

3007 Tilden Street, NW POD 3N Washington, DC 20008 855-798-4244 **MedStarFamilyChoiceDC.com**

October 4, 2022

PROVIDER ALERT: COVERAGE AND REIMBURSEMENT RATE FOR BEBTELOVIMAB 175

The billing and reimbursement rates for the administration of COVID-19 Monoclonal Antibody infusions are based on the published guidance by CMS. Bebtelovimab 175 is no longer being provided by the U.S. government free of charge.

The chart below provides the coverage effective date and reimbursement rate.

HCPCS	DESCRIPTION	LABELER	COVERAGE/RATE
00000	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E1: 1:1	2/11/22 - 8/14/22 Not Covered
Q0222	Bebtelovimab 175	Eli Lily	Effective 8/15/22 Covered \$2,394.00

For questions concerning this Provider Alert, please contact the MFC-DC Provider Relations department, Monday through Friday, 8 a.m. to 5:30 p.m.

Phone: 855-798-4244, Option 2

Email: mfcdc-providerrelations@medstar.net

