

Anticipate Earlier CGM Use for Diabetes

Top Takeaways

- Guidelines support earlier and broader use of continuous glucose monitoring (CGM) in diabetes care.
- Be prepared to navigate varying CGM payer coverage requirements and product changes.
- Help match patients to an appropriate CGM option and troubleshoot common issues.

You'll start to see **earlier use of continuous glucose monitoring (CGM) devices in patients with diabetes.**

Am Diabetes Assoc (ADA) guidelines now recommend CGM at diagnosis or anytime after for patients on insulin or other meds that can cause hypoglycemia (glipizide, etc)...or whenever CGM can help with management.

That's because early initiation is associated with benefits such as improved A1c, increased time in range (TIR), and reduced hypoglycemia.

But keep in mind that payer policies don't always align with guidelines. And anticipate that insurers may still require insulin use...or history of a severe hypoglycemic episode...for CGM coverage.

Continue to help individualize glucose monitoring for patients with diabetes...and be familiar with Rx CGM options, product changes, etc.

For example, Dexcom G6 will no longer be manufactured after July 1, 2026. Help patients transition to an alternative, such as a Dexcom G7 CGM.

Point out the G7 sensor can be worn for 10 days...while the G7 15-day sensor lasts 15 days like its name implies.

Libre 2 Plus or Libre 3 Plus sensors also last 15 days. Libre 3 Plus is smaller...and has a bigger Bluetooth range.

But be aware, some Libre 3 Plus sensors are part of a recent class I recall...due to incorrectly low readings. Check your inventory...and advise affected patients to request a replacement from the manufacturer.

Eversense 365 is another Rx CGM option. The sensor lasts for 1 year...but must be inserted by a trained healthcare provider.

Save OTC CGMs (Lingo, Stelo) for patients who can't afford or access Rx CGMs and aren't on insulin or prone to hypoglycemia. The OTC CGMs lack alarms for low or high glucose...and measure glucose in a narrower range.

For instance, Stelo only reads glucose from 70-250 mg/dL and Lingo reads 55-200 mg/dL...while most Rx CGM devices read from 40-400 mg/dL.

Advise CGM users to wash the sensor site with soap, dry, clean with an alcohol swab, and let dry before application. If sensors don't stay on, suggest a product to improve adhesion (Skin Tac, Tegaderm, etc).

Point out factors that may impact results. For example, sleeping on the sensor may cause false "compression lows." And taking higher doses of acetaminophen or vitamin C may lead to falsely elevated readings with certain CGMs.

Remind patients to check a finger stick with a standard glucose meter if prompted by the CGM...or if results don't match how they feel.

Dig into our resource, *Continuous Glucose Monitoring*, for product comparisons, troubleshooting tips, and advice on interpreting results.

Key References:

- American Diabetes Association Professional Practice Committee for Diabetes. Diabetes Technology: Standards of Care in Diabetes—2026. *Diabetes Care* 1 January 2026; 49 (Supplement_1): S150–S165.

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- Aleppo G, Carlson AL, McGill JB, et al. Clinical Impact of Continuous Glucose Monitoring in Noninsulin Treated Type 2 Diabetes: A Review. Diabetes Technol Ther. 2026 Jan 23:15209156251414980.

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