

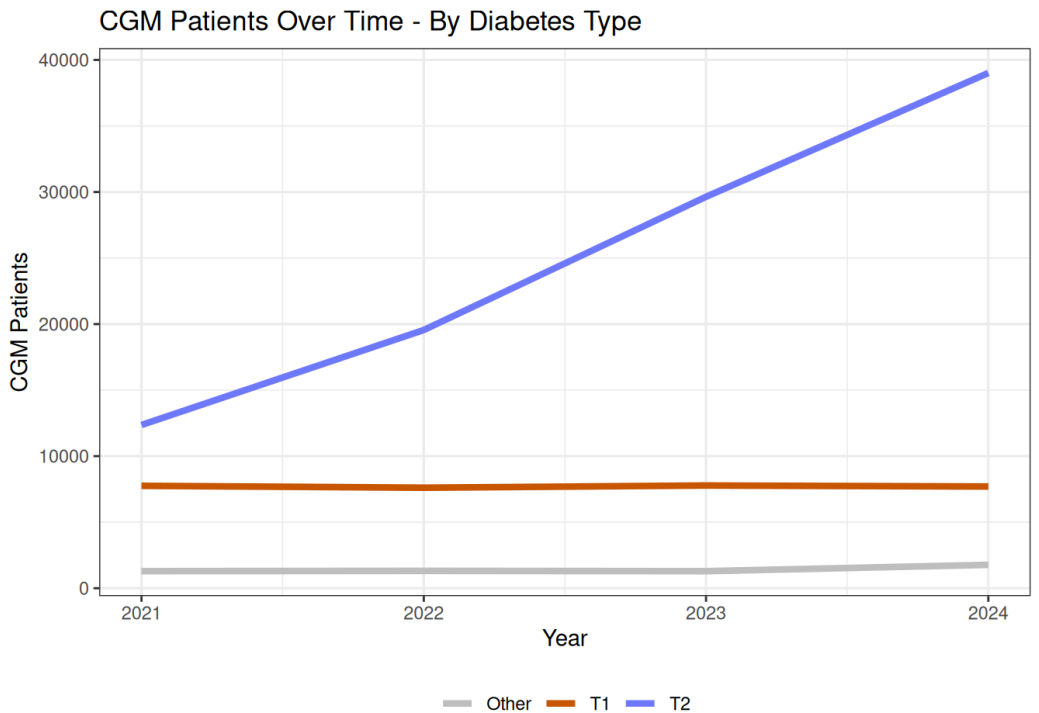


Use of Continuous Glucose Monitors (CGM)

Continuous glucose monitors (CGM) measure interstitial glucose levels continuously or intermittently with a sensor placed under the skin, a transmitter that sends the data, and a device or app to display results. CGMs can be an alternative to or supplement self-monitoring of blood glucose and can provide patients and doctors with more granular personal biofeedback data and trends. Alerts can notify users of hyper- or hypoglycemic events and some CGMs can sync with insulin pumps for insulin delivery^{1,2}. Using Georgia APCD claims data, we identified CGM trends in utilization, notably among people with diabetes.

Increases in CGM Use

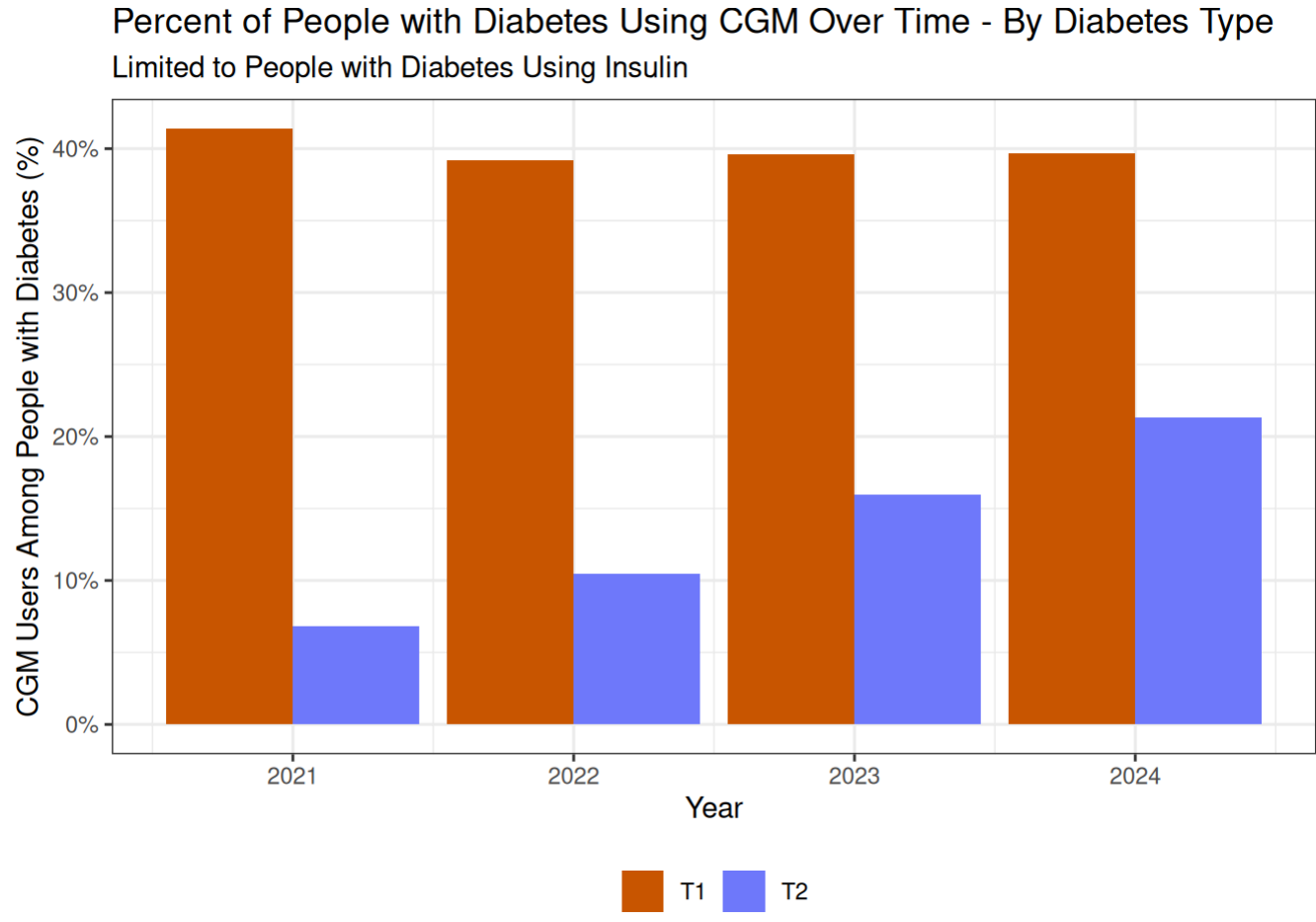
Total CGM users identified from paid and denied claims has increased 126% from 21,406 patients in 2021 to 48,483 in 2024. Users of CGMs can include athletes, patients receiving parenteral nutrition, and healthy users concerned about wellness, but the highest proportion of CGM users are patients with diabetes².



While the number of people with Type 1 (T1) diabetes and people without diabetes using CGM slightly increased, the number of number of people with Type 2 (T2) diabetes using CGM had a much larger increase due to greater numbers of people with T2 diabetes compared to people with T1 diabetes and growing awareness of potential benefits of CGM use among people with T2 diabetes.

CGM Use Among Insulin-Dependent People with Diabetes

Most studies and recommendations focus on people with T1 or T2 diabetes who use insulin¹. For those who use insulin, the percent of CGM users among people with T1 diabetes has been consistently about 40% in this time period. CGM users among people with T2 diabetes who use insulin tripled from 7% in 2021 to 21% in 2024.



Effective July 2023 for GA Medicaid and April 2023 for Medicare, coverage of CGM was expanded to people with diabetes receiving daily insulin or with a history of problematic hypoglycemia. Initiation of CGM for people with diabetes on insulin varied by diabetes type:

Average monthly initiation of CGM for T1:

Medicaid:

- July 2022 to June 2023: 2.02%
- July 2023 to June 2024: 2.07%

Medicare Advantage (No Fee-For-Service):

- April 2022 to March 2023: 3.11%
- April 2023 to March 2024: 2.21%

Average monthly initiation of CGM for T2:

Medicaid:

- July 2022 to June 2023: 0.41%
- July 2023 to June 2024: 0.60%

Medicare Advantage (No Fee-For-Service):

- April 2022 to March 2023: 0.88%
- April 2023 to March 2024: 1.21%

Demographics of CGM Users

For people with both T1 and T2 diabetes using insulin, CGM utilization patterns were similar when comparing usage among men and women. However, the percentage of CGM users among people with diabetes using insulin did vary by age group:

T1:

High CGM use among people with T1 diabetes aged 0-17 years old:

- ♀ Female: 70%
- ♂ Male: 69%

Lowest CGM use among 18-34 year-olds though use increases with age until it peaks with the 65-74 age group:

- ♀ Female: 73%
- ♂ Male: 72%

Percentage of CGM Users by Age and Sex Limited to People with T1 Diabetes Using Insulin

T2:

Overall, CGM use among of people with T2 diabetes was lower compared to people with T1 diabetes though trends were similar to T1, with lowest use among 18-34 year-olds and increasing thereafter

Highest CGM use was among patients aged 0-17 years old:

- ♀ Female: 44%
- ♂ Male: 40%

Percentage of CGM Users by Age and Sex Limited to People with T2 Diabetes Using Insulin

Note: Without Medicare Fee-For-Service data, utilization in the 65-74 and 75+ age groups may be underestimated in APCD claims

People with diabetes in urban and rural counties used CGM at similar rates with only a slight 3% to 2% difference in percent of insulin-dependent patients using CGM for both people with T1 and T2 diabetes.

References

¹Rodbard D. Continuous Glucose Monitoring: A Review of Recent Studies Demonstrating Improved Glycemic Outcomes. *Diabetes Technol Ther.* 2017;19(S3):S25-S37.

²Klonoff DC, Nguyen KT, Xu NY, Gutierrez A, Espinoza JC, Vidmar AP. Use of Continuous Glucose Monitors by People Without Diabetes: An Idea Whose Time Has Come? *Journal of Diabetes Science and Technology.* 2022;17(6):1686-1697.

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