

Streamlining EHR Prescriptions for Insulin Pumps

Prescribing an insulin pump through an Electronic Health Record (EHR) system can be efficient and seamless when using structured smart phrases. By integrating automated documentation, providers can reduce administrative burden, ensure accuracy, and facilitate faster approvals for patients needing advanced diabetes technology.

This section provides ready-to-use EHR smart phrases that incorporate HCPCS codes, insulin delivery settings, CGM integration, and insurance requirements—ensuring a comprehensive and streamlined approach to prescribing insulin pump therapy.

Using these templates, providers can:

- Quickly document medical necessity for insurance approvals.
- Ensure all required details are included in the prescription.
- Facilitate faster patient onboarding with a Certified Diabetes Care and Education Specialist (CDCES) or Manufacturer Pump Trainer.
- Optimize workflows for prescribing Hybrid Closed-Loop, Fully Automated, and Manual Insulin Pump Systems.

With these EHR-friendly templates, PCPs can confidently prescribe insulin pumps, expanding patient access to life-changing diabetes technology while minimizing documentation challenges. Smart Phrases can, and should be customized to pump models and insurance types for your state requirements.



Example Smart Phrase

Smart Phrase: .INSULINPUMP_OMNIPOD5_ADS

 AID technology will optimize glycemic control and reduce hypoglycemia/hyperglycemia risks.

Patient has Type 2 Diabetes Mellitus, insulin-dependent, and is a candidate for hybrid closed-loop insulin pump therapy to improve glycemic control.

Prescription Details:	Insurance Coverage & Documentation:
Diagnosis: ☐ Type 1 Diabetes (E10.9) ☐ Type 2 Diabetes (E11.9) ☐ Other:	CMN completed and submitted to [DME Supplier: ADS / US MED].
Pump Settings: AID system with customizable glucose targets.	 Prior authorization initiated per insurance guidelines.
CGM Integration: Dexcom G6, G7, Libre 2 Plus.	☐ Patient educated on CGM integration, pump operation, and follow-up. (CDCES Support,
Pod Size: 200U insulin per pod.	Pump Manufacturer Certified Pump Trainer)
Change Frequency: ☐ Every 24 hours (Qty 90) ☐ Every 36 hours (Qty 60) ☐ Every 48 hours (Qty 45) ☐ Every 72 hours (Qty 30)	Next Steps:
	☐ Schedule Certified Diabetes Care and Education Specialist (CDCES) appointment for training.
Insurance: Medicare (Not covered under Part B) Medicare Advantage Commercial Insurance	 Arrange follow-up visit in 2-4 weeks for pump data review and optimization.
Supporting Documentation: HbA1c:% (Result Date: //)	☐ Enroll patient in remote monitoring if applicable.
	Ordering Provider: [Provider Name]
Rationale for Insulin Pump Therapy:	Date: [MM/DD/YYYY]
 Patient requires multiple daily injections (MDI) with rapid-acting insulin. 	
 Patient exhibits significant glucose variability and insulin resistance requiring precise insulin adjustments. 	

Helpful Tip: Access our library of smart phrases for insulin pumps and CGMs at [link TBD] and upload into your EHR system for ease-of-use.