



## Patient Prioritization for COVID-19 Therapeutics

**Updated January 28, 2022**

Due to the increase magnitude of cases of COVID-19 and the emergence of the Omicron variant, we are currently experiencing low supply of COVID-19 therapeutics, requiring prioritization of therapy for patients at the highest risk of severe disease. The [National Institutes of Health \(NIH\) Panel recently set prioritizations](#) for risk groups for anti-SARS-CoV-2 therapy based on 4 key elements: age, vaccination status, immune status, and clinical risk factors. The groups are listed by tier in descending order of priority. NC DHHS has adapted the NIH panel guidance to include prioritization based on “up-to-date” or “not up-to-date” on COVID-19 vaccines rather than “vaccinated” or “unvaccinated.” **At this time NCDHHS requests that all prescribers limit the use of all available COVID-19 therapies to patients that meet the Tier 1, Tier 2, or Tier 3 prioritization criteria outlined below. NC DHHS also requests that all providers seek to educate their most vulnerable patients on treatment options and availability to help ensure equitable distribution of treatments.** The North Carolina Standing Order for Sotrovimab can be viewed [here](#).

Tier 1	<ul style="list-style-type: none"><li>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 (see Immunocompromising Conditions below); or</li><li>Individuals who are not up to date with COVID vaccines and are at the highest risk of severe disease (anyone aged ≥75 years or anyone aged ≥65 years with additional risk factors).</li></ul>
Tier 2	<ul style="list-style-type: none"><li>Individuals who are not up to date with COVID vaccines and are at risk of severe disease not included in Tier 1 (anyone aged ≥65 years or anyone aged &lt;65 years with clinical risk factors)</li></ul>
Tier 3	<ul style="list-style-type: none"><li>Individuals who are up to date with COVID vaccines and at high risk of severe disease (anyone aged ≥75 years or anyone aged ≥65 years with clinical risk factors)</li></ul>

For further details regarding up-to-date vaccination status, please visit [CDC's Staying Up to Date with Your Vaccines Page](#). To view the full NIH Panel guidance for patient prioritization treatment, click [here](#).

NCDHHS is continuously monitoring supply of all COVID-19 therapeutics and will update these recommendations on patient prioritization as supply improves.

## Drug Prioritization

For non-hospitalized patients with mild to moderate COVID-19 who are at high risk of disease progression, the [NIH Panel recommends](#) using one of the following therapeutics based on availability, (listed in order of preference):

1. Paxlovid
2. Sotrovimab
3. Remdesivir
4. Molnupiravir

Note: At this time, REGEN-COV and bamlanivimab and etesevimab are no longer authorized for use due to available data that shows these products are not effective against the Omicron variant.

## How to find available COVID-19 Therapeutics

Providers who wish to prescribe COVID-19 therapy to an eligible patient can use this NC DHHS Therapeutics [locator tool](#) to find a provider or pharmacy offering mAbs or oral antivirals. This locator tool is updated daily, Monday through Friday, by NCDHHS. Given the current limited availability of all COVID-19 therapeutics, available inventory at these locations is likely to change quickly. Providers are strongly encouraged to call ahead to ensure availability before referring a patient to a particular location.