







NOVEMBER 2025

KMAP GENERAL BULLETIN 25257

Coverage of Clesrovrimab (Enflonsia)

Effective with dates of service on or after August 4, 2025, Kansas Medicaid will add coverage of the monoclonal antibody Clesrovimab (Enflonsia) to prevent respiratory syncytial virus (RSV) in infants. This treatment is approved to cover newborns and infants younger than eight (8) months of age born in or going into their first respiratory season.

The new RSV Monoclonal Antibody CPT code is 90382. Clesrovimab (Enflonsia) has been added to the Vaccines for Children (VFC) program and Kansas Medicaid will reimburse for administration only of the monoclonal antibodies.

Administrative Codes:

The administration codes used for the injection of Clesrovimab (Enflonsia) should be 96380 or 96381 and reimbursed at \$20.26.

Correct coding guidelines, as well as Food and Drug Administration (FDA) and Centers for Disease Control (CDC) recommendations must be followed.

CDC recommendations can be found here.

Note: The rates noted in this bulletin are subject to future changes. Providers should check the Kansas Medical Assistance Program (KMAP) website for the most up-to-date rates.

Note: The effective date of the policy is August 4, 2025. The implementation of State policy by the KanCare Managed Care Organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing completion dates once the policy is implemented.

KMAP

Kansas Medical Assistance Program

- Bulletins
- Manuals
- Forms

Customer Service

- 1-800-933-6593
- 7:30 a.m. 5:30 p.m. Monday - Friday

For changes resulting from this bulletin, view the updated *Home Health Agency Fee-for-Service Provider Manual*, page AI-4 and *General Benefits Fee-for-Service Provider Manual*, page 2-37.