

Coverage change for diabetic supplies and glucose meters

The HealthSelectSM Prescription Drug Plan covers the full cost of some diabetic supplies like test strips, lancets and lancing devices for participants enrolled in the HealthSelect of Texas[®] and HealthSelect Out-of-State plans. Consumer Directed HealthSelectSM participants must meet their deductible before the plan will pay for these products.

The HealthSelectSM Prescription Drug Program also offers a free glucose meter program. HealthSelectSM plan participants or their doctors can request a voucher to obtain a free blood glucose meter directly from one of the manufacturers listed below or by taking this flyer to the pharmacy.

How to get your free meter

You, your doctor or caregiver can obtain a voucher directly from one of the manufacturers listed below or by taking this flyer to the pharmacy.



How to obtain a voucher for a free CONTOUR®NEXT meter:

Call	1-800-401-8440
Online	ascensiadiabetes.com
	Enter order code: BDC-UHC

How to obtain a free CONTOUR®NEXT meter:

Retail pharmacy	Present a valid prescription along with your meter voucher information received from the manufacturer or this flyer:
BIN	18844
RxPCN	3F
GroupID	MGDCARE
ID#	CNMC7246982
Pharmacist:	Requires a valid prescription.
	Limit 1 meter per patient, per 12 month period for purchase of product indicated.

OneTouch Verio Reflect [®] meter	BIN: 601341	Group ID#: LVUM384
OneTouch Verio [®] test strips	RxPCN: OHS	ID#: NOCHARGEMETER
OneTouch Verio Flex® meter	BIN: 601341	Group ID#: LVUM384
OneTouch Verio test strips	RxPCN: OHS	ID#: NOCHARGEMETER
OneTouch[®] Ultra[®] 2 meter	BIN: 601341	Group ID#: LVUM384
OneTouch Ultra [®] test strips	RxPCN: OHS	ID#: NOCHARGEMETER

How to obtain a voucher for a free One Touch® meter:

Call	1-800-845-9525 and you will be mailed a meter voucher to present at a retail pharmacy.	
Online	OneTouch.orderpoints.com	
	Enter order code: 236DMT001	

How to obtain a free One Touch® meter:

Retail pharmacy	Present a valid prescription along with your meter voucher information received from the manufacturer or this flyer:
BIN	6013
RxPCN	OHS
GroupID	OH6504191
ID#	NOCHARGEMETR
Pharmacist:	Submit claim to Opus Health for reimbursement plus a dispensing fee.
	Requires a valid prescription.
	Limit 1 meter per patient, per 12 month period for purchase of product indicated.

Other brands of glucometers and testing supplies available at applicable tiers; **www.HealthSelectRx.com** or contact Optum Rx toll free at **(855) 828-9834 (TTY: 711)**. Be sure to visit your health plan's website at **www.healthselectoftexas.com** or call **(800) 252-8039 (TTY: 711)** for more information about coverage for diabetic supplies through your health plan. Blue Cross and Blue Shield of Texas still offers coverage of diabetic supplies.

Questions?

Call HealthSelect PDP customer service at Optum Rx toll-free at (855) 828-9834 (TTY: 711). Visit www.HealthSelectRx.com





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