



## COVID-19

# Monoclonal antibody therapy

*Frequently asked questions*

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Looking for treatment? Here's what to do:

If you have tested positive for COVID-19, you may be able to get monoclonal antibody treatment. This treatment can help keep you from getting seriously sick and keep you out of the hospital.

**Find out if you're eligible:** You might be eligible for treatment if you have tested positive for COVID-19, your symptoms started within the last 10 days, you aren't hospitalized or on oxygen due to COVID-19, and you are at risk of getting very sick without treatment. People as young as 12 years old can get monoclonal antibody treatment.

People at risk of getting very sick include:

- People who are 65 years old or older.
- People who are obese or overweight. This includes adults with a BMI of 25 or more. It also includes children age 12 to 17 who have a [BMI](#) in the 85th percentile or higher for their age and gender.
- Pregnant people.
- People with [certain underlying medical conditions](#).

**How to get treatment:** There are three ways to get treatment in Colorado.

1. Make an appointment at a state-led clinic. **You do not need a prescription to make an appointment at a state-led clinic. However, you must have an appointment in order to receive treatment.** Call the COVID-19 vaccine hotline at 1-877-CO VAX CO (1-877-268-2926) for help making an appointment. The hotline is available Monday through Friday, 8 a.m. to 8 p.m.; Saturday and Sunday, 9 a.m. to 6 p.m. MT. The call center will be closed on Nov. 25, Dec. 25, and Jan. 1 for the holidays. You can also [find a list of upcoming available appointments at COMassVax.org](#).
2. Talk with your doctor or health care provider. Let them know you have tested positive for COVID-19 and want to get monoclonal antibody treatment. If you are eligible, your health care provider may be able to help you find a place to get treatment.
3. Reach out to a health care provider who is offering treatment in Colorado. [Click here for a map of places where you can get treatment](#). You can also find places to get

treatment at [The National Infusion Center Association](#) or the [HHS Protect Locator](#).

### **I don't have a doctor. Can I still get monoclonal antibody therapy?**

Patients are able to make an appointment for monoclonal antibody treatment at a state-led clinic. **You do not need a prescription to make an appointment at a state-led clinic.** However, you must have an appointment in order to receive treatment. You can call the COVID-19 vaccine hotline at 1-877-CO VAX CO (1-877-268-2926) for help making an appointment. The hotline is available Monday through Friday, 8 a.m. to 8 p.m.; Saturday and Sunday, 9 a.m. to 6 p.m. MT. The call center will be closed on Nov. 25, Dec. 25, and Jan. 1 for the holidays. You can also [find a list of upcoming available appointments at COMassVax.org](#).

### **Does monoclonal antibody therapy cost anything?**

Monoclonal antibody therapy is free. It is paid for through Medicaid, Medicare, and many health insurance plans. However, some providers may charge an administration fee.

### **What are monoclonal antibodies? What is monoclonal antibody (mAb) therapy?**

Antibodies are proteins that exist in our immune system. They recognize and defend against harmful viruses and bacteria. Monoclonal antibodies are made in a laboratory and designed to target a specific bacteria or virus, like SARS-CoV-2, which is the virus that causes COVID-19.

Monoclonal antibodies are given to patients by infusion (an "IV") or subcutaneous injection (shots). They must be given before someone is hospitalized with COVID-19.

**Monoclonal antibody therapy is not a substitute for vaccination against COVID-19. Getting vaccinated is the best way to keep from getting sick with COVID-19.**

### **How do monoclonal antibodies work against COVID-19?**

Monoclonal antibodies work against COVID-19 by attaching to the virus in order to block it from entering human cells. Monoclonal antibody proteins also "mark" the COVID-19 virus so it can be broken down by the immune system and cleared from the body.

### **Who can receive monoclonal antibody treatments?**

Monoclonal antibodies can be used for treatment in someone who has been diagnosed with COVID-19 or for post-exposure prophylaxis in people who have been exposed but have not yet tested positive.

For treatment, monoclonal antibody therapy is approved for use to prevent progression COVID-19 disease in adults and pediatric patients (age 12-17 years and weighing at least 40

kg) who have tested positive for COVID-19 and:

- Are at high risk of developing severe illness; AND
- Are not yet hospitalized; AND
- Have symptoms that started in the past 10 days.

For post-exposure prophylaxis, monoclonal antibody therapy is approved for use to prevent COVID-19 after exposure in adults and pediatric patients (age 12-17 years and weighing at least 40 kg) who:

- Are at high risk of developing severe illness; AND
- Are not fully vaccinated OR are not expected to adequately respond to a COVID-19 vaccination (for example, people with immunocompromising conditions and those taking immunosuppressive medications); AND
- Have been exposed to an individual infected with COVID-19 consistent with close contact criteria per the CDC (someone who has been within six feet of an infected person for a total of 15 minutes or more over a 24-hour period) OR are at high risk of exposure to an individual infected with COVID-19 because of occurrence of COVID-19 infection in other individuals in the same institutional setting.

If you are not fully vaccinated for COVID-19 (or are concerned you may not respond well to a vaccine) and have been exposed to COVID-19, contact your health care provider to find out if you are eligible for monoclonal antibody therapy. State-led sites are currently not offering monoclonal antibody therapy prophylactically; however, an enrolled provider may be able to offer prophylactic monoclonal antibody therapy.

**What medical conditions or factors may place adults and pediatric patients (age 12-17 years and weighing at least 40 kg) at higher risk for severe COVID-19?**

- Older age ( $\geq 65$  years of age).
- Obesity or being overweight (adults with BMI  $> 25$  kg/m, or if age 12-17 years, have BMI  $\geq 85$ th percentile for their age and gender based on CDC growth charts).
- Pregnancy.
- Chronic kidney disease.
- Diabetes.
- Immunosuppressive disease or immunosuppressive treatment.
- Cardiovascular disease (including congenital heart disease) or hypertension.
- Chronic lung diseases (for example, chronic obstructive pulmonary disease, asthma [moderate-to-severe], interstitial lung disease, cystic fibrosis and pulmonary hypertension).
- Sickle cell disease.
- Neurodevelopmental disorders (for example, cerebral palsy) or other conditions that confer medical complexity (for example, genetic or metabolic syndromes and severe

congenital anomalies).

- Having a medical-related technological dependence (for example, tracheostomy, gastrostomy, or positive pressure ventilation not related to COVID-19).
- Other medical conditions or factors (for example, race, or ethnicity) may place individual patients at high risk for severe COVID-19.

### **How do I find out if I'm eligible for monoclonal antibody therapy?**

You may be eligible if you have tested positive for COVID-19, have mild to moderate symptoms, and are at high risk of developing severe illness; or if you are not fully vaccinated (or may not respond to vaccine), have been exposed to COVID-19, and are at risk of developing severe illness.

Monoclonal antibody therapy is not for use in patients who are hospitalized, on oxygen for COVID-19 treatment, or require an increase in baseline oxygen flow rate due to COVID-19.

### **What if I'm not eligible? Can I still receive monoclonal antibody therapy?**

Those not belonging to one of the high-risk groups will not be considered under the FDA authorization at this time.

### **What monoclonal antibody therapy is available?**

The currently authorized products are bamlanivimab/etesevimab, REGEN-COV (casirivimab in combination with imdevimab) and sotrovimab. Bamlanivimab/etesevimab and REGEN-COV are also authorized to be used for post-exposure prophylaxis in people exposed to COVID-19.

### **How is monoclonal antibody therapy administered?**

Monoclonal antibody therapy is administered intravenously (IV) or subcutaneously (SQ) at hospitals, outpatient infusion centers, and doctors' offices. IV administration requires a single infusion administered over an hour or less. SQ administration involves four injections. Currently, only REGEN-COV is available for SQ administration. IV and SQ administration are followed by one hour of monitoring.

### **What are the benefits of monoclonal antibody therapy?**

For people at high risk of getting very sick from COVID-19, monoclonal antibody treatment given early can significantly reduce the risk of progressing to severe COVID-19 disease and needing hospitalization. The treatment can also shorten the duration of COVID-19 symptoms. Monoclonal antibody therapy given for post-exposure prophylaxis can reduce the risk of developing COVID-19 disease.

### **Are there any side effects?**

Most people tolerate monoclonal antibody infusions very well. Some people may experience infusion-related side effects, such as nausea and dizziness, that are short-lived and go away on their own. As with any medication, there is the potential for mild or more severe allergic reactions, which are uncommon.