

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid www.mass.gov/masshealth

> MassHealth All Provider Bulletin 349 August 2022

TO: All Providers Participating in MassHealth

FROM: Amanda Cassel Kraft, Assistant Secretary for MassHealth Amade Cal Fat

RE: Coverage and Reimbursement Policy for Bebtelovimab

Background

This bulletin provides information around future pricing of bebtelovimab, a monoclonal antibody used for the treatment of Coronavirus Disease 2019 (COVID-19).

This bulletin applies to members enrolled in MassHealth fee-for-service, the Primary Care Clinician (PCC) Plan, Primary Care ACOs (PCACOs), and MassHealth Limited. MassHealth Accountable Care Partnership Plans (ACPPs), managed care organizations, Senior Care Organizations (SCOs), One Care plans, and Programs of All-inclusive Care for the Elderly (PACE) must provide plan-covered services to enrollees in an amount, duration, and scope that is no more restrictive than MassHealth fee-for-service coverage for such services, including as set forth in this bulletin.

Billing for Bebtelovimab

EOHHS previously added coverage for bebtelovimab, a monoclonal antibody used for the treatment of COVID-19, using code Q0222 SL with a price of zero because it was supplied by the federal government at no cost to providers. EOHHS understands that federal supplies may not be available in the future and that providers will need to begin purchasing the product. For supplies that are not free, EOHHS intends to pay eligible providers (other than pharmacies) at the same rate as Medicare, using code Q0222, as described in the table that follows. Pharmacies will be reimbursed for bebtelovimab consistent with 101CMR 331: *Prescribed Drugs*.

For free supplies, providers should continue billing Q0222 SL. EOHHS will formally establish the rate for this code through administrative bulletins or amendments to relevant pricing regulations, and MassHealth will issue transmittal letters that formally add this code to the relevant provider manuals.

Code	Description	Rate	Effective Date
Q0222	Injection, bebtelovimab, 175 mg	\$2394.00	08/15/2022

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MassHealth Website

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Questions

Dental Services

Phone: (800) 207-5019; TTY: (800) 466-7566

Long-Term Services and Supports

Phone: (844) 368-5184 (toll free) Email: <u>support@masshealthltss.com</u> Portal: MassHealthLTSS.com Mail: MassHealth LTSS PO Box 159108 Boston, MA 02215 Fax: (888) 832-3006

All Other Provider Types

Phone: (800) 841-2900. TDD/TTY: 711. Email: <u>providersupport@mahealth.net</u> Fax: (617) 988-8974

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