Washington State Health Care Authority

Apple Health (Medicaid) Monoclonal Antibody Treatment for COVID-19 clinical policy

In this time of the COVID-19 pandemic, the Health Care Authority is aware that usual and customary ways of providing and billing/reporting services may not be feasible. It is also understood that different providers will have different capabilities. Therefore, in the interest of public health, HCA's Apple Health (Medicaid) program is trying to be as flexible as possible and is creating new policies that will allow you to provide medically necessary services and bill or report the encounter with the most appropriate code you determine applicable, using the guidance below.

Monoclonal Antibody Treatment for COVID-19 Clinical Policy

The following policy applies to fee-for-service (FFS) and HCA-contracted managed care organizations (MCO).

Cost

The monoclonal antibody products have been purchased by the federal government and are being provided free of charge. The Washington State Department of Health is allocating doses to facilities that abide by their requirements.

Providers

Healthcare providers must communicate to patients or parents/caregivers, as age appropriate, information consistent with the Casirivimab plus Imdevimab Fact Sheet for Patients, Parents and Caregivers or Bamlanivimab and Etesevimab Fact Sheet for Patients, Parents and Caregivers (and provide a copy of the Fact Sheet) prior to the patient receiving the medication, including:

On April 16, the Food & Drug Administration (FDA) revoked the Emergency Use of Authorization (EUA) for bamlanivimab, when administered alone. Due to this change, effective for dates of services on and after April 16, 2021, Apple Health (Medicaid) will no longer pay for HCPCS codes M0239 or Q0239.
FDA has authorized the emergency use of bamlanivimab and etesevima or casirivimab plus imdevimab for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization [see Limitations of Authorized Use].

- The patient or parent/caregiver has the option to accept or refuse bamlanivimab and etesevima or casirivimab plus imdevimab.
- The significant known and potential risks and benefits of bamlanivimab and etesevima or casirivimab plus imdevimab, and the extent to which such potential risks and benefits are unknown.
- Information on available alternative treatments and the risks and benefits of those alternatives, including clinical trials.
- Patients treated with bamlanivimab and etesevima or casirivimab plus imdevimab should continue to self-isolate and use infection control measures (e.g., wear mask, isolate, social distance, avoid sharing personal items, clean and disinfect "high touch" surfaces, and frequent handwashing) according to CDC guidelines.

Reimbursement information and billing guidance

The monoclonal antibody and their specific administration codes listed in the table below, are covered by Apple Health (Medicaid) for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization.

(Revised 7/12/2021)

When COVID-19 monoclonal antibody doses are provided by the government without charge, providers should only bill for the administration. Health care providers should not include the COVID-19 monoclonal antibody codes on the claim when the product is provided for free.

Please see the COVID-19 fee schedule for rates and effective dates.

Code	Short Descripton	Labeler name	Vaccine /Procedure Name
Q0243	casirivimab and imdevimab	Regeneron	Injection, casirivimab and imdevimab, 2400 mg
M0243	casirivi and imdevi infusion	Regeneron	intravenous infusion, casirivimab and imdevimab includes infusion and post administration monitoring
M0244	Casirivi and imdevi infus hm	Regeneron	Intravenous infusion, casirivimab and imdevimab includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the covid-19 public health emergency
Q0245	bamlanivimab and etesevima	Eli Lilly	Injection, bamlanivimab and etesevimab, 2100 mg
M0245	bamlan and etesev infusion	Eli Lilly	intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring
M0246	bamlan and etesev infusion	Eli Lilly	Intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the covid-19 public health emergency.

Please see the Monoclonal Antibody Treatment for COVID-19 medical policy for more information related to these and other COVID -19 Monoclonal Antibody Treatments

Outpatient hospital facility

CMS established modifier "PN" (Non-excepted service provided at an off-campus, outpatient, provider-based department of a hospital) to identify and pay non-excepted items and services billed on an institutional claim. For Monoclonal antibody treatment, non-excepted off-campus provider-based departments of a hospital are required to report this modifier on each claim line with a HCPCS for non-excepted items and services.

As of 1/1/21 the PN modifier will trigger an EAPG payment reduction of 54 % for these claims.

Providers are subject to post pay review. If it found that modifier PN should have been used at the time of billing, recoupment of payment may occur.

Documentation

Healthcare providers must document in the patient's medical record that the patient/caregiver has been:

- Given the Casirivimab plus Imdevimab Fact Sheet for Patients, Parents and Caregivers or Bamlanivimab and Etesevimab Fact Sheet for Patients, Parents and Caregivers
- Informed of alternatives to receiving these medications, and
- Informed that these medications are unapproved drugs that are authorized for use under Emergency Use Authorization.