



January 20, 2021

RE: Coverage of COVID-19 Monoclonal Antibodies

Providers,

Empower will be following the DMS Coverage of COVID-19 Monoclonal Antibodies consistent with CMS's coverage and payment for COVID-19 testing and treatment.

The following codes and rates will be available for monoclonal antibodies.

Code	Short Description	Fee	Effective Date
Q0239	BAMLANIVIMAB-XXXX	\$.01	November 9, 2020
M0239	BAMLANIVIMAB-XXXX INFUSION	\$309.60	November 9, 2020
Q0243	CASIRIVIMAB AND IMDEVIMAB	\$.01	November 21, 2020
M0243	CASIRI AND IMBDEVI INFUSION	\$309.60	November 21, 2020

To see the DMS Memorandum regarding Coverage of COVID-19 Monoclonal Antibodies:

[https://humanservices.arkansas.gov/wp-content/uploads/1a\\_Memorandum\\_DMS-48\\_monoclonals.pdf](https://humanservices.arkansas.gov/wp-content/uploads/1a_Memorandum_DMS-48_monoclonals.pdf)

To see a summary of all COVID-19 provider alerts for Empower, including billing information:

[https://docs.google.com/spreadsheets/d/1UhNQiFWv1dqg6C74x5tw5U2zMt1euaNlk2zAO2vxl\\_Y/edit?usp=sharing](https://docs.google.com/spreadsheets/d/1UhNQiFWv1dqg6C74x5tw5U2zMt1euaNlk2zAO2vxl_Y/edit?usp=sharing)

If you have questions about this please contact [empowerhealthcaresolutionspr@empowerhcs.com](mailto:empowerhealthcaresolutionspr@empowerhcs.com)

Thank you,

Empower Healthcare Solutions