

Access to antiviral treatments for COVID-19 in the community

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In Canada, oral nirmatrelvir/ritonavir (Paxlovid™) and intravenous remdesivir (Veklury®) are Health Canada-approved treatments for outpatient use. This document outlines how primary care providers and other health care providers can access COVID-19 therapeutics (oral nirmatrelvir/ritonavir and intravenous remdesivir) for patients in the community.

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Who should receive antiviral treatment for COVID-19?

Antiviral treatments should be strongly considered for individuals with COVID-19 symptoms and a positive test for SARS-CoV-2 based on positive PCR, rapid molecular, or rapid antigen test result who are at high risk of severe outcomes.

For these patients, nirmatrelvir/ritonavir is the preferred first-line therapy when safe and feasible.

Remdesivir is indicated where nirmatrelvir/ritonavir is contraindicated (e.g., drug-drug interaction that cannot be safely managed, medical contraindication) or when patients are beyond the treatment window for nirmatrelvir/ritonavir initiation (i.e., symptom onset > 5 days).

Individuals who may be at high risk include those who are:

- 60 years of age or older;
- 18 years of age or older and immunocompromised;
- Adults who have one or more [comorbidity](#) that puts them at high risk of severe COVID-19 disease; or
- Adults with inadequate immunity, i.e., unvaccinated or under-vaccinated
 - See the most recent immunization guidance from [National Advisory Committee on Immunization](#) to determine if your patient is under-vaccinated

For more information on identifying patients who are high risk for severe COVID-19, see Ontario Health [Recommendations for Outpatient Use of Intravenous Remdesivir \(Veklury®\) in Adults](#).

Antiviral treatment for solid organ transplant recipients

Solid organ transplant recipients who test positive for COVID-19 should be directed to contact their transplant care team to receive the appropriate COVID-19 therapeutic and follow-up care.

Nirmatrelvir/ritonavir can significantly interact with some transplant medications causing serious adverse effects. Solid organ transplant recipients should not take nirmatrelvir/ritonavir without first speaking to their transplant care team.

Nirmatrelvir/ritonavir

Nirmatrelvir/ritonavir (Paxlovid) is an oral antiviral medication that can reduce the risk of hospitalization or death in people at high risk of serious illness due to COVID-19. Nirmatrelvir/ritonavir must be initiated within five days of symptom onset to be effective.

Nirmatrelvir/ritonavir is the preferred outpatient therapy for treating patients with mild to moderate COVID-19 who are at high risk of severe COVID-19. Patients must have a positive test for SARS-CoV-2 (based on PCR, rapid molecular, or rapid antigen test) and be able to start treatment within five days of symptom onset.

Nirmatrelvir/ritonavir is not appropriate for every patient. In some cases, patients may have a medical contraindication. Dose adjustments for patients with renal impairment may be required. Also, nirmatrelvir/ritonavir interacts with many commonly used medications and natural health products. As required, health care providers should consult with specialists (e.g., oncology, transplant) and pharmacists to determine if the interaction can be safely mitigated.

Review the following resources for prescribing:

- [Nirmatrelvir/Ritonavir \(Paxlovid\) – What Prescribers and Pharmacists Need to Know](#) (University of Waterloo/University of Toronto)
- [Interaction Checker](#) (University of Liverpool)

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- [Management of Nirmatrelvir/Ritonavir \(Paxlovid\) Drug-Drug Interactions in Oncology](#) (University Health Network/Kingston Health Sciences Centre)
 - [Ontario Health Recommendation on the Use of Nirmatrelvir/Ritonavir \(Paxlovid\)](#)

Access to nirmatrelvir/ritonavir in the community

Nirmatrelvir/ritonavir is available in the community through multiple pathways:

- Prescribers (e.g., family doctors, specialists, nurse practitioners) can provide patients with a prescription to be dispensed at a community pharmacy
- Some pharmacists at community pharmacies can prescribe and/or dispense nirmatrelvir/ritonavir directly to patients

Additional local and regional pathways to access nirmatrelvir/ritonavir 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](#).

Remdesivir

Remdesivir is an intravenous antiviral medication that can reduce the risk of hospitalization or death in people at high risk of serious illness due to COVID-19.

Outpatients who are at high risk of severe COVID-19 who cannot take nirmatrelvir/ritonavir due to a medical contraindication or significant drug interactions that cannot be mitigated should be considered for remdesivir. Treatment should be initiated within seven days of symptom onset.

Refer to Ontario Health's document for additional information about outpatient use of intravenous remdesivir: [Recommendations for Outpatient Use of Intravenous Remdesivir \(Veklury®\) in Adults](#).

Access to remdesivir in the community

Remdesivir is available to patients in the community through Home and Community Care Support Services (HCCSS). Referral forms and supporting documents for each HCCSS region are available [here](#).

Prescribers in hospitals or in the community can refer a patient to their local HCCSS branch for a nurse to administer remdesivir infusions. Prescribers must complete the appropriate referral form(s) and submit to their local HCCSS branch. A HCCSS care coordinator will follow up with the patient.

In most cases, patients will receive infusions at a community nursing clinic; at-home service may be provided for patients who are not eligible for nursing clinics. Pharmacies that have an agreement with HCCSS can dispense the medication.

Access to COVID-19 testing

Patients must have COVID-19 symptoms and a positive COVID-19 test to receive nirmatrelvir/ritonavir or remdesivir.

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 (at home) or a health care provider
 - Note: a negative rapid antigen test is not sufficient to rule out COVID-19. Patients at high risk with a negative rapid antigen test should be considered for confirmatory PCR
- ID NOW or other rapid molecular test
- A lab-based PCR test

Patients at high risk of severe outcomes of COVID-19 are [eligible](#) for PCR or rapid molecular testing at participating pharmacies, hospitals, assessment centres, and select primary care settings (visit the COVID-19 testing locations [website](#) to identify local testing sites). Authorized providers may order publicly funded PCR testing for eligible patients using the Public Health Ontario COVID-19 and Respiratory Virus Test Requisition form (access the [form](#) and [instructions](#)).

As of July 1, 2023, the public can access rapid antigen tests through their local [public health units](#) (local processes will vary). Health sector partners (including physicians, pharmacies, hospitals, and other health care providers) will also be able to order rapid antigen tests for distribution to their patients in preparation for the fall/winter respiratory season as of September 2023. The distribution of rapid antigen tests to patients is voluntary and will not be reimbursable by the Government of Ontario (no billing codes). Additionally, rapid antigen tests continue to be available to those in congregate care settings (e.g., long-term care homes), the broader public sector (e.g., education), First Nations & Indigenous Communities and High-Priority Communities. Patients at high risk of severe outcomes of COVID-19 should be encouraged to keep rapid antigen tests at home and consider testing as soon as symptoms appear.

The ordering pathway for health care providers already enrolled in the Provincial Antigen Screening Program (PASP) who intend to distribute rapid antigen tests to employees and/or patients will continue through the [PPE Supply Portal](#). Health care providers that are not currently enrolled in PASP can enroll in the program via the [Ontario Together Portal](#) and order through the PPE Supply Portal. For assistance in creating an account or accessing an existing account, or for any questions about orders and shipment, please contact sco.supplies@ontario.ca.

Access for patients without a Health Card Number or OHIP coverage

COVID-19 testing is available to eligible individuals based on provincial testing guidance, including non-residents and visitors without a Health Card Number or OHIP coverage.

Nirmatrelvir/ritonavir can be dispensed at pharmacies at no cost to individuals with a valid prescription, including non-residents and visitors without a Health Card Number or OHIP coverage.

Patients require OHIP coverage to receive professional nursing services through HCCSS, including administration of remdesivir. For patients who require remdesivir treatment who do not have provincial insurance (including visitors from another province), prescribers should make arrangements with a local hospital or emergency department or may contact a community nursing clinic directly (there may be a cost to patients). Prescribers should contact their Ontario Health regional contact for questions on regional pathways.

Communication and treatment planning with high-risk patients

Antiviral treatment for COVID-19 can prevent serious illness if taken quickly after symptoms start. Health care providers are encouraged to discuss treatment options with high-risk patients before they get COVID-19 and create a plan to ensure patients receive the appropriate therapeutic within the treatment window. This may include assessing drug-drug interactions and ensuring prescribers have an up-to-date eGFR on file.

Health care providers can consider informing the patient about the following steps to be prepared:

- Staying up-to-date with vaccines
- Having access to rapid antigen tests to test as soon as any symptoms start and regularly thereafter if negative
- Understanding the importance of accessing treatment quickly if they receive a positive test, even if symptoms are mild
- Having a medication list ready with up-to-date prescriptions and over the counter medications/vitamins listed
- Knowing who they should contact to access treatment if they test positive

Consider engaging with high-risk patients:

- During appointments
- Via email or telephone (after identifying patients at high 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.

Individuals who are at a higher risk of poor outcomes from COVID-19 based on social determinants of health should be considered priority populations for access to antivirals. Individuals with certain medical or social vulnerabilities may experience challenges in recognizing, communicating or acting on progressing COVID-19 symptoms. Individuals at higher risk include Indigenous people, Black people, other members of racialized

communities, people who are underhoused, individuals with intellectual, developmental, or cognitive disability, people who use substances regularly (e.g., alcohol), and/or people who live with mental health conditions.

The Ministry of Health's website ([COVID-19 antiviral treatment](#)) provides information for the public, including who may be at high risk and how to access treatment.

Need this information in an accessible format? [1-877-280-8538](tel:1-877-280-8538), TTY [1-800-855-0511](tel:1-800-855-0511), info@ontariohealth.ca.

Document disponible en français en contactant info@ontariohealth.ca.

Appendix A. Ontario Health regional contacts

Ontario Health Region	Name and email address
Central	Michelle Moonesar (Michelle.Moonesar@ontariohealth.ca)
East	Farrah Hirji (Farrah.Hirji@ontariohealth.ca) Leah Bartlett (Leah.Bartlett@ontariohealth.ca)
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