California Department of Public Health

COVID-19 Testing & Therapeutics Updates

September 2023



Medical Countermeasures Strategy Unit COVID-19 At-Home Testing and Therapeutics

- As of July 1, 2023, the Covid-19 Testing Task Force, Therapeutics Task Force, and Mobile Vax staff/activities transitioned into a new Medical Countermeasures Strategy (MCM) Unit within new Center of Infectious Disease (CID) Office of Infectious Disease Preparedness & Response (OIDPR). CDPH CID, OIDPR, MCM Unit
 - Dr. Chloe LeMarchand, Medical Officer Medical Countermeasures Lead
 - Chantal Griffin, LaRita Jones, and Stefanie Medlin- points of contact within the At-Home Testing Program
 - o Dr. Jessica deJarnette Medical Officer point of contact for **Therapeutics**

At-Home Test Eligibility and Ordering Criteria, Pt.1

- CDPH is continuing to support organizations that serve the uninsured/underinsured, those with poor access to medical care, and those that are immunocompromised or over the age of 65.
- LHDs should have received an email on September 8, 2023, advising that local health
 jurisdictions are eligible to request as many tests needed to support these organizations in
 their counties.
- Over the next few months, the State is planning to transition from direct distribution of COVID-19 tests (for example directly to organizations/schools) to distribution solely to the LHJs by December 1, 2023.
- We encourage LHJs to order tests as needed and work on local test distribution plans. CDPH is happy to work with LHJs on their plans and provide contact information of organizations in your jurisdiction that have been directly ordering from the state.



CDPH Letter: Local Health Jurisdictions



Dear Colleagues,

CDPH is continuing to provide over the counter tests to Local Health Jurisdictions.

Attached please find the following:

1. At-Home Antigen Test Distribution Plan

Please not

As of May 11, 2023, the State of California is no longer required by FEMA to collect organization level data for at-home test distributions. This should make distribution of OTC tests easier for LHJs as tracking specific distribution data are no longer required.

Over the next few months, the State is planning to transition from direct distribution of COVID-19 tests (for example directly to organizations/schools) to distribution solely to the LHJs by December 1, 2023. We encourage LHJs to order tests as needed and work on local test distribution plans. CDPH is happy to work with LHJs on their plans and provide contact information of organizations in your jurisdiction that have been directly ordering from the state.

Please use this link to place an order for tests: https://labsupport.powerappsportals.us/ordercovidotc/

- Organizations authorized by your LHJ to order at-home tests: the LHJ is responsible for telling each organization how many tests they are allowed to order. Sites should order enough tests to last through 12/31/2023. This option will continue to be available for ordering until December 1, 2023.
- 2. LHJs ordering tests for direct distribution to the general public: order using the same $\underline{\text{LINK}}$ with the LHJ identified as the "organization."

CDPH will attempt to honor all ad-hoc requests from LHJs for tests beyond their initial ordering. Please include a brief explanation to CDPH regarding how the additional tests will be used. These ad-hoc requests will be considered on a case-by-case basis with the following considerations. Orders should reflect anticipated needs over the next 16 weeks and explanation should include how the tests will be distributed to focus on priority populations that are uninsured, underinsured, those with limited access, or those at high risk of severe illness (immunocompromised, those over >65 years). These requests will be considered promptly. Priority will be given to LHJs that have anticipated increased demand due to outbreaks, rising cases and case rates in their community.

California Recommended Distribution of At-Home (Over the Counter) COVID-19 Antigen Tests September 2023

Background:

The California Department of Public Health continues to support COVID testing availability with a focus on those individuals who are uninsured, under-insured or with limited access to testing resources. As Medicare Part B no longer covers free OTC tests, we recommend an emphasis on organizations that support individuals on Medicare and >65 years of age.

At-home COVID-19 testing is important to enable early access to treatments to decrease progression to severe disease. Additionally, convenient rapid results may limit spread by informing individuals to isolate earlier and for a greater percentage of their peak infectious period.

Testing is one layer to decrease the spread of COVID-19. Other key prevention measures are vaccination including boosters, mask wearing, improved ventilation, physical distancing, hand hygiene and isolating infected individuals.

At-home antigen tests can be used for diagnostic testing in people with or without symptoms. Individuals who are symptomatic and test negative are encouraged to test again in 48 hours. For those who remain symptomatic after the second test, they can consider testing again in 48 hours, for a total of 3 tests.

Ordering and Accountability for Distributions:

The State of California **no longer** requires LHJs to collect site level data for at-home test distributions.

- Organizations (healthcare settings OR community-based organizations) authorized by an LHJ to order at-home tests use this LINK to place orders.
- The LHJ is responsible for telling each organization how many tests they are allowed to order up until December 1, 2023.
- LHJs ordering tests for direct distribution to the general public should <u>use the</u>
 same LINK with the LHJ identified as the "organization."

Distribution of At-Home Antigen Tests

California is now allowing LHJs to order at-home tests as needed. We recommend using the HERE, to make decisions about distribution sites and locations to support health equity.

CDPH recommends the following uses for these at-home antigen tests:

- Distribute to facilities or organizations/institutions that are offering tests to symptomatic individuals who are uninsured, underinsured or have limited access to other testing resources.
- Distribute to non-acute care facilities or organizations/institutions for symptomatic and asymptomatic individuals for utilization in COVID-19 outbreaks.
- 3. Distribute to facilities or organizations/institutions doing (SAA) post-exposure testing of individuals.
- Distribute to non-acute care facilities or organizations/institutions, serving highrisk populations, to decrease exposures (This includes SNFs, long term care facilities, or other congregate settings with high-risk individuals).

Note: To ensure these tests do <u>not</u> fall under CLIA regulatory requirements, the entire test needs to be performed and read by the individual being tested (or by their parent/legal guardian). It is acceptable to have an observer watch the individual perform the test and verify the result, however the individual performing the test must read their own result first before verifying that result with the observer.

We encourage you to share information with organizations on how to access COVID-19 treatment options. COVID-19 medications are free, widely available, and effective for treating COVID-19 and preventing serious illness. They are recommended for most adults and some teens, including adults older than 50 years.

If you test positive and have symptoms, you can make a free phone or video appointment through California's COVID-19 telehealth service by visiting sesamecare.com/covid or calling 1-888-897-1244. Remember to act fast - most COVID-19 medications must be taken within the first 5 days of symptoms. Learn more about COVID-19 medications at covid19.ca.gov/freatment/

You can access additional shared resources on treatment by accessing the CDPH COVID-19 Treatments Toolkit.



If you have any questions, please send an email to: OTCtesting@cdph.ca.gov



At-Home Test Eligibility and Ordering Criteria, Pt.2

- Organizations eligible to directly request At-home tests include:
 - Skilled Nursing Facilities and Long-Term Care Facilities:
 - At-home tests for up to 16-week need to support residents, staff, and visitors with symptoms.
 - Community Based Organizations:
 - At-home tests for up to a 16-week need to support the uninsured/underinsured populations, those that have poor access to medical care, and those populations that are high risk. Populations that have Medicare B- as Medicare B does not cover at-home COVID-19 tests.
 - K-12 Organizations:
 - At-home tests for the fall semester, up to a 16-week, for K-12 schools, foster care, and before and after school programs.
 - Tests should be requested to support the uninsured/underinsured student populations.
 - Deadline to order for fall semester is October 31, 2023.



At-Home Test Eligibility and Ordering Criteria, Pt.3

- Early Childhood Education Programs:
 - At-home tests can be requested for uninsured/underinsured students and staff only.
 - o This is a one-time order request. Can request 8 tests per uninsured/underinsured person.
 - Deadline to order is October 31, 2023.
- Community College Health Centers:
 - At-home tests can be requested for uninsured/underinsured students only.
 - This is a one-time order request. Can request 8 tests per uninsured/underinsured person.
 - Deadline to order is October 31, 2023.

Questions? Please email OTCtesting@cdph.ca.gov



COVID-19 Test to Treat Reminders

TESTING

- COVID-19 antigen tests continue to work on new variants
- For symptomatic people that test negative, recommend repeat testing at 24-48 hours
- Many over-the-counter tests have extended expirations by the FDA

TREATMENT

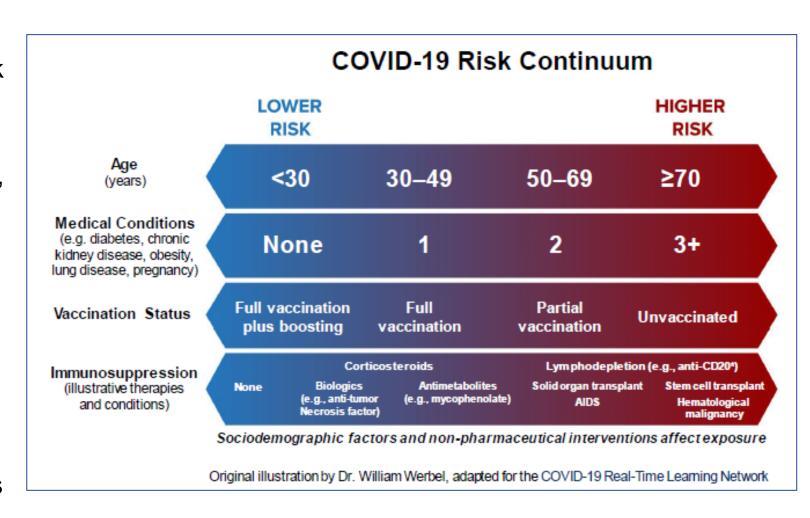


- Oral antivirals remain very effective against all circulating variants, free to patients, and are in ample supply
- Patients should be evaluated for treatment regardless of vaccination or booster status
- There are many ways patients can access treatment if they are unable to see their healthcare provider
- Positive test not required for treatment



LTC Residents and Severe Risk for COVID-19

- Paxlovid and other COVID Tx are recommended for people with "risk of progressing to severe COVID-19"
- LTC facility residents, by definition, almost always fall in severe risk category
- Risk factors include older age, medical conditions, or being immunosuppressed
- Note that even when vaccinated and/or boosted, LTC residents are generally on higher end of risk continuum for other risk categories



Undertreatment in Skilled Nursing Facility Populations

Focus: Improve
Therapeutic
Access in
Congregate Health
Settings

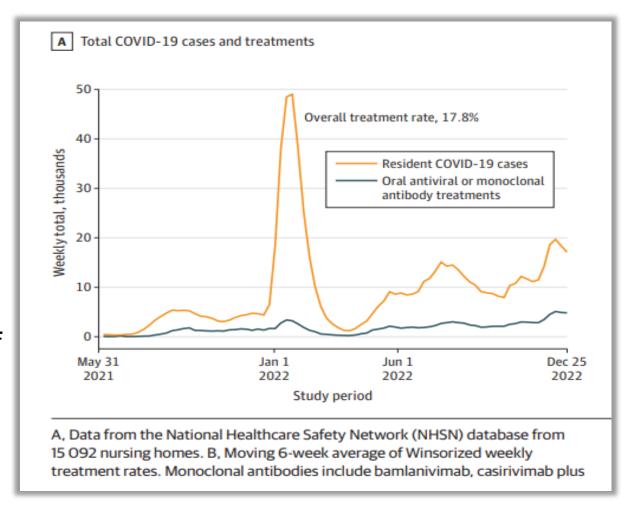


- ➤ Skilled Nursing Facilities and congregate living settings have the best opportunity to test and prescribe within 5 days of symptoms.
- ➤ Despite their high risk, only 1 in 4 nursing home residents with COVID-19 had been treated with evidence-based antiviral treatments by the end of 2022.
- ➤ During the study period, there were 763,340 resident cases of COVID-19 and 136,066 residents treated for COVID-19 among 15,092 nursing homes, equating to an **overall oral antiviral or monoclonal antibody treatment rate of 17.8%** (95% CI, 17.4%-18.3%).
- By the end of 2022, 41.0% of facilities still had not reported any use.



Skilled Nursing Facility Cases and Treatment

- After adjustment, larger bed size, higher overall quality rating, greater direct care hours per resident-day, having an affiliated geriatrician, higher staff and resident vaccination rates, and greater mean resident age and acuity were positively associated with treatment use.
- Being for-profit and having higher shares of non-White race and Medicaid residents were significantly associated with lower probability of treatment use.



Monoclonal Antibody and Oral Antiviral Treatment of SARS-CoV-2 Infection in US Nursing Homes | Infectious Diseases | JAMA | JAMA Network

SNF and LTCF Surge Readiness

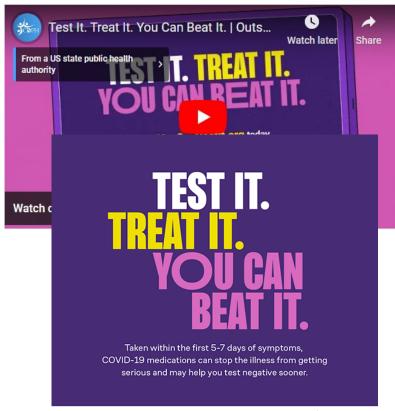
Prepare Congregate
Health
Settings for
COVID-19 Surge

- Providers are encouraged to minimize barriers to prescribing COVID-19 treatment prior to a Covid-19 surge by:
 - Working with residents' healthcare providers to specify patients' renal and hepatic function (whether normal or impaired)
 - Encourage providers to write orders for testing symptomatic residents
 - Make a plan for which treatment to prescribe if patients test positive
- Confirm pharmacy or infusion service provider supplies and options to accessing prescriptions.
- Encourage staff and providers to review the <u>Surge</u> <u>Readiness Fact Sheet.</u>



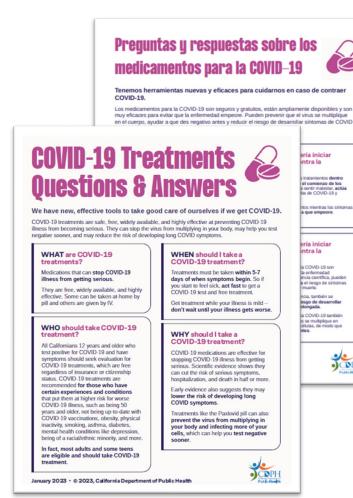
Public Communications Toolkit: Handouts, Wallet Cards, Social Media, and More

Video



LEARN MORE





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COVID-19 también

CDPH

TEST IT. TREAT IT.

If you feel sick and have COVID-19, act quickly to seek evaluation for COVID-19 medication. They must be taken within the first 5-7 days of symptoms to work.

Call your healthcare provider, urgent care center, or the state COVID-19 hotline at 833-422-4255.



Learn more at YouCanBeatlt.org



Si no te sientes bien y diste positivo en la prueba de COVID-19, actúa con rapidez y consulta si necesitas medicamentos para tratar la enfermedad. Para que funcionen, debes tomarlos durante los primeros 5 a 7 días desde la aparición de los síntomas.

Llama a tu proveedor de atención médica, centro de urgencias o a la línea directa estatal de COVID-19 al 833-422-4255.



Para obtener más información, visita YouCanBeatlt.org.

Provider Communications Toolkit: Readiness Checklists, Best Practices Toolkits, and More

