State of Utah

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Deputy Director

March 3, 2022

Dear Provider,

As more and more Utahns are protected from COVID-19 with vaccine- and infection-induced immunity, we are continuing to transition to a more traditional medical model where Utah's healthcare providers can directly connect their patients to effective COVID-19 treatments. This letter offers several critical updates related to accessing COVID-19 treatments for your patients and we encourage all providers to read it in its entirety.

Given an increasing supply of COVID-19 treatments in Utah, we are aligning recommendations for prescribing all COVID-19 treatments on federal allocation to Utah to Emergency Use Authorization (EUA) criteria only. Specifically,

1. **PAXLOVID has moved to the Emergency Use Authorization (EUA) criteria only.** The state's risk score will no longer be applied when assessing eligibility for PAXLOVID.

2. **Sotrovimab has moved to the Emergency Use Authorization (EUA) criteria only, including a recent change requiring administration within 7 days from symptom onset.** The state risk score calculator has been replaced by a self-assessment tool that patients can use to determine if they are likely to meet EUA criteria. When patients or providers use this tool, COVID-19 Hotline operators are available at 1-800-456-7707 to schedule appointments at the state-operated infusion site in Millcreek for patients who meet EUA criteria. The self-assessment tool will be retired when the state-operated infusion site closes on March 31, 2022.

3. **Evusheld has moved to the Emergency Use Authorization (EUA) criteria only, including a recent change doubling the dose**. Evusheld (tixagevimab co-packaged with cilgavimab) is authorized for use as pre-exposure prophylaxis of COVID-19 in certain adults and children.

    i. Patients who previously received an initial lower dose of Evusheld (150 mg of tixagevimab and 150 mg of cilgavimab) should contact their healthcare provider and return for an additional 150 mg of tixagevimab and 150 mg of cilgavimab as soon as possible. Any subsequent repeat dosing will be timed from the date of this additional Evusheld dose.

    ii. Patients who have not received any doses of Evusheld should talk to their healthcare provider to determine whether, based on their individual

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circumstances, they are eligible to receive it. If they are eligible, they should receive **300 mg of tixagevimab and 300 mg of cilgavimab**.

b. We are currently accepting referrals at our state-operated site in Millcreek for Evusheld administration. Referrals can be sent to mabinfusions@utah.gov. **Please specify that this is a referral for Evusheld and if it is a first dose or an additional dose for EUA compliance.** You can also call the state hotline at 1-800-456-7707 to schedule an appointment for your patient. This site is free for everyone. There are no dispensing or administration fees nor billing of insurance.
c. The federal COVID-19 Therapeutics Locator can be used to find providers currently administering Evusheld. If you would like to provide Evusheld to your patients please email evancrook@utah.gov with your request.

4. **Bebtelovimab was authorized for use under an Emergency Use Authorization (EUA) on February 11, 2022 only for use when alternative COVID-19 treatment options approved or authorized by the FDA are not accessible or clinically appropriate.** Bebtelovimab is available to our partners on request (please see the survey link at the bottom of this letter). A risk-based allocation may be needed in the future should the BA.2 variant become dominant, or if the efficacy of other treatments lessens.

5. **Molnupiravir has moved to the Emergency Use Authorization (EUA) criteria only.** Molnupiravir can be appropriate when other treatments are contraindicated due to drug-drug interactions or renal impairment. Molnupiravir can be especially useful for residents of long-term care facilities of advanced age who are on medications with contraindications to PAXLOVID.

6. **The Utah Crisis Standards of Care Scarce COVID Therapeutics Guidelines will be retired**, but the option to reinstate these guidelines remains if supply, demand, or capacity changes in a way that warrants it.

7. **Residents in congregate settings (long-term care, corrections, etc.) are eligible for sotrovimab treatment so long as they meet the base EUA criteria.**

As a reminder, the federal COVID-19 Therapeutics Locator displays public locations that have received shipments of U.S. Government-procured COVID-19 therapeutics under FDA EUA authority. The locations displayed in the locator have reported stock on hand within the last day. For a list of Utah sites that have been allocated PAXLOVID, click on this link. We recommend you call to confirm available supply before sending an e-script or directing your patient to a pharmacy location.

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We have made no changes to Sotrovimab treatment locations at this time. However, **we anticipate closing the UDOH-sponsored infusion site in Millcreek on March 31, 2022.** We are seeing a decrease in demand for COVID-19 treatments and are prepared to resume operations if we experience a serious COVID-19 surge where demand outpaces available capacity in traditional healthcare settings.

We would encourage all providers to familiarize themselves with currently available COVID-19 treatments. For a detailed summary of the most recent changes, please see the COVID-19 Treatments - Information for Medical Providers webpage.

Finally, if you or your facility are interested in becoming a provider for COVID-19 treatments, please fill out this survey to let the Department know of your interest.

Thank you for all you continue to do to care for and protect Utahns.

Kindest regards,

Michelle Hofmann, MD, MPH, MHCDS
Deputy Director and Chief Medical Advisor, Utah Department of Health