



Monoclonal Antibody Therapy for Long-Term Care Facilities

When administered to non-hospitalized, high-risk individuals as soon as possible after positive viral testing for COVID-19 and within 7 days of symptom onset, monoclonal antibodies **may improve symptoms and reduce risk of hospitalizations and death** associated with COVID-19. Monoclonal antibodies may also be used following exposure to COVID-19 for some high-risk individuals, **but is not a substitute for vaccination.**

Have residents in your facility tested positive for COVID-19?

Long-term care facilities with high-risk residents who have had symptoms of COVID-19 for 7 days or less should be considered for treatment. High-risk residents with a known exposure may also be eligible for treatment to reduce risk of becoming seriously ill, even without testing positive.



Step 1: Resident tests positive for COVID-19, develop symptoms, and answer yes to high-risk conditions.



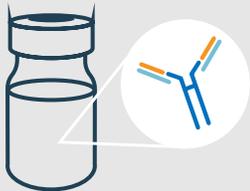
Step 2: Contact health care provider for treatment referral.



Step 3: Contact [Regional Healthcare Coalition](#) or [Local Health Department](#) for treatment delivery options.

Email mdhhs-covid-therapies@michigan.gov for monoclonal antibody questions and support.

What are monoclonal antibodies?



Monoclonal antibodies (mAbs) are **proteins developed in a laboratory**. They act like natural antibodies to attack and neutralize the virus.

Monoclonal antibody therapies are administered through an intravenous (IV) infusion. The federal government is distributing antibody supplies **at no cost to individuals**.

Medicare, Medicaid, and most third-party insurers cover the infusion cost. Uninsured individuals can still receive mAb as providers can submit for reimbursement to the HRSA Uninsured Program.

Who qualifies for monoclonal antibody therapy?

There are monoclonal antibody therapy options for those who are at increased risk of hospitalization or death, and are not hospitalized when treatment begins. Those who are immunocompromised or not up to date on COVID-19 vaccine are particularly at risk, as well as those with any of the following conditions identified in the Emergency Use Authorization:

- Older age (for example: 65 years and older)
- Obesity or being overweight (Body Mass Index >25)
- Pregnancy
- Chronic kidney disease
- Diabetes
- Immunosuppressive disease or are receiving immunosuppressive treatment
- Cardiovascular disease (including congenital heart disease) or hypertension
- Chronic lung diseases (for example: COPD or moderate to severe asthma)
- Sickle cell disease
- Neurodevelopmental disorders (for example: cerebral palsy) or other complexity conditions
- Medical-related technological dependence (for example: tracheostomy or gastrostomy)
- Other [medical conditions or factors](#) that may place the resident at high risk for progression to severe COVID-19