or emergency care in a hospital may be required, CVZ concludes that CGM is care that is normally provided by medical specialists and not 'medical devices care'.</p>
Type of ruling:	SpZ = Outcome of Assessment Zvw
Date:	1 November 2010
Issued to:	The Minister of WVS
Care form:	Medical-specialist care