

# MESSAGING & DEMAND GENERATION

## COVID-19 OUTPATIENT TREATMENTS

Updated June 2, 2022

Around the country, COVID-19 cases are increasing again, likely due in part to the emergence of Omicron subvariants (including BA.2 and BA.2.12.1) that appear more transmissible than previous variants, seasonal and regional patterns, as well as the rolling back of many mask and vaccination mandates. These rising case numbers are almost definitely a significant undercount of actual cases, given the shift to at-home testing that may result in cases being underreported. While hospitalizations remain relatively low (though they are now increasing) and deaths continue to decline (this number may tick up, as deaths lag behind case counts), there are still many people at risk of developing severe disease if they are infected—including but not limited to those who are unable or unwilling to be vaccinated or boosted against COVID-19; those who are immunocompromised; and those with a wide variety of underlying medical conditions.

However, [safe and effective treatment options are available](#). Unlike a few months prior, these options—particularly oral antivirals (namely nirmatrelvir/ritonavir, commonly known by brand name Paxlovid)—are abundant, but many people don't know they are eligible or how to get treatment. This disconnect between supply and demand threatens lives and long-term well-being and is unacceptable. Unsurprisingly, those who are already more vulnerable to COVID-19 may also face disproportionate challenges in acquiring knowledge or access to the resources necessary to get the treatments. This includes people of color impacted by structural racism, those who lack access to high-quality health care, those with underlying medical conditions, and people who live in rural areas.

The Biden administration's [Test to Treat](#) program has created a stockpile of available treatments and shipped drugs to over 2,500 sites. The administration [recently announced an expansion](#) of the program, aiming to increase supply of and access to effective treatments. In the past several weeks, [there has been a marked increase in the number of filled prescriptions for oral antivirals, a doubling of the number of sites where Paxlovid is available nationally, and an increasing commitment to ensuring equity in access to oral antivirals](#). These developments are promising, but in order to maximize the potential of this program, we must work within communities to ensure that people know that treatments exist; that they know how, when, and where to access them; and that they are equipped to advocate for themselves to receive the treatment if they are eligible. Providers must also be aware of the drug's availability and eligibility guidelines, as some have been hesitant to prescribe it due to previous supply constraints that are no longer relevant. Each of these are avoidable challenges that will cost lives if not adequately addressed.

The treatment environment has changed, but our efforts to work directly with communities, in partnership with trusted messengers, to convey technical information clearly remain important. Informational resources are presented below organized by intended audience: General Public and Providers.

### **Audience: General Public – Breaking down barriers for access and self-advocacy**

Sharing digestible information about the current landscape of safe, highly effective, and available treatments for COVID-19 is paramount to ensuring community members in need are knowledgeable self-advocates. This will promote equity and optimize patient outcomes. Filtering through changing information and navigating complex access points may be challenging and intimidating for many; our job in conjunction with CBOs and the entire public health and social supports communities should be to explain these treatments—and how to access them—clearly and concisely. Material should include key facts around the following: timing, availability, cost, testing, eligibility, and access. Below are several resources oriented toward the general public with basic, but clear information on available COVID-19 treatments. Some are regionally specific but are intended to provide examples of effective communication approaches that can be adapted for use in other settings. Please note dates of last update and be sure to link to these documents when sharing so as to incorporate any new updates as information changes. Posted and distributed informational materials can and should be accompanied by intensive informational campaigns (led by local partners

who know the communities in which they work and the best methods of communicating information widely and effectively), especially in more vulnerable community settings.

Efforts to break down informational barriers should be accompanied by support to address non-informational barriers including physical access/transportation, access to primary healthcare providers and/or prescribers, access to timely COVID-19 testing, and access to Test-to-Treat sites, among others. This is best achieved in partnership with trusted local community organizations who are knowledgeable about community needs and resources.

Resource	Source	Notes	Languages
<a href="#">Don't Delay: Test Soon and Treat Early</a> (poster)	CDC	Basic 1-page messaging doc with graphics and key messages regarding treatment availability, necessity of testing, and early timing required to start treatment. Not regionally specific.	Available in English and <a href="#">Spanish</a>
<a href="#">What You Can Do if You are at Higher Risk of Severe Illness from COVID-19</a> (poster)	CDC	1-page messaging doc outlining major categories of high risk for severe illness; emphasizes overall protection and mitigation strategies, including "If you have symptoms, test soon and treat early." Not regionally specific.	Available in English
<a href="#">COVID-19 Treatments are Available</a> (1-pager FAQ)	NYC Health Dept	Great 1-page doc for general public. Outlines purpose and types of treatment available, as well as eligibility, cost, and access points in NYC. Includes various points of contact.	Available in 14 languages, including <a href="#">Spanish</a> and <a href="#">Haitian Creole</a>
<a href="#">COVID-19: When you are sick</a> (website)		Website detailing process for recommended process when sick from COVID-19, including testing, isolating, connection to provider, avoiding getting others sick, treatment options, and information on long COVID.	Available in 5 languages
<a href="#">New Treatments for COVID-19</a> (1-pager and website)	MA Dept of Public Health	Basic but clear 1-pager and website with graphics for general public. Emphasizes treatment safety, effectiveness, and free cost in MA. Special emphasis on the importance of timely engagement with healthcare provider.	<a href="#">Available in 13 languages</a> , including <a href="#">Spanish</a> and <a href="#">Haitian Creole</a>
<a href="#">What are Oral Antivirals</a> (FAQ)	WA State Dept of Health	2-pager answering main questions about oral antivirals (how to take, issues of underlying health conditions, eligibility).	Available in English
<a href="#">What is a Pre-Exposure Prophylaxis for COVID-19</a> (PDF Infographic)		1-page infographic	<a href="#">Available in 29 languages</a>
<a href="#">Get Treated for COVID-19</a> (website)	SF Dept of Public Health	Clear website with key treatment information including cost, timing, eligibility, and contact information (detailed resources for those with CA-based insurance)	Available in English, <a href="#">Spanish</a> , <a href="#">Chinese</a> , and <a href="#">Filipino</a>
<a href="#">How Test to Treat Works for Individuals and Families</a> (website)	ASPR	Clearly explains Test to Treat Process, from testing (see <a href="#">web-based Test to Treat locator</a> or site includes phone line contact in 150 languages, as well as Disability Information Access Line) to prescription to active treatment.	Test to Treat Locator lookup (GIS service) available in English, <a href="#">Spanish</a> , and <a href="#">Chinese</a>
<a href="#">Test to Treat Locator lookup</a> (GIS service)			

## Audience: Providers – Treatment guidelines & supply awareness

While not universal, there are reports of physicians who have been hesitant to prescribe Paxlovid and other COVID-19 treatments for fear of depleting once limited supplies and a lack of clarity on who can and cannot receive the treatment. Some providers reportedly are unaware of the effectiveness and availability of treatments; complex and changing eligibility guidelines have increased this confusion.

More recently, concerns of COVID-19 recurrence in patients who have completed a 5-day treatment course of Paxlovid have emerged, creating further confusion. Limited case report information and clinical trial data is currently available; researchers are studying this recurrence potential to understand if revised recommendations are needed. Currently, Paxlovid continues to be recommended for early-stage treatment of mild to moderate COVID-19 among people at high risk of developing severe disease. However, providers should closely follow developments and updates from the CDC, FDA, NIH and other regulatory organizations as more information develops.

Below are several resources for updated treatment guidelines.

Resource	Source	Notes
<a href="#">COVID-19 Rebound After Paxlovid Treatment</a>	CDC Health Advisory	Official CDC Health Advisory distributed via the CDC Health Alert Network on May 24, 2022 to update providers, public health departments, and the public on the potential for recurrence of COVID-19 or “COVID-19 rebound.”
<a href="#">FDA Updates on Paxlovid for Health Care Providers</a>	FDA	Interview with Dr. John Farley, FDA director of the Office of Infectious Diseases, provides information for health care providers in decision making regarding Paxlovid—including case reports of patients developing recurrent symptoms after completing a course of Paxlovid. Content current as of May 4, 2022.
<a href="#">Paxlovid Patient Eligibility Screening Checklist Tool for Prescribers</a>	FDA	FDA checklist intended to support clinical decision making, outlining key elements of medical history, concomitant medications, and potential drug interactions to consider. Updated May 4, 2022.
<a href="#">More on Relapses after Paxlovid Treatment for COVID-19</a>	NEJM Journal Watch	May 4, 2022 NEJM Journal Watch article summarizing current and emerging knowledge and hypotheses regarding post-Paxlovid relapse.
<a href="#">Updated Information on Availability and Use of Treatments for Outpatients with Mild to Moderate COVID-19 Who are at Increased Risk of Severe Outcomes of COVID-19</a>	CDC Health Advisory	Official CDC Health Advisory distributed via the CDC Health Alert Network on April 25, 2022 to update providers and public health departments about the current availability and use of recommended therapies for COVID-19. Includes links and references.
<a href="#">What’s New in the Guidelines</a>	NIH	Provides updates to COVID-19 treatment guidelines oriented primarily to health care providers (potentially CHWs or CBO partners, though it is fairly technical for most audiences). Shows major revisions to treatment guidelines within the previous month+, with links to further explain each update.
<a href="#">Therapeutic Management of Nonhospitalized Adults with COVID-19</a>	NIH	Overview of recommended clinical options for the treatment of nonhospitalized adults with mild to moderate COVID-19 who are at high risk of disease progression. Includes useful chart outlining

		patient disposition and related panel recommendations as of April 8, 2022.
<a href="#">Fact Sheet: COVID-19 Test to Treat</a> (2-page PDF)	ASPR	Fact sheet outlining Test to Treat initiative with detailed FAQ section that may be overly complex for general public, but could be useful for providers, health departments, and CBO partners. Last updated March 29, 2022.
<a href="#">New COVID-19 Treatments Add-On Payment (NCTAP)</a> website	Centers for Medicare & Medicaid Services (CMS)	CMS guidance for providers with regards to COVID-19 treatments. Meant to mitigate potential financial disincentives for hospitals to provide treatments.

*The ideas presented in this document reflect the latest public health thinking and scientific evidence as of June 2022. You are advised that the COVID-19 vaccine landscape remains highly fluid, and it is your responsibility to ensure that decisions are made based on the most up-to-date information available. Partners In Health does not provide medical advice, diagnosis or treatment in the United States. Always seek the advice of a physician or other qualified health care provider with any questions regarding a medical condition. The information, including but not limited to, text, graphics, images and other material contained in this document, are intended for informational purposes only.*