Access to COVID-19 antiviral treatment (Paxlovid):

Information for primary care providers and other health care providers caring for patients in the community

Background and scope

Nirmatrelvir/ritonavir (Paxlovid) is an oral antiviral medication that can reduce the risk of hospitalization or death in people at higher risk of serious illness due to COVID-19.

> *Paxlovid must be administered within five days of symptom onset to be effective.*

This document outlines how primary care providers and other health care providers can access Paxlovid for patients in the community.

This document focuses on access to Paxlovid. Remdesivir, an intravenous antiviral medication administered as a three-day course, may also be available for people at higher risk of serious illness due to COVID-19 who cannot take Paxlovid or as an alternative to Paxlovid, based on clinical assessment. Remdesivir is available at eight treatment clinics across the province and is also available to hospitals via their inpatient supply. Providers should contact their **Ontario Health regional contact** to learn more about local pathways to access remdesivir for outpatients.

Who is eligible for Paxlovid

> *All patients who are at higher risk of severe outcomes based on clinical assessment, have tested positive (PCR, rapid molecular, or rapid antigen test [including self-administered]), are mildly ill, present within five days of symptom onset, and do not have contraindications are eligible for Paxlovid based on clinician judgement.*

Public messaging will encourage anyone who may be at higher risk of severe outcomes (based on the criteria listed below) to seek testing and an assessment (see **Ministry of Health website** and **screener tool**). Clinicians will need to assess these patients and determine whether treatment with Paxlovid is appropriate.

The criteria below outline who may be at higher risk of severe outcomes, based on the product monograph and Health Canada authorization for Paxlovid. The risk of severe outcomes will vary among individuals who meet these criteria. The **Ontario COVID-19 Science Advisory Table's guidelines** outline who would most benefit from Paxlovid based on a 5% or higher risk of hospitalization. Providers should use their clinical judgment in determining whether treatment with Paxlovid is appropriate.

Patients may be at higher risk of severe outcomes if they are:

- immunocompromised (have an immune system that is weakened by a health condition or medications);
- 70 years of age and older;
- 60 year of age and older with less than three vaccine doses; or
- 18 years of age or older with less than three vaccine doses and at least one risk condition.

Risk conditions include:

- diabetes
- obesity
- heart disease
- hypertension
- congestive heart failure
- chronic respiratory disease (including cystic fibrosis)
- moderate or severe kidney disease
- intellectual or developmental disability
- cerebral palsy
- sickle cell disease
- moderate or severe liver disease
- pregnancy

Drug-drug interactions leading to potentially serious and/or life-threatening reactions are possible due to the effects of ritonavir on the hepatic metabolism of certain drugs. Contraindications and interactions must be carefully considered before Paxlovid is prescribed.

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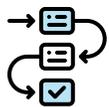## Key resources for assessing eligibility for Paxlovid

- **COVID-19 Science Advisory Table's clinical guidelines**
  These guidelines identify populations who would benefit most from Paxlovid based on a threshold of 5% risk of hospitalization. They can be used by health care providers, along with the criteria above and clinical judgement, to inform decisions on when to prescribe.

- **Nirmatrelvir/Ritonavir (Paxlovid): What Prescribers and Pharmacists Need to Know**
  Key information to help prescribers determine whether Paxlovid is right for their patients

- **Paxlovid product monograph**
  Full details on interactions and contraindications

Public communications about Paxlovid

Public messaging about Paxlovid provides a broad description of who may be at higher risk and should seek testing and assessment. It is recommended that patients reach out to a health care provider to be assessed if they think they might be eligible for treatment. Read more under **Communication with higher-risk patients.**
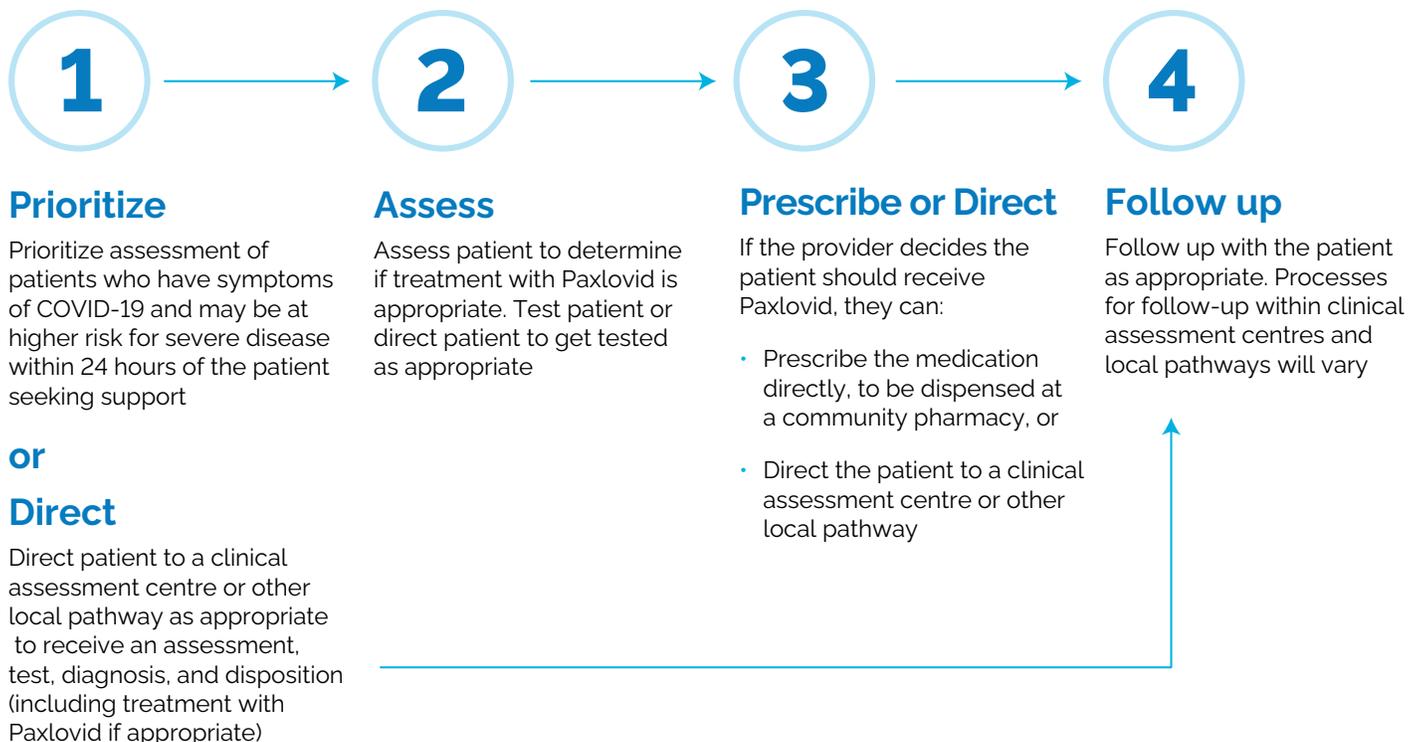
- **Ministry of Health website: COVID-19 antiviral treatment**
  Information for the public, including simplified eligibility criteria and how to access treatment

- **Patient handout: Antiviral treatment**
  Information for patients to understand the benefits, who is eligible, and what to do if they get sick

Pathway for access to treatment

Many patients who develop symptoms of COVID-19 will reach out to trusted health care providers to ask whether they are eligible for treatment. Health care providers have an important role in assessing these patients for eligibility and directing them into the appropriate pathway to receive treatment if they may be eligible.

The pathway below outlines steps for providers when potentially eligible patients ask about treatment. This pathway may change in the future as access is expanded to other channels. Guidance will be revised as information becomes available.

1 → 2 → 3 → 4

1

Prioritize

Prioritize assessment of patients who have symptoms of COVID-19 and may be at higher risk for severe disease within 24 hours of the patient seeking support

or

Direct

Direct patient to a clinical assessment centre or other local pathway as appropriate to receive an assessment, test, diagnosis, and disposition (including treatment with Paxlovid if appropriate)

2

Assess

Assess patient to determine if treatment with Paxlovid is appropriate. Test patient or direct patient to get tested as appropriate

3

Prescribe or Direct

If the provider decides the patient should receive Paxlovid, they can:

- Prescribe the medication directly, to be dispensed at a community pharmacy, or

- Direct the patient to a clinical assessment centre or other local pathway

4

Follow up

Follow up with the patient as appropriate. Processes for follow-up within clinical assessment centres and local pathways will vary

1 Prioritize or Direct

Prioritize assessment of patients who have symptoms of COVID-19 and may be at higher risk for severe disease within 24 hours of the patient seeking support. Consider a virtual or telephone assessment if this would expedite the assessment.

If the provider cannot assess the patient within 24 hours, the patient should be directed to visit a clinical assessment centre or other local pathway as appropriate (see **Direct** for details).

- **Script to support staff in identifying patients who may be eligible for antiviral treatment**
  This script can help staff identify potentially eligible patients and either book an appointment or direct the patient to a COVID-19 clinical assessment centre

2 Assess

Assess patient to determine whether they are eligible to receive Paxlovid (see **Who is eligible for Paxlovid**) This assessment can be conducted either virtually/ by telephone or in person.

If the patient is not eligible for Paxlovid, consider other treatment options (outlined in the **Ontario COVID-19 Science Advisory Table's** guidelines) or monitoring as appropriate and reinforce public health advice.

What to do if a patient who is otherwise eligible needs a test

Patients must have a positive COVID-19 test to receive Paxlovid. A positive result on any of the following test types are sufficient to confirm COVID-19:

- A rapid antigen test administered by either the patient or a health care provider
  - Note: a negative rapid antigen test is not sufficient to rule out COVID-19
- ID NOW or other rapid molecular test
- A lab-based PCR test

All patients who may be at higher risk (as outlined under **Who is eligible for Paxlovid**) and/or are being considered for treatment are eligible for publicly funded molecular testing (PCR or rapid molecular). Patients who fit the higher risk criteria can self-refer for testing at a clinical assessment centre or provincial testing site. Health care providers can also direct any other patient being considered for treatment to get tested, based on their clinical judgement.

If a health care provider is assessing a patient in person who does not have a positive test result but is otherwise eligible, they should administer ID NOW or other rapid molecular test (preferred) or a rapid antigen test. Any of the options outlined under **Direct** below can also provide testing as appropriate.

Patients with incidental COVID-19

Patients with incidental COVID-19 (e.g., who are receiving care for another reason and test positive as part of routine screening) may be prescribed Paxlovid or directed to one of the options below if they are eligible (see **Who is eligible for Paxlovid**).

3 Prescribe or Direct

As appropriate, providers can either prescribe Paxlovid or direct the patient elsewhere for further assessment/treatment.

Prescribe

Paxlovid will be dispensed at participating pharmacies, and providers will be able to prescribe following their usual practices. Any pharmacy may dispense Paxlovid if they choose to participate. A list of participating pharmacies will be available on the **Ministry of Health website**. It is best for patients to attend their usual pharmacy that is familiar with the medications they are taking where possible.

Providers seeking more information or support should review guidance from the Centre for Effective Practice.

- **New guidance for the prescription of nirmatrelvir / ritonavir (Paxlovid™)**
  Guidance from the Centre for Effective Practice to support health care providers. This guidance is regularly updated.

Direct

Another option for providers is to direct patients to one of the options below for further assessment/ treatment:

A. A clinical assessment centre

B. A testing centre that can connect patients to treatment (if there is no clinical assessment centre in the community)

C. Into another local pathway as appropriate

Providers can contact the local site directly for further information or clinical inquiries/discussion.

A. Clinical assessment centres

Clinical assessment centres can assess, test and provide treatment options for COVID-19. There are approximately 80 clinical assessment centres in Ontario. Virtual options may be available at some clinical assessment centres.

All clinical assessment centres have pathways in place for their patients to access Paxlovid. Some sites distribute Paxlovid directly; these sites support distribution in their community and surrounding areas. Other sites partner with those that distribute Paxlovid directly (e.g., the medication is sent directly to the patient via courier from the distributing site).

Clinical assessment centres also have pathways in place for their patients to access other treatments as available/appropriate (e.g., remdesivir).

- **COVID-19 testing locations and clinical assessment centres**
  Use this locator tool to find the nearest clinical assessment centre by filtering by location type

B. Testing centres (in communities without clinical assessment centres)

In some communities without clinical assessment centres, local testing centres will connect patients to treatment. Providers should contact the local testing centre to find out more.

- **COVID-19 testing locations and clinical assessment centres**
  Use this locator tool to find the nearest testing location by filtering by location type

C. Other local or regional pathways

Local and regional pathways to access Paxlovid have been built based on local context and need. Questions about local or regional pathways may be directed to the Ontario Health regional contacts listed in **Appendix A**.

Preparing patients for their appointment

To ensure safety, consultation with a pharmacist who can get a complete medication and natural health product list from the patient may be needed prior to prescribing Paxlovid. A thorough medication reconciliation will be completed at the clinical assessment centre or a supporting location (e.g., a hospital).

When referring a patient into one of the pathways outlined above, support them in bringing a list of their medications (including prescription and over-the-counter medicines, vitamins, and herbal supplements) and any important medical conditions to their appointment. There may be medication holds or changes that will need to be resumed after the patient finishes Paxlovid.

4 Follow up

The follow-up provided after prescription of Paxlovid will vary depending on which provider prescribed the medication. Patients will need close monitoring for drug interactions and side effects, and any medications that were adjusted will need to be resumed. If the patient was prescribed Paxlovid at a clinical assessment centre or other local pathway, follow-up may include:

- Follow-up by the clinical assessment centre or pharmacy

- Handoff back to primary care for ongoing monitoring

- Connection with a **COVID-19 remote care monitoring program** or other virtual care

Communication with higher-risk patients

Communicating with higher-risk patients about treatment options before they get sick can help to ensure that they seek treatment right away if they develop symptoms.

Consider engaging with individuals who may be eligible:

- During appointments

- Via email or telephone (after identifying patients at higher risk for severe disease via EMR search)

- By updating the practice's website or online booking portal

- By working with community ambassadors and other partners to support outreach to equity-deserving populations

Electronic communications may also be distributed broadly to all patients where feasible.

Certain groups (particularly Indigenous people, Black people, and members of other racialized communities) may be at increased risk of disease progression due to disparate rates of comorbidity, increased barriers to vaccination, and social determinants of health. Proactive outreach to these populations is required to improve awareness and comfort with accessing Paxlovid.

- **Patient handout: Antiviral treatment**
  Information for patients to understand the benefits, who is eligible, and what to do if they get sick

- **Ministry of Health website: COVID-19 antiviral treatment**
  Information for the public, including who may be at higher risk and how to access treatment

Appendix A.
Ontario Health regional contacts

Central   Amy Khan
Amy.Khan@ontariohealth.ca

David Pearson
David.Pearson@ontariohealth.ca

East   Farrah Hirji
Farrah.Hirji@ontariohealth.ca

Leah Bartlett
Leah.Bartlett@ontariohealth.ca

Toronto   TOTherapeutics@ontariohealth.ca

West   Jennifer Mills Beaton
Jennifer.MillsBeaton@ontariohealth.ca

Karen Bell
Karen.M.Bell@ontariohealth.ca

North   Jennifer MacKinnon
Jennifer.MacKinnon@ontariohealth.ca