



Additional information on the HHS Update of Bebtelovimab Commercialization can be accessed [here](#).

WHEN WILL THE US GOVERNMENT (USG) SUPPLY OF BEBTELOVIMAB END?

Last threshold to be distributed the week of September 6th, 2022

WHAT SHOULD PROVIDERS DO WITH USG SUPPLIED BEBTELOVIMAB?

The Federal government and VDH places a high priority on equitable availability of product. If a facility does not serve the under and/or uninsured, VDH encourages these locations to utilize the [redistribution process](#) to reallocate USG product for this vulnerable population. Providers will be able to differentiate between commercial and USG-procured product via unique batch numbers.

NOW THAT BEBTELOVIMAB IS AVAILABLE COMMERCIALY, HOW DO YOU ORDER BEBTELOVIMAB SUPPLY?

Those with an existing AmerisourceBergen (ABC) account have automatic access to order product. Those who will need to create an account can email service@asdhealthcare.com to get assistance in creating an ABC account.

DO REPORTING REQUIREMENTS FOR BEBTELOVIMAB STILL APPLY WITHIN HPOP?

Reporting inventory and administration of all USG-procured and distributed supply of **Bebtelovimab** remains a requirement until all USG-procured **Bebtelovimab** is consumed (a provider site's inventory is depleted). Please continue to log into your HPOP account to report twice each week, at minimum. Details about how to report commercially purchased product inventory and administrations are still in development and will be shared when available.

WHAT IS THE MINIMUM AND MAXIMUM ORDERING QUANTITY OF BEBTELOVIMAB THROUGH AMERISOURCEBERGEN?

There will be no minimum order quantity. A maximum order limit of **270 doses** per week per provider site will be imposed. Exceptions for weekly dose quantities beyond 270 will be evaluated on a case-by-case basis. Please note that to limit the potential for overstocking, no returns will be accepted for Bebtelovimab.

WHAT IS THE REIMBURSEMENT OF BEBTELOVIMAB?

Providers should **not** bill patients or insurance for product if received through the USG-procured inventory. Providers should only bill Medicare for commercially-purchased products. **No** cost sharing (no copayment/coinsurance or deductible) for monoclonal antibody therapies to treat COVID-19 for people with Medicare fee-for-service and Medicare Advantage beneficiaries will be required for the duration of the calendar year in which the COVID-19 public health emergency ends.

For commercially purchased supply, Medicaid will pay for the cost of the Bebtelovimab and its administration without the requirement for cost sharing through the last day of the first calendar quarter that begins one year after the last day of the Public Health Emergency.

For more information, please visit the following CMS sites:

[COVID-19 Monoclonal Antibodies](#)

[COVID-19 Vaccine and Monoclonal Antibodies](#)