

DEPARTMENT OF HEALTH AND SOCIAL SERVICES ADDENDUM NO. 3

COVID-19 PUBLIC HEALTH THERAPEUTICS GUIDELINES

JANUARY 12, 2022

At this time Alaska has enough treatment to likely serve only tier 1. Physicians and health care systems will need to use judgment on how best to allocate their limited supply. (Statement last updated Jan. 14, 2022)

Based on extreme and limited availability of COVID-19 therapeutics (due to the Omicron surge), the initial recommendations for scarce therapeutics are as followed:

For Federal allocated medications (monoclonals and oral), weekly/biweekly allocation from HHS to States, are to be determined by caseloads, hospitalizations, population, utilization, reporting compliance, and quantity on hand. Facilities must be registered with HHS for States to allocate drug.

Alaska distribution to be determined based on total State allocation by:

- Past week utilization, cases, hospitalizations, and population base.
- Compliance with Federal reporting requirements.
- Facilities must be registered in applicable Federal ordering/reporting portal (HPOP, TIBERIUS...) to receive drug.

Clinical recommendations for outpatient COVID-19 treatment. Quantity on hand should be evaluated and availability opened once most facilities have at least a 1-week supply on hand for two consecutive weeks.

- Tier 1a
 - Immunocompromised individuals* not expected to mount an adequate immune response to COVID-19 vaccination or SARS-CoV-2 infection due to their underlying conditions, regardless of vaccine status
- Tier 1b
 - Individuals not up to date on vaccine AND: are aged ≥ 75 years OR anyone aged ≥ 65 years with risk factors** OR currently pregnant.
- Tier 2a
 - Individuals not up to date on vaccine AND: are aged ≥ 65 years OR anyone aged ≥ 50 years with risk factors**
- Tier 2b
 - Anyone aged ≥ 75 years OR anyone aged ≥ 50 years with clinical risk factors**

*Immunocompromising Conditions:

This NIH panel suggests prioritizing their use for those who are least likely to mount an adequate response to COVID-19 vaccination or SARS-CoV-2 infection and who are at risk for severe outcomes, including (but not limited to) the following patients:

- Patients who are within 1 year of receiving B-cell depleting therapies (e.g., rituximab, ocrelizumab, ofatumumab, alemtuzumab)
- Patients receiving Bruton tyrosine kinase inhibitors
- Chimeric antigen receptor T cell recipients
- Post-hematopoietic cell transplant recipients who have chronic graft versus host disease or who are taking immunosuppressive medications for another indication
- Patients with hematologic malignancies who are on active therapy
- Lung transplant recipients
- Patients who are within 1 year of receiving a solid-organ transplant (other than lung transplant)
- Solid-organ transplant recipients with recent treatment for acute rejection with T or B cell depleting agents
- Patients with severe combined immunodeficiencies
- Patients with untreated HIV who have a CD4 T lymphocyte cell count <50 cells/mm³

If supplies are extremely limited, the Panel suggests prioritizing those who are more severely immunocompromised (see above list) and who also have additional risk factors for severe disease for the outpatient therapies.

NIH therapy prioritization guidance:

<https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-patient-prioritization-for-outpatient-therapies/>

CDC immunocompromising conditions: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/immuno.html>

** Risk Factors:

- Cancer
- Cerebrovascular disease
- Chronic kidney disease*
- Chronic lung diseases limited to:
 - Interstitial lung disease
 - Pulmonary embolism
 - Pulmonary hypertension
 - Bronchopulmonary dysplasia
 - Bronchiectasis
 - COPD (chronic obstructive pulmonary disease)
- Chronic liver diseases limited to:
 - Cirrhosis
 - Non-alcoholic fatty liver disease
 - Alcoholic liver disease

- Autoimmune hepatitis
- Diabetes mellitus, type 1 and type 2*
- Heart conditions (such as heart failure, coronary artery disease, or cardiomyopathies)
- Mental health disorders limited to:
 - Mood disorders, including depression
 - Schizophrenia spectrum disorders
- Obesity (BMI ≥ 30 kg/m²)*
- Pregnancy and recent pregnancy
- Smoking, current and former
- Tuberculosis

CDC High risk conditions <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html>

Individuals not up to date on vaccine: those that have not yet been vaccinated, completed full vaccine series, or received booster vaccine

Vaccinated individuals: those that have completed full primary vaccine series and booster per most recent recommendations

NIH COVID-19 Treatments, Statement on Patient Prioritization for Outpatient Therapies:

<https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-patient-prioritization-for-outpatient-therapies/>