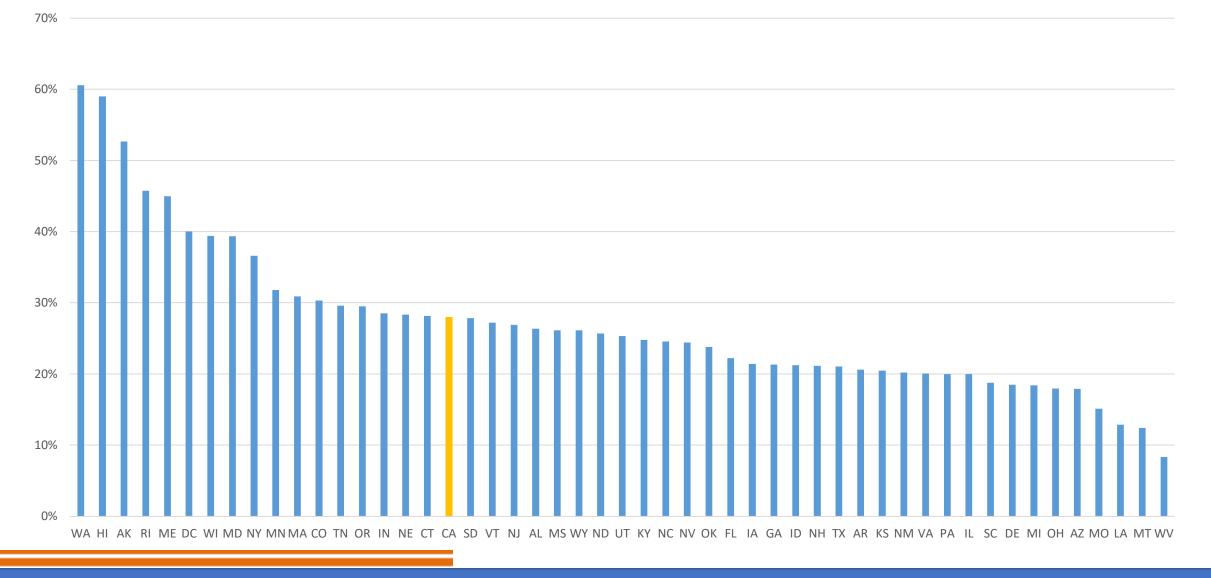
Covid-19 Therapeutics use in Long-term Care Facilities: Update and new Resources Jan 2023



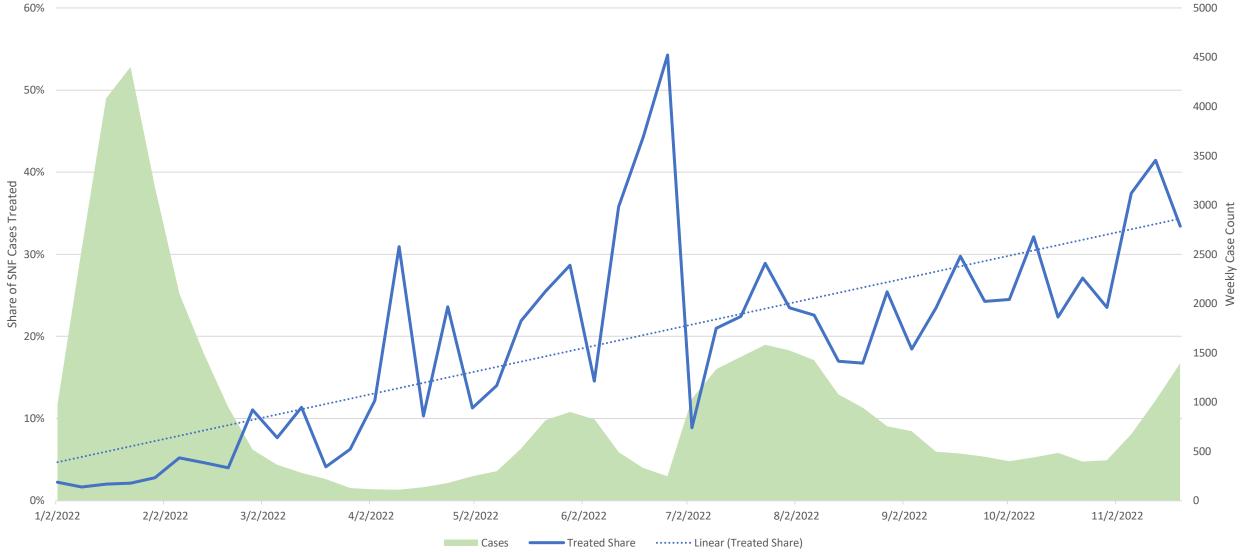
1/25/2023

Dr. Jessica de Jarnette, CDPH/Therapeutics Task Force

Share of SNF Cases Treated with Therapeutics in 2022 in All States by Case Counts (Last 2 Months Data - Oct and Nov)



Share of SNF Cases in CA Treated With Therapeutics and Case Counts, 2022



Skilled Nursing Best Practices

COVID-19 Surge Readiness:



Saving lives and avoiding hospitalizations

Lives are being saved (and hospitalizations avoided) with timely COVID-19 treatments. Treatments are safe and effective, even with changing variants. Treatments can keep your residents and staff from developing severe disease and may help them test negative sooner. Preparing before a case will help residents get treated faster.

Share these documents with your residents' providers:

- CDPH AFL COVID-19 Treatment Resources for SNFs (9/12/22) and
- CDPH <u>CAHAN Health Advisory: Reminder to Lower Barriers to Prescribing COVID-19 Therapeutics to</u> <u>Mitigate Impact of COVID-19 (12/2/22).</u>

These notices remind providers that ALL SNF residents are considered at higher risk for severe COVID-19 and the decision to not prescribe COVID-19 treatment should be reserved for situations in which the risk of prescribing clearly outweighs the benefits of treatment in preventing hospitalization, death, and the potential for reduced risk of long COVID.

Surge Preparedness Tips: Baseline strategies

- Masking
- Ensure staff and residents are up-to-date with vaccinations, including their flu and bivalent COVID-19 booster
- Isolating and cohorting ill patients
- Testing anyone with symptoms
- Preparing for increasing use of COVID-19 treatments:
- 1. Reach out to your residents' providers
- 2. Check in with your pharmacy
- 3. Plan workflows
- 4. Educate your staff
- 5. Inform patients/families of treatment availability

The California Department of Public Health (CDPH) COVID-19 Therapeutics Task Force wants to support you in getting ready for potential COVID-19 surges in your facility. CDPH understands that facilities do not control the actions and decision of individual providers. However, you can facilitate treatments for your residents and staff with preparedness education, awareness, and getting the right workflows into place. The CDPH Therapeutics Task Force is available to assist you with developing best practices and education for your situation.

The following checklist can help you prepare for and respond to COVID-19 in your facility.

Email: COVIDRxProviders@cdph.ca.gov



SNF Best Practices: LHJ SharePoint

RCFE Best Practices

SNF Best Practices: LHJ SharePoint

COVID-19 Surge Readiness:

Best Practices for Long Term Care Facilities

Saving lives and avoiding hospitalizations

Lives are being saved (and hospitalizations avoided) with timely COVID-19 treatments. Treatments are safe and effective, even with changing variants. Treatments can keep residents, clients and staff from developing severe disease and may help them test negative for COVID-19 sooner. Preparing before a positive COVID-19 case occurs will help residents and staff get treated faster.

Share this document with your residents' health care providers:

 CDPH CAHAN Health Advisory: Reminder to Lower Barriers to Prescribing COVID-19 Therapeutics to Mitigate Impact of COVID-19 (12/2/22).

This notice reminds providers that ALL long term care residents are considered at higher risk for severe COVID-19 and the decision to not prescribe COVID-19 treatment should be reserved for situations in which the risk of prescribing clearly outweighs the benefits of treatment in preventing hospitalization, death, and the potential for reduced risk of long COVID.

Surge Preparedness Tips: Baseline strategies

- Masking
- Encourage providers to review: CDPH CAHAN Health Advisory: Reminder to Lower Barriers to Prescribing COVID-19 Therapeutics to Mitigate Impact of COVID-19 (12/2/22)
- Isolating and cohorting ill patients
- · Testing staff and residents with symptoms
- · Preparing for increasing use of COVID-19 treatments:
- 1. Reach out to your residents' health care providers
- 2. Confirm supply with your pharmacy if possible
- 3. Develop a plan
- Educate your staff
- 5. Inform resident/resident representatives of treatment availability

The California Department of Public Health (CDPH) COVID-19 Therapeutics Task Force wants to support you in getting ready for potential COVID-19 surges in your facility. CDPH understands that facilities do not control the actions and decision of individual health care providers. However, you can help facilitate treatments for your residents and staff with preparedness education, awareness, and getting the right plans into place. The CDPH COVID-19 Therapeutics Task Force is available to assist you with developing best practices and education for your situation. You can also use the Provider COVID-19 Call Center email: covidcallcenter@cdph.ca.gov.

Phone: (833) 502-1245 Monday - Friday from 8:00 AM - 6:00 PM

Email: COVIDRxProviders@cdph.ca.gov



"Myths and Facts" Resource for Providers

COVID-19 Therapeutics Myths and Facts

How to dispel misinformation about treatments

MYTH:

I don't need medication for a mild-to-moderate illness.

PROVIDER ANSWER:

Lots of us are used to waiting out similar cold and flu symptoms to see if they get "bad enough" to need treatment. COVID-19 is different: lots of us are still at risk of having our mild or moderate symptoms develop into something more serious. The treatments can keep you out of the hospital and prevent you from dying, and early evidence shows they may even reduce your chance of developing long COVID.

MYTH: I'm not high risk.

PROVIDER ANSWER:

Most of us don't think of ourselves as "high risk." However, there are many factors that can make even very healthy people more susceptible to becoming very ill from COVID-19. The truth is: the majority of adults fit into one of these categories. They include:

- 1. Anyone over age of 50.
- People living with diabetes, mental conditions (anxiety, depression, ADHD, and more), chronic lung disease (including asthma), chronic kidney disease, and cardiovascular disease.
- 3. People who are overweight, physically inactive, or who smoke.
- People who are negatively affected by social determinants of health, such as race, ethnicity, socio-economic status, or limited access to healthcare.
- 5. People who are unvaccinated or not up-to-date with vaccinations.



LHJ

SharePoint

Myths & Facts

Scan the QR code to read more about COVID-19 treatment resources. Comparison Department

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COVID-19 Therapeutics Myths and Facts:

MYTH:

Treatments have serious side effects.

PROVIDER ANSWER:

Of course, we all worry about side effects! Fortunately, most people have little-tono side effects. In clinical studies of Paxlovid, side effects occurred for less than 10% of patients. The most common side effect of Paxlovid is an unpleasant taste in the mouth, which occurred for 6% of people; smaller percentages of people have experienced diarrhea (3%), hypertension (1%), and/or muscle aches (1%).

Abdominal pain and general malaise have also been noted outside of clinical studies. Some other medications may need to be adjusted while you are taking Paxlovid. If you cannot take Paxlovid for any reason, you may be offered molnupiravir (Lagevrio) instead. Molnupiravir has very few side effects, but you cannot take it if you are pregnant.

MYTH: Rebound caused by treatments is common and can be dangerous.

PROVIDER ANSWER:

Rebound has been in the news a lot! The thing that most people don't realize is that viral rebound happens in people who don't take treatments as well as those who do, and less than 1 in 5 people experience rebound. It does happen somewhat more frequently among people who take Paxlovid. For some people, taking Paxlovid will help you test negative sooner. But for some, the symptoms may return. The good news is that if your symptoms do return, they tend to be mild and do not require repeating the treatment.

HELPFUL RESOURCES FOR PROVIDERS:

COVID-19 Therapeutics Decision Aid (hhs.gov)
Underlying Medical Conditions Associated with Risk for Severe COVID-19 | CDC
Information Sheet: Paxlovid Eligibility and Effectiveness (hhs.gov)
Have questions? Email COVIDRxProviders@cdph.ca.gov

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"Vax and Pax" Toolkit for Long Term Care Providers



Society for Post-Acute and Long-Term Care "Vax and Pax" Toolkit

the American Association of Nurse Practitioners, and the American Academy of Physician Assistants/Associates to create this toolkit for clinicians working in postacute and long-term care settings, treating the most vulnerable of our population.

LHJ SharePoint Resource Folder

Resources presented here, as well as:

- Example email text for facilities to send to families increasing awareness of treatments
- Example letter that LHJs can send to facility medical directors when an outbreak occurs

LHJ COVID-19 Therapeutics LTC Resources SharePoint Folder

Example email for residents' families:

Dear family

Respiratory illness has been in the news, and our facility wants to let prepared to protect your loved one from serious illness. We are taki that do arise.

We are strongly encouraging vaccination for both flu and COVID-191 We are also adhering to masking guidelines and will be separating ar symptoms or positive flu, RSV or COVID-19 tests from residents who

We will be monitoring all residents closely for symptoms of flu, RSV, alert their provider and alert you if any signs of illness appear. If you for COVID-19. there are now treatments available which are very saf preventing the disease from progressing to the point where hospital Your loved one's health care provider will assess which treatment wi

prepared to make. Our providers, nursing team and pharmacy will w safest course for your loved one.

You may want to have a conversation with your loved one and their provider so that any concerns or questions can be answered in advance, and to let them know that we are prepared to administer treatments if needed. And be aware that most adults are eligible for COVID-19 treatments, so reach out to your own provider if you develop symptoms to keep our entire community healthy.

Please reach out if you have any concerns,

Facility DON or administrator

Dear Colleague

To date, California SNF residents have been undertreated with the life-saving medications that are now available to treat symptomatic COVID-19. The September 12, 2022, AFL-22-20 (ca.gov) recommended proactive planning for use of therapeutics.

We are reaching out to offer support regarding best practices in the use of COVID-19 therapeutics in the Skilled Nursing Facility (SNF) setting, as we recognize the challenges facing clinicians and skilled nursing care facilities during COVID-19 outbreaks. As we enter the third year of the COVID-19 pandemic, we have many new life-saving tools at our disposal, such as bivalent vaccines and antiviral medications.

During an outbreak, attention to timely prescribing of COVID-19 treatments is essential. We encourage you to utilize consultative services offered by your pharmacy to support clinicians who have concerns about drug-drug interactions or other hesitation to prescribe. It is also important to educate your staff about not waiting for symptoms to worsen before alerting providers and resident's representatives to treatment options.

The evidence in support of therapeutics use, especially for people over 65, has been increasing over time, and at this point, every SNF resident with symptomatic COVID-19 should be offered treatment with very few exceptions. The Society for Post-Acute and Long-Term Care Medicine (AMDA) has posted a useful toolkit with many of the resources that can help you reduce avoidable hospitalization and death among your facility's residents: COVID-19 Vaccination and Therapeutics in PALTC Toolkit: Resources for Clinicians

winter viruses from reaching our residents and by being ready to tes We encourage you to share these essential resources with providers working in your facility to aid in reminding that we now have effective COVID-19 therapeutics that are readily available for prescribing:

- Reminder to Lower Barriers to Prescribing COVID-19 Therapeutics to Mitigate Impact of COVID-19 (ca.gov)
- <u>Therapies | COVID-19 Treatment Guidelines (nih.gov)</u>
- Liverpool COVID-19 Interactions (covid19-druginteractions.org)

As a Medical Director, you are instrumental in the prevention and treatment of COVID-19 as well as so many other illnesses.

Thank you for engaging your staff, colleagues, and community to increase use of these life-saving tools,

(signed by local health officer or other LHJ contact)

of the treatments may require temporary adjustments to other med If you have concerns or questions that CDPH could assist with, please reach out to us at COVIDRxProviders@cdph.ca.gov

Therapeutics Provider Warmline



Health care providers can now call 1-866-268-4322 (COVID-CA) to receive free and confidential consultation on COVID-19 testing and treatment.

The **COVID-19 Therapeutics Warmline** is a real-time resource available to all California health care providers and is managed by the University of California, San Francisco (UCSF) National Clinician Consultation Center.

- Health care providers of any experience level can call to speak with a clinician or pharmacist about drug-drug interactions or any other clinical challenges.
- No PHI will be collected. Only basic provider contact and facility information.
- An online case submission form will be available soon.

Available Monday through Friday, 6 am – 5 pm PST. Voicemail messages left after hours will be returned on the next business day.

Reminder: Vaccine-related questions continue to be answered through the COVID-19 Provider Call Center:

Email: <u>covidcallcenter@cdph.ca.gov</u> Phone: **(833) 502-1245** Monday through Friday from 8AM–6PM