

TO: Vermont Health Care Providers and Health Care Facilities
FROM: Mark Levine, MD, Commissioner of Health

Prioritize the Most Vulnerable Patients for Outpatient COVID-19 Therapies

BACKGROUND:

Highly effective therapies against COVID-19 are now available for outpatients testing positive for SARS-CoV-2 who are [at risk of developing severe illness](#). These therapies include the monoclonal antibody preparation sotrovimab (Xevudy) as well as the following antivirals: remdesivir (Veklury), nirmatrelvir/ritonavir (Paxlovid), and molnupiravir (MK-4482).

Limited supply and logistical challenges of administering these therapies require clinicians and facilities to prioritize administration to those at risk of developing severe disease to minimize the morbidity and mortality of COVID-19. A sufficient supply of these medications is not expected for at least another two months.

Infusion locations across the state are administering sotrovimab and remdesivir preferentially to the highest risk patients using [prioritization criteria](#) announced by the National Institutes of Health. This centralized prioritization process is highly time-intensive, and an equivalent allocation process is difficult to apply to the decentralized outpatient prescribing of medications Paxlovid and molnupiravir.

REQUESTED ACTION:

Clinicians are expected to limit the ordering and prescribing of the above therapeutics for COVID-19, to patients within the top two NIH high risk tiers, i.e., those who meet one the following highest risk criteria, unless otherwise determined by your regional distributor:

- Immunocompromised individuals not expected to mount an adequate immune response to infection with, or vaccination against, SARS-CoV-2 due to their underlying conditions (see Immunocompromising Conditions in NIH link); or
- Unvaccinated individuals at risk of severe disease (anyone aged ≥ 75 years or anyone aged ≥ 65 years with additional risk factors); or
- Unvaccinated individuals at risk of severe disease not included in Tier 1 (anyone aged ≥ 65 years or anyone aged < 65 years with clinical risk factors).

The State is constantly assessing prioritization for congregate care settings.

We will alert clinicians once supplies of these outpatient therapies are sufficient to remove prioritization in prescribing of them.

For more information about outpatient therapies for high-risk COVID-19, please refer to the [Health Update of December 30, 2021](#).

For a list of updated sites, please use this tool to locate available therapeutics near you.

<https://covid-19-therapeutics-locator-dhhs.hub.arcgis.com/>

If you have any questions, please contact the HAN Coordinator at 802-859-5900 or vthan@vermont.gov.

HAN Message Type Definitions

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Info Service Message: Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.