

# URGENT MEMORANDUM

To: Chief Financial Officers – All Hospitals

From: Dennis N. Phelps – Deputy Director-Audit & Compliance

Date: May 10, 2021

Re: Reporting and Charging for the Administration of Monoclonal Antibody Infusions

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**William Henderson**  
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Effective May 6, 2021, CMS increased the Medicare payment amount for administering monoclonal antibody infusions. The new payment allowance for administration of monoclonal antibody infusions, is \$450.00.

Consistent with its policy for COVID-19 testing, the HSCRC is setting statewide standardized tiered outpatient Clinic (CL) charges based on Medicare Payment Allowances for the administration of monoclonal antibody infusions for all patients for the duration of Maryland’s State of Emergency.

All hospitals are to set the number of RVUs for the administration of monoclonal antibody infusions is \$450.00 per infusion. Hospitals are to adjust the charge per RVU on all other CL visits/procedures to maintain unit rate compliance.

There should be no additional E&M CL facility fee charges for patients receiving the monoclonal antibody infusions. Should these patients require services in addition to administration, because of complications for instance, such services may be billed by a physician or other clinician who can bill for his/her professional services, but not by the hospital. Both the provider and the hospital may not charge for the administration of monoclonal antibody infusions; only one entity may bill.

If you have any questions, you may contact me at [dennis.phelps@maryland.gov](mailto:dennis.phelps@maryland.gov).