



Department of Health

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Governor

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Acting Executive Deputy Commissioner

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Dear Colleagues,

Until recently, monoclonal antibodies (mAbs) were the only available therapy to treat and prevent complications of coronavirus disease 2019 (COVID-19) in patients at high risk for severe disease. mAbs have been shown to prevent hospitalizations and deaths due to COVID-19 by 70-85%, reduce hospital lengths of stay and Emergency Department visits in this population, as well as decrease the risks of developing symptomatic COVID-19 by 80%, if used as post-exposure prophylaxis. Unfortunately, the method of administration of mAbs (via IV infusion) makes it challenging to administer in certain situations.

The FDA has provided emergency use authorization for the oral antiviral therapies, Paxlovid and molnupiravir, to treat patients with mild-to-moderate COVID-19 who are at high risk for progression to severe COVID-19. While Paxlovid can be used in both adult and pediatric patients (ages 12 and older weighing at least 40 kg), molnupiravir is only authorized for use in adult patients (ages 18 and older). Additionally, molnupiravir should only be used in patients for whom alternative COVID-19 treatment options approved or authorized by the FDA are not accessible or clinically appropriate.

Prior to initiating any oral antiviral therapeutic a practitioner should: (1) take a detailed history and conduct a physical examination, (2) understand the risks and benefits of treatment versus not treatment based upon the person presented in front of you, 3) have a discussion with the patient about risk, benefits, and alternatives especially since these medications are only approved for use pursuant to emergencies authorizations and thus have not received full FDA approval. Only then after using appropriate medical clinical judgment should a medication be prescribed. These decisions should always be based upon the physician-patient relationship and a shared decision-making process that is part and parcel to patient care. Both oral antivirals are available by prescription only and may only be prescribed for an individual patient by providers, nurse practitioners, and physician assistants. For more information on oral antivirals visit our website at <https://coronavirus.health.ny.gov/oral-antivirals>.

The Department has recently delivered oral antivirals to several Long Term Care "LTC" pharmacies that serve a majority of nursing homes throughout the state (see list attached). However, there are still some facilities that have their own pharmacy on-site or partner with a pharmacy we have not yet sent product to. We are asking for your assistance in getting the word out to your membership. Currently supplies of molnupiravir are more than adequate to meet the needs of all these facilities. Paxlovid supplies are expected to increase sometime in March. We feel there are several advantages to beginning with molnupiravir including that there is virtually no risk of pregnancy among nursing home residents and molnupiravir does not have the same renal cautions that Paxlovid does.

If a LTC facility that is not served by one of the pharmacies listed below is interested in receiving oral antivirals, please have them reach out to COVID19Therapeutics@health.ny.gov for more information.

Sincerely,

The COVID19 Therapeutics Team

Enclosure

Federal Partner	Pharmacy Name	Merck Allocation
MHA	LI SCRIPT	X
MHA	SPECIALTY RX	X
MHA	PHARM SCRIPT	X
MHA	PRO CARE LTC	X
MHA	HEALTH DIRECT	X
CVS	OMNICARE	X
Innovatix	PHARMERICA	X
Innovatix	CHEM RX	X
Innovatix	BUFFALO PHARMACY	X
Innovatix	PRECISION/ GREAT NECK CHEMISTS INC. OF NY	X
N/A	PARTNERS PHARMACY	X
MHA	MED WHIZ	X
N/A	WOODMARK	X
MHA	CAPITAL REGIONAL PHARMACY SERVICES	X
GeriMed	MEDICINE SHOPPE	X