***Commonwealth of Massachusetts***

***Executive Office of Health and Human Services***

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MassHealth

# Nursing Facility Bulletin 160

February 2021

**TO**: Nursing Facilities Participating in MassHealth

**FROM**: Daniel Tsai, Assistant Secretary for MassHealth [Signature of Daniel Tsai]

RE: Coverage and Payment for Coronavirus Disease 2019 (COVID-19) Monoclonal Antibody Product Infusion administered by Nursing Facilities

## Background

The FDA recently issued Emergency Use Authorizations (EUA) for two investigational monoclonal antibody therapies, bamlanivimab (Eli Lilly) and casirivimab/imdevimab (Regeneron), for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients with positive COVID-19 test results who are at high risk for progressing to severe COVID-19 and/or hospitalization. MassHealth will cover this treatment when administered to MassHealth members in nursing facilities for dates of service as specifically listed below, consistent with the terms of the EUA.

There is no cost sharing for COVID-19 testing or treatment, including these new treatment codes.

This bulletin applies to members enrolled in MassHealth fee-for-service, the Primary Care Clinician (PCC) Plan, or a Primary Care Accountable Care Organization (ACO) who are residing in a nursing facility participating in the MassHealth program. Information about coverage through MassHealth Managed Care Entities (MCEs) and the Program for All-inclusive Care for the Elderly (PACE) will be included in a forthcoming MCE bulletin.

## Payment for COVID-19 Monoclonal Antibody Product Infusion

Effective for dates of service as specifically listed in the table below, providers enrolled in the MassHealth nursing facility program may bill and receive payment for the administration of monoclonal antibody products at the rates identified below.

MassHealth expects to pay rates that are consistent with Medicare rates for these services. Specifically, MassHealth expects to pay the following rates to nursing facility providers for the following codes. These rates will be formally established through the promulgation of emergency amendments to 101 CMR 206.00: *Standard Payments to Nursing Facilities* by the Executive Office of Health and Human Services (EOHHS).

| **Code** | **Allowable Fee** | **Description of Code** | **Effective for Dates of Service On or After** |
| --- | --- | --- | --- |
| Q0239 SL | $0.00 | Injection, bamlanivimab, 700 mg | 1/25/2021 |
| M0239 | $309.60 | Intravenous infusion, bamlanivimab-xxxx, includes infusion and post administration monitoring | 1/25/2021 |
| Q0243 SL | $0.00 | Injection, casirivimab and imdevimab, 2400 mg | 1/25/2021 |
| M0243 | $309.60 | Intravenous infusion, casirivimab and imdevimab includes infusion and post administration monitoring | 1/25/2021 |

As noted above, the modifier “SL” indicates state-supplied antibodies. This modifier is to be applied to codes to identify administration of antibodies provided at no cost, whether by the Massachusetts Department of Public Health (DPH); another federal, state, or local agency; or a manufacturer. If providers receive the antibodies from one of these sources at no cost, providers must bill the code for the antibodies themselves, with modifier SL, and the codes for intravenous infusion of the antibodies. MassHealth will pay $0 for antibodies billed with the modifier SL, and the rates listed above for the intravenous infusion of the antibodies.

Criteria for a nursing facility to receive an allocation of bamlanivimab from DPH is described under [Guidance for Allocation of COVID-19 Monoclonal Antibody Therapeutics in Non-Hospital Settings](https://www.mass.gov/doc/guidance-for-allocation-of-covid-19-monoclonal-antibody-therapeutics-in-non-hospital-settings/download). Nursing facilities electing to receive allocations of bamlanivimab must submit the [Resource Request Form](https://www.mass.gov/doc/bamlanivimab-resource-request-form/download) to DPH to confirm their capabilities and capacity to safely perform infusions and agree to equitably deliver bamlanivimab to residents authorized under EUA and consistently with the guidance.

Note that bamlanivimab and casirivimab/imdevimab may be administered only in nursing facilities settings that have immediate access to medications to treat a severe infusion reaction, such as anaphylaxis, and the ability to activate the emergency medical system (EMS), as necessary. Review the [Fact Sheet for Health Care Providers EUA of Bamlanivimab](http://pi.lilly.com/eua/bamlanivimab-eua-factsheet-hcp.pdf) and [Fact Sheet for Health Care Providers: Emergency Use Authorization (EUA) of Casirivimab and Imdevimab](https://www.fda.gov/media/143892/download) regarding the limitations of authorized use. DPH has developed a [Bamlanivimab Infusion Checklist](https://www.mass.gov/doc/bamlanivimab-infusion-checklist/download) to serve as a logistical guide and safety checklist for facilities providing bamlanivimab to their residents.

Providers billing MassHealth for the services described in this bulletin must comply in all respects with all other applicable laws, regulations, subregulatory guidance, and contracts. MassHealth expects to issue billing instructions to nursing facilities to ensure facilities are able to bill these codes correctly.

## Payment for COVID-19 Treatment for Uninsured Individuals and MassHealth Limited

COVID-19 treatment for uninsured individuals, as defined by the Health Resources and Services Administration (HRSA), may be paid for through the federal COVID-19 Uninsured Program Portal at Health Resources and Services Administration (HRSA) portal, including nursing facility services necessitated by a COVID-19 diagnosis. Nursing facility providers are responsible for checking the Eligibility Verification System (EVS) for MassHealth eligibility and other sources to determine whether a resident is insured.

COVID-19 treatment services, including the monoclonal antibody treatments described in this bulletin, provided to an individual who is a Health Safety Net patient only and who does not have any coverage (including MassHealth Limited), should be billed to the federal portal. Likewise, COVID-19 treatment services provided to an individual in the Children’s Medical Security Plan only and who does not have any coverage (including MassHealth Limited) should be billed to the federal portal.

COVID-19 treatment, including nursing facility services necessitated a COVID-19 diagnosis and the monoclonal antibody treatments described in this bulletin, is considered an emergency service and therefore covered under MassHealth Limited.

## Additional COVID-19 Monoclonal Antibody Treatments

MassHealth may add coverage of new codes as additional COVID-19 monoclonal antibody treatments come to market and may publish the new codes and associated rates in subsequent provider and administrative bulletins.

## MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](http://www.mass.gov/masshealth-provider-bulletins) web page.

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

## Questions

If you have any questions about the information in this bulletin, please contact the Long Term Services and Supports (LTSS) Provider Service Center.

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