PREPARE 4 CGM Study
Guide for Tracking Prescriptions for Continuous Glucose Monitors (CGM)

As part of the PREPARE 4 CGM study, your practice will track the number of prescriptions written for CGM across clinicians in your practice. Some ideas for how to track this information are noted below. Please use whichever method or combination of methods works best for your practice, including other methods not listed here that your practice may identify.

Note: You will not submit this documentation to the study team, rather you can use it as a reference when reporting the number of CGM prescriptions in the PREPARE 4 CGM Practice Survey. We will ask your practice to report the number of CGM prescriptions on the Practice Survey at three time points: Shortly after orientation (Baseline), six months after orientation, and 12 months after orientation.

Common tracking methods include:
1. The **medication list** in your practice's electronic health record (EHR) system
2. A **billing report** on relevant **CPT codes**
3. A **patient list or registry**

More information about each of these options is below.

1. Medication list
We recommend prescribing personal CGM through your electronic health record (EHR). This way, it should show up on your patient's medication list. If your EHR allows reporting and/or searching, this will make it easier to find later (e.g., search patient medication lists in EHR to identify/count CGM prescriptions). Specific steps to search the medication list will depend on your EHR platform.

2. Billing report on CPT codes
Generate billing report on CPT codes that include CGM placement or review. Count the number of unique patients billed under each of the following codes:
- 95249, *CGM placement for personal CGM*
- 95250, *CGM placement for professional CGM*
- 95251, *CGM data review/interpretation*

(More detail about how and when to use these CPT codes can be found in "Billing and Coding for CGM" resources.)

This method should work very well for any clinic that bills by fee-for-service. For others, like Federally Qualified Health Centers or Rural Health Centers, this method may still be encouraged, because even though an FQHC or RHC might not get reimbursed more for reporting these, it would still ease the process of tracking how often these were done.

3. Patient list or registry
You can keep a list or registry to document patients prescribed CGM. Use the Excel template provided by the study team (screen shots on next page), your own list, or a built-in registry in your practice's EHR, if available. The registry template includes several fields that you might find helpful to track, but are not required for tracking number of prescriptions. You can modify this registry as needed.

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Excel Tracking Sheet provided by Study Team

PCP	Pt MI	Pt Last Name	Pt First Name	Next Visit	Age	Date of CGM Initiation	Date of Last HbA1C Before CGM Initiation	HbA1C Before CGM Initiation	Date of HbA1C 3 Months After CGM Initiation	HbA1C 3 Months After CGM Initiation	Pt Comm Pr	Pref Language	Pt Portal Status	Primary Diabetes Management?
EXAMPLE PRACTICE														
Johnson, John, MI	2468102	Bran	B.		57						Phone	English		Primary Care
Doe, Jane, MD	1234567	Adams	A.	7/15/2021	64	1/10/2021	1/3/2021	9.5	4/15/2021	8.6	Portal, Phone, Mai	English	Activated	Endocrinology
Johnson, John, MI	2342312	Jay	J.		48	12/1/2020	10/31/2021	11.2	3/1/2021	9.8	phone	English	Not Activated	Other (write in)
YOUR PRACTICE														

Contacted (pt answered the phone) (Y/N))	Voicemail Left (Y/	Attem	Appt Scheduled (Yes/No)	Appt Dt	ACTION	Notes
Y	Y	2	Yes	N/A	Follow up call in 3 mor	Pt not ready to schedule
Y	N	1	No	7/15/2021	Scheduled Appt	pt is up to date with visits and labs
y	y	1				

Please contact the study team at (303) 724-6723 or prepare4cgm@cuanschutz.edu with any questions about tracking number of CGM prescriptions or the PREPARE 4 CGM study in general.

Thank you for participating in PREPARE 4 CGM!