



# NETWORK *Notification*

**Notice Date:** May 13, 2025  
**To:** Ohio Medicaid Providers  
**From:** CareSource  
**Subject:** Beyfortus (nirsevimab-alip) Billing  
**Effective Date:** May 1, 2025

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## Summary

As of January 1, 2025, CPT codes **90380** and **90381** for Beyfortus (nirsevimab-alip) are no longer covered on the Ohio Department of Medicaid Provider-Administered Pharmaceuticals fee schedule. Vaccines for Children (VFC)-enrolled providers should continue to request their Beyfortus supply through the VFC program.

**Effective May 1, 2025, HCPCS codes 90380 and 90381 submitted to CareSource will reject as not covered.** Providers should transition billing requests for Beyfortus (nirsevimab-alip) to the appropriate supplier after the end of the current RSV season. You may continue to submit the administration code, **96372**, to CareSource.

Beyfortus continues to be covered through Gainwell SPBM as well if dispensed by a pharmacy. For more information, visit [spbm.medicaid.ohio.gov](https://spbm.medicaid.ohio.gov).

### Billing Summary (Effective May 1, 2025)

#### VFC enrolled providers:

- Submit to CareSource
  - CPT 96372 – administration of prophylactic injection (Beyfortus), IM

#### Non-VFC providers:

- Submit to Gainwell SPBM
  - CPT 90380 – respiratory syncytial virus, monoclonal antibody, seasonal; 0.5mL
  - CPT 90381 – respiratory syncytial virus, monoclonal antibody, seasonal; 1 mL
- Submit to CareSource
  - CPT 96372 – administration of prophylactic injection (Beyfortus), IM

## Questions?

For any questions, please contact CareSource's Provider Services at **1-800-488-0134**, Monday through Friday from 7 A.M. to 8 P.M. Eastern Time (ET).

OH-MED-P-3787733

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