California COVID-19 Therapeutics

Best Practices Toolkit

For Health Plans

CDPH California Department of PublicHealth

California Department of Public Health • Rev.1.2 – May 22, 2023

Contents:

Executive Summary 1

CDPH Therapeutics Transition 2

Plan for Improved COVID-19 Therapeutics Access 3

Objective 1: Easy COVID-19 Treatment Pathways for Members 4

Objective 2: Member Engagement in Their Care 9

Objective 3: Up-to-Date Coverage Information 12

Objective 4: Appropriate and Equitable Access to Therapeutics 15

Objective 5: Readiness for the Next COVID-19 Surge 19

Appendix 1: Health Plan Website Best Practices 22

Appendix 2: Best Practices for Health Systems 24

Appendix 3: Inventory of Toolkit Links and Resources 28

Appendix 4: Quick Reference List of Priority Surge Preparation Activities . 31

Executive Summary

COVID-19 therapeutics are a critical tool in preventing excess hospitalizations and deaths. According to the FDA, Paxlovid alone could have led to 1,500 lives saved and 13,000 hospitalizations averted each week in the United States during a surge (based on case rates from January 2023).*

Throughout the pandemic, the California Department of Public Health (CDPH) COVID-19 Therapeutics Task Force has provided tools and resources to ensure California's health plans and providers have access to up-to-date treatment options and best practices for equitably prescribing therapeutics to all Californians.

As the California COVID-19 Emergency Declaration has ended, most of the services of the CDPH COVID-19 Therapeutics Task Force will sunset on June 30, 2023. Additionally, Local Health Jurisdictions (LHJs) are decreasing the resources allocated to improving COVID-19 therapeutics access, with increased expectation that the provision of COVID-19 vaccines, testing, and therapeutics are now an integrated part of routine healthcare services. **Health plans have the ongoing responsibility to drive initiatives and clarify plan coverage that supports COVID-19 prevention, testing, and therapeutics. Establishing these systems is imperative for saving lives and averting hospitalizations.**

All entities in public and private healthcare settings (including healthcare delivery systems, safety net providers, health plans, long-term care facilities, and providers) have a role in improving rapid access to COVID-19 therapeutics. This Best Practices Toolkit simplifies the therapeutics approach defined in California's **SMARTER Plan** and is designed to help health plans prepare their delivery systems for better COVID-19 therapeutics access. The Toolkit contains links to critical resources and highlights actionable steps to achieve the following **five objectives:**

- **Easy COVID-19 Treatment Pathways for Members,**
- **Member Engagement in Their Care,**
- **Up-To-Date Coverage Information,**
- **Appropriate and Equitable Access to Therapeutics, and**
- **Readiness for the Next COVID-19 Surge.**

For a list of the top 8 activities to complete before the fall surge, go to Appendix 4.

Aligning your system with these objectives will save lives, strengthen operations, and help you prepare for future surges.

** March 16, 2023 Meeting of the Antimicrobial Drugs Advisory Committee Meeting (fda.gov)*

CDPH Therapeutics Transition

The following table summarizes the resources and support that CDPH will continue to provide and those that will be demobilized during 2023. The COVID-19 Therapeutics Task Force has developed two Best Practices Toolkits, one for Health Plans and one for Health Systems. Each toolkit contains five objectives that plans and systems should prepare to meet by July 2023, with recommended key results and activities.

COVID-19 Therapeutics Demobilization Matrix

Type of Support	Description	CDPH Support	Build into Health Plan	Build into Health Systems
Clinical Guidance	Provider Education Webinars – **COVID-19 Therapeutics Provider Weekly**	✗ Ends 6/30/23 updates as needed		✓
	Provider COVID-19 Therapeutics Newsletter Email	✗ Ends 6/30/23 updates as needed	✓	✓
	Public Communications Campaign (Therapeutics)	! May end 6/30/23	✓	✓
	COVID-19 Therapeutics Provider Warmline: **1-866-268-4322 (866-COVID-CA)** and Online Form for all CA healthcare providers to access clinical consultation Monday through Friday 6 am – 5 pm.	! May end 6/30/23	✓	✓
	Rapid Telehealth Care (CDPH is currently providing **sesamecare.com/covidca** or **1-833-686-5051**)	! Extended through February 2024		✓
Clinics and Support	Test-to-Treat capability (State funded OptumServe sites)	✗ Exp. 3/4/23	✓	✓
	COVID-19 Antigen Tests	! While State-Funded Supplies Last	✓	
	Contact Identification/Contact Tracing Surge Staffing	✗ Exp. 3/10/23		
	General provider questions regarding Therapeutics (currently **COVIDRxProviders@cdph.ca.gov**)	! Likely to continue		✓
	Therapeutics allocations, distribution, and HPoP account inquires **CDPHTherapeutics@cdph.ca.gov**	✓ Pending decision to commercialize		✓

Figure 1: CDPH COVID-19 Therapeutics Resources and Support Transition Plan

For questions about CDPH COVID-19 Therapeutics or the Best Practices Toolkits, please reach out to COVIDRxProviders@CDPH.ca.gov.

Plan for Improved COVID-19 Therapeutics Access

The following key outcomes are recommended for Health Plans to achieve the Best Practices Toolkit **Five Objectives** for improved access to COVID-19 therapeutics.

Easy COVID-19 Treatment Pathways for Members	▪ Offer a clear pathway of **triage systems** that guides symptomatic members with COVID-19 to seek treatment. ▪ Provide members with information and coverage details for COVID-19 tests and treatment, within 2 clicks on **web and mobile apps.** ▪ Provide member coverage for **telehealth** options that offer COVID-19 therapeutics.
Member Engagement in Their Care	▪ Equip **advice lines** with current COVID-19 treatment information. ▪ Provide **easy, current, and pertinent** COVID-19 information to your members. ▪ Provide COVID-19 and treatment information to employer groups and their employees.
Up-To-Date Coverage Information	▪ **Push frequent COVID-19 information** to health systems and/or employer groups about COVID-19 therapeutics and coverage. ▪ Define your **payer process** for COVID-19 therapeutics. ▪ Establish value-based care and **equitable prescribing guidance** for provider networks. ▪ Ensure health providers are aware of available **resources for clinical questions** (e.g., COVID-19 Therapeutics Warmline 1-866-COVID-CA while available).
Appropriate and Equitable Access to Therapeutics	▪ **Create data systems to track therapeutics uptake along equity metrics** to ensure provider networks are appropriately and equitably meeting member needs. ▪ Provide your health networks with **equity metrics** to prompt for improvements.
Readiness for the Next COVID-19 Surge	▪ **Prepare** or review your internal COVID-19 **surge checklist** to assess your readiness level. ▪ Provide guidance to health systems and providers on your **surge plans**. ▪ Offer **guidance briefs to employer groups and members** with tips on how to prepare and be safe during a surge.

Figure 2: Five Objectives for Improved COVID-19 Therapeutics Access

Objective 1
Easy COVID-19 Treatment Pathways for Members

To provide clear treatment pathways for members:

- Offer a clear pathway of **triage systems** that guides members with symptomatic COVID-19 to seek treatment (phone triage, online chat appts, etc.).
- Provide members with information and coverage details for COVID-19 tests and treatment, within 1-2 clicks on **web and mobile apps.**
- Provide member coverage for **telehealth** options that offer COVID-19 therapeutics prescribing.

GOAL/KEY RESULT 1.1:

By late Summer 2023, your plan's web pages, advice lines, and telehealth coordinators will provide members with symptomatic COVID-19 with clear pathways to a clinical visit for COVID-19 treatment.

GOAL/KEY RESULT 1.2:

By Fall 2023, 100% of members with symptomatic COVID-19 will access a clinical visit within 24 hours of contact, either in-person or with a telehealth provider.

We recommend the following best practices to give members an easy and clear pathway to care, through your multiple member touchpoints.

Basic Principle	Readiness Checklist
Members should be **a) guided to seek treatment for COVID-19 symptoms,** **b) provided a clear pathway to getting an appointment within 24 hours, and** **c) given treatment within the recommended timeframe if no severe contraindication is present.**	We recommend the following actions to promote COVID-19 therapeutic care and prepare your systems for a future COVID-19 surge, likely late summer/early Fall 2023.

Basic Principle	Readiness Checklist
Live call and triage systems Prepare call agent scripts, online chat scripts, or automated call routing pathways.	• Establish processes to maintain up-to-date COVID-19 treatment information in call or chat features available to members. • **Enable automated call routing pathways and online chat scripts to guide members through COVID-19 triage and prompt them to seek care within 24 hours.** • Update call agent scripts to triage members inquiring about COVID-19 coverage and promote the importance of seeking treatment within 24 hours.
Website and mobile applications Websites should offer information about COVID-19 and minimal steps to accessing care.	• **Implement web/mobile pages to present COVID-19 information on the first or second click, before member login.** • Prompt members who are logged in to their account to select options to view their plan's coverage options and how to find a prescribing provider. • Follow website "best practices" as outlined Appendix 1.
Telehealth Provide telehealth options for members.	• Telehealth has become an essential healthcare service option since the onset of the COVID-19 pandemic. Evaluate your plan's telehealth coverage to ensure members experiencing COVID-19 symptoms or testing positive can access care through telehealth options. • **Ensure contracted telehealth providers are providing quality care and are accurately and equitably prescribing treatment to members.**
Pharmacy Ensure contracted pharmacies are equipped to provide COVID-19 medications within the window of treatment.	• Verify that your contracted pharmacies have adequate COVID-19 therapeutic drug supplies on hand and offer expedited access to members with COVID-19, such as regular/extended pick-up times, drive-up delivery, or home delivery. • Routinely review prescriptions that have not been picked up and implement outreach processes to support members to access their COVID-19 treatments. • Develop plans for providing members with access to COVID-19 therapeutic prescriptions in rural or hard-to-reach areas.

Basic Principle	Readiness Checklist
Infusion access Give members who require IV treatment information on their plans covered infusion centers.	• Ensure that members who receive prescriptions for IV COVID-19 therapeutics have access to infusion sites that are covered by your plan.
Timely coverage decisions Ensure access is not delayed due to coverage decision processes.	• Ensure that prior authorization is not required for COVID-19 therapeutics that have a 7-day or less window for initiating treatment. **If prior authorization is necessary for any COVID-19 treatment, ensure that systems for authorizing are streamlined to prevent treatment delays.**

Helpful Links

- CDPH COVID-19 Treatments Communication Toolkit
- Learn more about who is eligible for treatment.
- California Department of Health Care Services (DHCS) MediCal and Telehealth
- Finding Providers and Test-to-Treat Sites
  - ◊ COVID-19 Therapeutics Locator (arcgis.com) or call 1-800-232-0233 (TTY 888-720-7489)
  - ◊ Test-to-Treat (hhs.gov)

A: Sample Member Call Flow
Patient Reporting COVID-19 Symptoms

The following flow charts suggest best practices for responding to member inquiries and recommending expedited access to providers prescribing COVID-19 therapeutics.

If a member calls reporting COVID-19 symptoms *(Figure 3)* or a positive COVID-19 test *(Figure 4)*, a series of questions can help your call centers to quickly triage the member and determine next steps.

Figure 3 suggests a flow for members calling reporting COVID-19 symptoms (in adults or high-risk children).

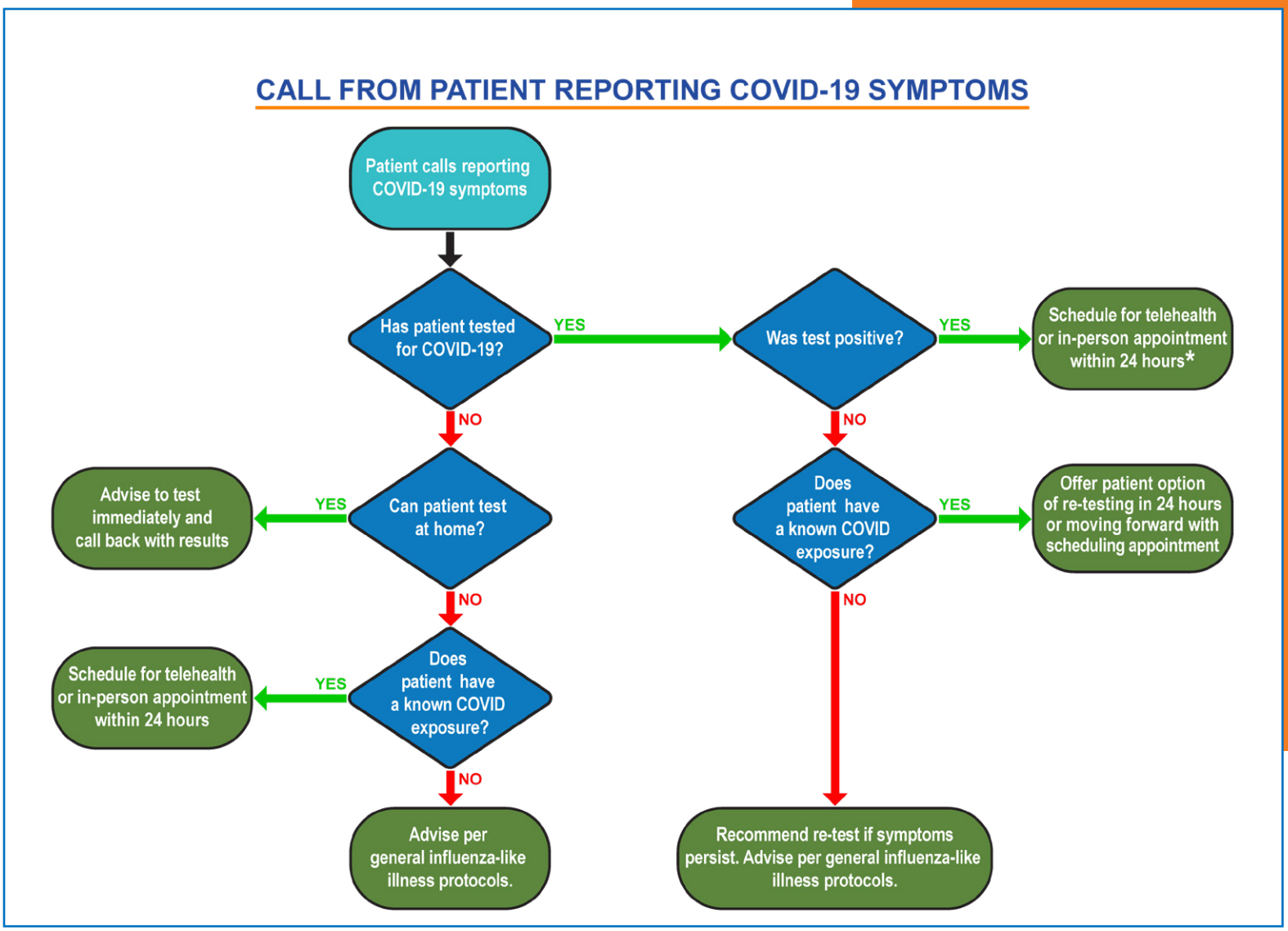


Figure 3: Workflow "Patient Call Reporting COVID-19 ***Symptoms****"*

B: Sample Member Call Flow
Patient Reporting COVID-19 Positive Test

Figure 4 suggests a flow for members calling to report a positive COVID-19 test (for adults and high-risk children).

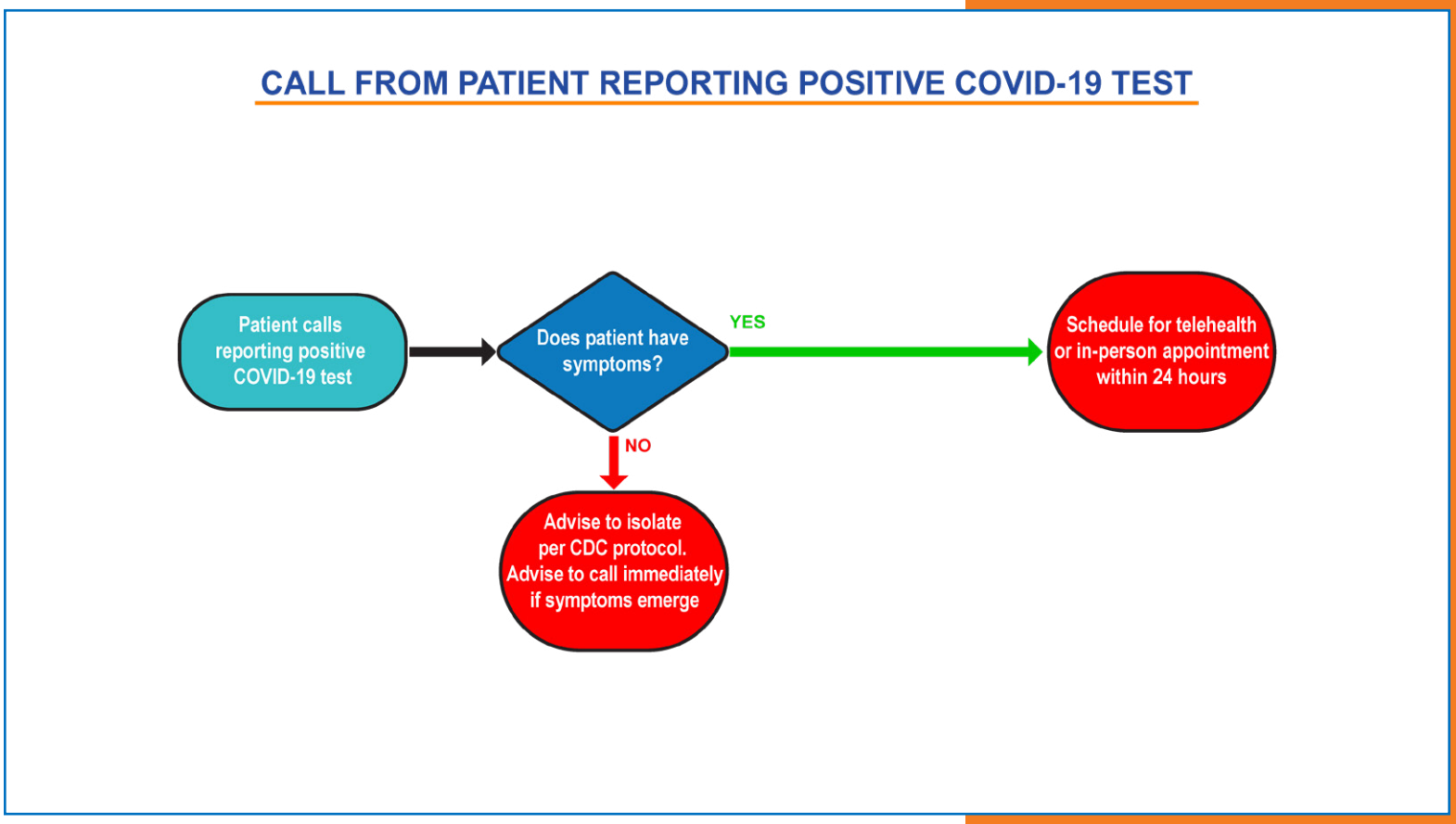


Figure 4: Workflow "Patient Call Reporting positive COVID-19 ***Test****"*

Objective 2
Member Engagement in Their Care

Members need to be able to recognize COVID-19 symptoms, understand the importance of prompt treatment, know their testing options, and see clear steps to get treatment. Your plan should offer up-to-date testing and treatment information through multiple member communication touchpoints. To prepare your members to be engaged in their care:

- Equip **advice lines** with current COVID-19 treatment information.
- Provide **easy, current, and pertinent** COVID-19 information to your members.
- Provide COVID-19 treatment information to employer groups and their employees.

GOAL/KEY RESULT 2.1:

By Fall 2023, 100% of member communication channels (texts, call lines, chat, applications, websites, etc.) will have clear, relatable, and up-to-date information on **how, where, and why** to seek COVID-19 treatment.

GOAL/KEY RESULT 2.2:

By Fall 2023, members will have received at least 5 pushed communications about the importance of COVID-19 treatment and how to rapidly access care (e.g., pushed SMS/text notification, email notice, mailed update, etc.).

GOAL/KEY RESULT 2.3:

By Fall 2023, at least 50% of respondents to a health plan survey (e.g., your advice-line post-call survey) will indicate improved knowledge of COVID-19 treatment and how to access treatment if they become ill.

We recommend the following best practices to engage members in their healthcare with access to accurate and up-to-date COVID-19 information.

Basic Principle	Readiness Checklist
COVID-19 information should be current and relatable to your members.	We recommend the following actions to engage members in their healthcare and to prepare your system in the event of a future COVID-19 surge, likely late summer/early Fall 2023.
Push notifications Push COVID-19 information to members.	• Establish push notifications through email or SMS text to members, offering the latest COVID-19 treatment information and how to seek care. • Prepare push notifications to inform members on prevention and care, to send within 5 days of a new COVID-19 surge.
Telehealth and advice lines Assess call lines to ensure members are routed to appropriate COVID-19 information.	• Set up call routing trees to guide members to COVID-19 questions/answers or quickly route to speak directly with an agent. • **Update agent call scripts to guide members to important COVID-19 information and emphasize the value of seeking treatment for COVID-19.** • Schedule routine verification that agents are communicating the value and importance of COVID-19 therapeutics on a routine basis. • Develop protocol for providing up-to-date information and revising call scripts as information changes. • **Develop a process to revise agent information and call scripts within 5 business days of a COVID-19 surge event.** • Provide member post-call surveys to measure efficacy of therapeutic information provided during the call.

Basic Principle	Readiness Checklist
Website and mobile applications Websites should offer information about COVID-19 symptoms, the importance of introducing treatments quickly, and how to access treatment.	• Revise member web/mobile pages to present COVID-19 information within the **first or second** click, before member login. • Prompt members logged in to their account to select options to gain access to find a prescribing provider within 24 hours. • Offer your members a link to the California for All treatment page to prompt discussion of COVID-19 treatment options with their providers. • Prepare website and mobile application updates to implement within 5 days of a COVID-19 surge event. • Place a rating mechanism on websites or applications for members to measure usefulness of COVID-19 information. • See Appendix 1 for more best practices on updating your web pages.
Engage members in their care	• Maintain and expand your community partnership relationships for communicating your plan coverage and the importance of COVID-19 therapeutics, for reaching members in diverse communities, and for promoting community resilience. • Provide feedback mechanisms for members to share their experience with seeking treatment within their plan coverage, including perceptions of ease, timeliness, and member experience.

Helpful Links

- The California for All COVID-19 home page (ca.gov) site is a great resource where members can learn more about COVID signs, symptoms, and treatments. For specific, public-facing information about COVID-19 therapeutics, visit the the California for All COVID-19 treatments page.
- Download printable graphics and fact sheets from the CDPH COVID-19 Therapeutics Communications Toolkit.

Objective 3
Up-to-Date Coverage Information

Giving employer groups current COVID-19 information enables them to offer these resources to employees and enhances their health and wellness culture.

Sharing your health plan's benefit offerings and information on COVID-19 therapeutics with your contracted health systems and providers ensures quality of care. Providers should be equipped with accurate and current information about whom, when, and why to prescribe COVID-19 therapeutics.

To provide up-to-date plan coverage information:

- **Frequently push COVID-19** information to health systems and/or employer groups about COVID-19 therapeutics and coverage.
- Define your **payer process** for COVID-19 therapeutics.
- Ensure health providers are aware of available **resources for clinical questions** (e.g., COVID-19 therapeutics Warmline 1-866-COVID-CA while available).

GOAL/KEY RESULT 3.1:

By Fall 2023, document and share your plan's coverage options (clarifying any changes with the commercialization of COVID-19 vaccines, testing, and treatments).

GOAL/KEY RESULT 3.2:

By Fall 2023, 100% of employer groups and members are informed of your plan's COVID-19 coverage and how to access care.

GOAL/KEY RESULT 3.3:

By Fall 2023, distribute your plan's COVID-19 coverage and claims processes to your contracted network of health systems and providers.

We recommend the following best practices to ensure adequate knowledge about COVID-19 treatments.

Basic Principle	Readiness Checklist
Members, employers and providers should understand your plan offerings for COVID-19 care and receive frequent updates of trustworthy COVID-19 information.	We recommend the following actions to establish trusted communication pathways with employers and health providers for sharing COVID-19 information updates and to prepare your system for future COVID-19 surges.
Up-to-date COVID-19 therapeutics information and coverage for employer groups	• Document and distribute your plan coverage options for members seeking COVID-19 care and therapeutics. Define coverage available immediately following commercialization of therapeutics and available benefit offerings for members at open enrollment. • Establish routine COVID-19 prevention, testing and treatment communications to share with employer groups, which can be shared with their employees. • Prepare communications for employer groups about your plan's actions to support members, to be sent within the first 5 days of a COVID-19 surge event in your coverage area.
Refresh and update provider knowledge	• Provide clear coverage information and therapeutics options to provider networks via email messages, newsletters, and any other established communications channels. • Include covered infusion site information in provider messages.
Provide guidelines to encourage health systems and providers to offer COVID-19 therapeutics	• Share your plan coverage and claims processes for member coverage of COVID-19 care and therapeutics with your contracted network of health systems and providers. • Encourage your contracted network of health systems and providers to **keep up-to-date on current COVID-19 therapeutic directives**, and share treatment updates with their patients. • Assign a team to track COVID-19 therapeutics studies and guidelines as information continues to evolve, and share important changes with your contracted network of health systems and providers.

Basic Principle	Readiness Checklist
Provide guidelines to encourage health systems and providers to offer COVID-19 therapeutics	• Consider co-branded COVID-19 treatments patient information flyers that health systems can provide in waiting rooms or provider offices. • **Maintain up-to-date information channels for providers and communicate your plan's actions in routing members to seek COVID-19 care, within 1-3 days of a COVID-19 surge.** • Include covered infusion site information in provider messages. • Provide feedback loops for contracted health systems to rate the usefulness of information shared. • While this resource remains available, health systems should be reminded and encouraged to connect providers with the COVID-19 Therapeutics Provider Warmline. The warmline offers confidential consultation on testing and treating simple or complex COVID-19 patients. Information is accessible as a warmline at 1-866-268-4322 (1-866-COVID-CA) or a confidential web inquiry.

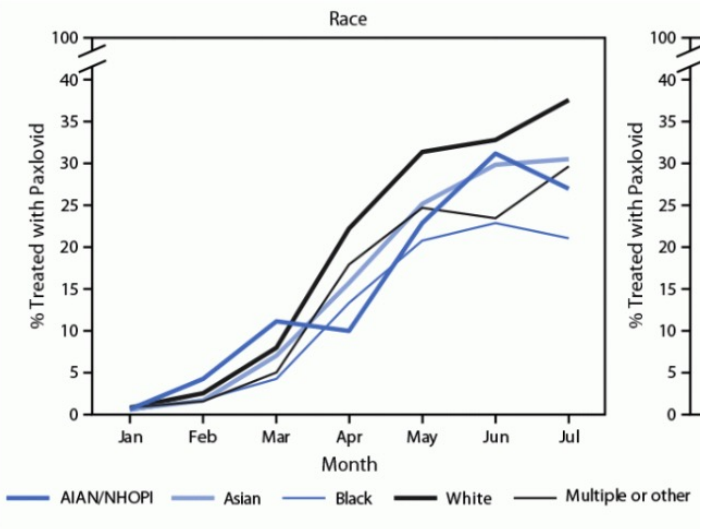
Helpful Links

- COVID-19 Therapeutics Provider Warmline
  While this remains available, recommend providers call 1-866-268-4322 (COVID-CA) to receive free and confidential consultation on COVID-19 testing and treatment or submit your cases online.
- COVID-19 Therapeutics Best Practices (Appendix 2)
- Therapeutics Myths and Facts (ca.gov)
- Test To Treat FAQs and Helpful Links
- CDPH Healthcare Provider Resources

Objective 4
Appropriate and Equitable Access to Therapeutics

Ensuring therapeutics are equitably accessed starts with looking at data. Recent statewide data shows that COVID-19 therapeutics have not been equitably prescribed across race/ethnicity and income. In February 2023, Dr. Rita Nguyen, the Assistant Health Officer at CDPH, presented a COVID-19 therapeutics update at the CMA Grand Rounds, highlighting disparities in health equity and offering suggestions to dispel myths surrounding dispensing treatment. Your team should consider race, ethnicity, and other social determinants of health while developing your plan's COVID-19 therapeutics access best practices.

Racial and Ethnic Disparities in COVID-19 Treatment



- CDC MMWR: During April–July 2022, the percentage of COVID-19 patients ages ≥20 years treated with Paxlovid was 36% and 30% lower among Black and Hispanic patients than among White and non-Hispanic patients, respectively.

http://dx.doi.org/10.15585/mmwr.mm7143a2

Image: CMA Grand Rounds presentation (February 2023)

California Health and Human Services (CalHHS) and CDPH measure health equity and offer equitable solutions to address disparities throughout the state. View CDPH Health Equity pages for more information.

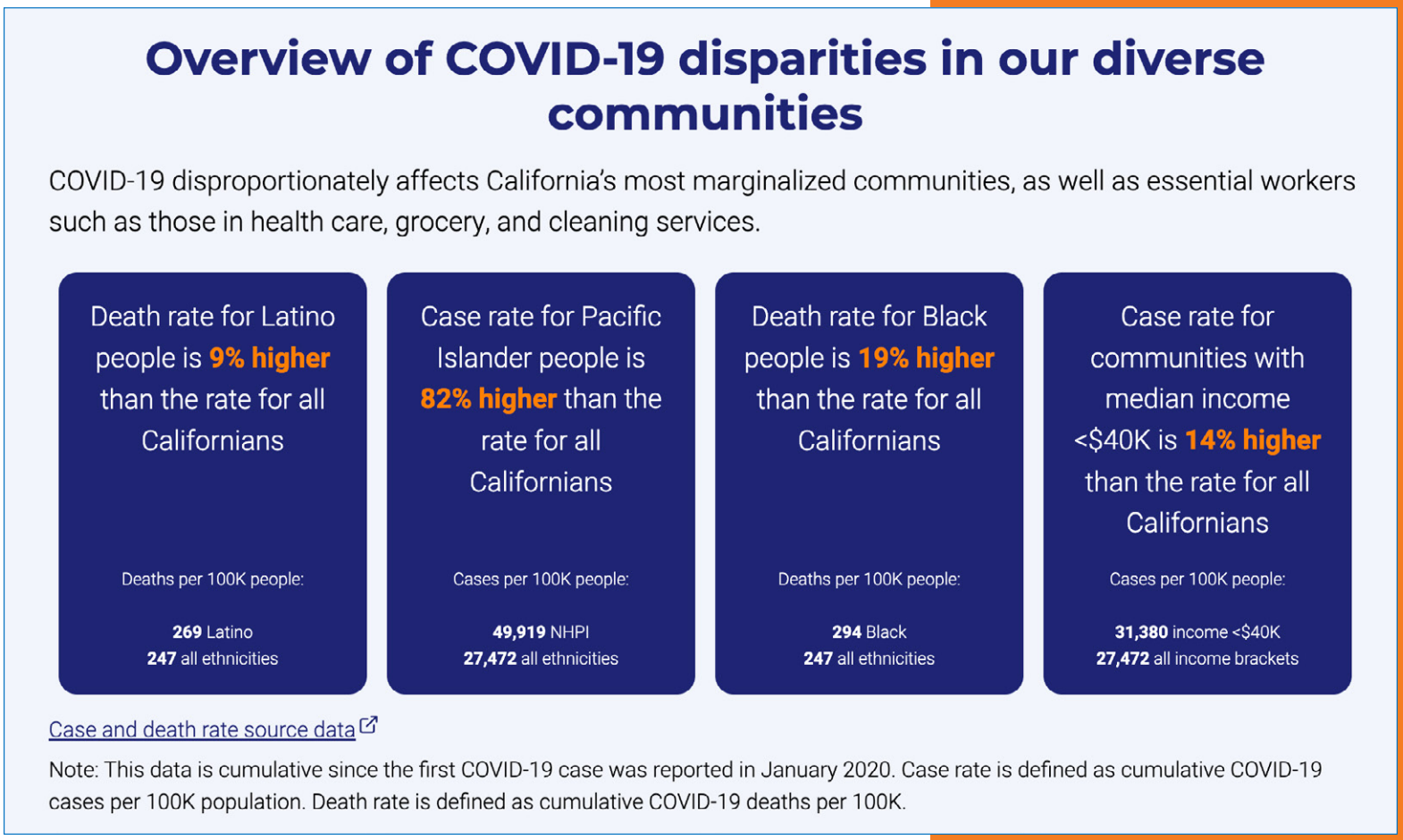


Image: COVID-19 Health Equity page (February 2023)

Objective 4 continued

CDPH recommends tracking disparities in COVID-19 vaccine, testing, and therapeutics uptake to ensure your contracted health systems and providers are appropriately and equitably meeting your member population's needs. To ensure members have appropriate and equitable access to COVID-19 therapeutics:

- **Create data systems to track therapeutics uptake along equity metrics to ensure provider networks are appropriately and equitably meeting member needs.**

Provide your health networks with **equity metrics** to prompt for improvements.

GOAL/KEY RESULT 4.1:
By Fall 2023, evaluate your tracking and reporting on the prescribing rates for COVID-19 treatments of different races, ethnicities, and other equity factors such as zip code health equity scores.

GOAL/KEY RESULT 4.2:
By Fall 2023, schedule routine validation processes that measure COVID-19 treatment prescribing rates per symptomatic COVID-19 case are within a 3% deviation between different races and ethnicities.

GOAL/KEY RESULT 4.3:
By Fall 2023, the percentage of COVID-19 therapeutics prescribed across race and ethnicities will mirror the demographics of your health plans membership panel (within a 3% deviation).

We recommend the following best practices to operations to promote appropriate and equitable COVID-19 patient care.

Basic Principle	Readiness Checklist
Set and measure goals for your prescribing providers to administer COVID-19 therapeutics in an appropriate and equitable manner.	We recommend the following actions to establish equitable COVID-19 therapeutics administration across your plan provider groups.
Use metrics to increase equity • Establish therapeutics prescribing metrics and measurement tools. • Conduct routine reviews to develop intervention plans. • Set goals for health systems and providers to prescribe treatments equitably.	• Implement tracking mechanisms to measure prescription rates with race and ethnicity data. • Set goals and offer tools to ensure provider treatment prescribing rates are within a 3% deviation between different races and ethnicities. • Conduct quarterly equity reviews and report outcomes with specific interventions to lower member barriers to therapeutic access. • Define **target equity metrics for your contracted network of health systems and providers when treating and prescribing COVID-19 therapeutics to patients.** • Use tracking data to develop and communicate your plan's actions to support members appropriately and equitably in the next COVID-19 surge. • Develop a plan to support member populations with medication access in hard-to-reach areas during a COVID-19 surge.
Promote your equitable prescribing achievements Share what your plan is doing to support appropriate and equitable access to treatment.	• Promote your health plan's equity strategy and outcomes on your website. • Continue building on your community partnership relationships to ensure your member population is informed of COVID-19 therapeutics availability and to support equitable access and prescribing. • Share strategies with other health plans to promote best practices in treating Californians.

Helpful Links
• CDPH COVID-19.CA.GOV Commitment to Health Equity • CalHHS COVID-19 Equity Metrics

Objective 5
Readiness for the Next COVID-19 Surge

Prepare for future surges. Throughout the COVID-19 pandemic, we have experienced periodic surges in cases, including during fall and winter seasons. Prepare your member support structure by reviewing your internal COVID-19 surge protocols and checklist to assess and bolster your readiness level. To prepare your health plan for a new COVID-19 surge:

- Prepare or review your internal COVID-19 surge checklist to assess your readiness level.
- Provide guidance to health systems and providers on your surge plans.
- Offer guidance briefs to employer groups and members with tips on how to prepare for and be safe during a surge.

See *Appendix 4* for a streamlined checklist of the top eight readiness items to review when a COVID-19 surge occurs.

GOAL/KEY RESULT 5.1:
By Fall 2023, have your COVID-19 surge readiness framework 100% complete.

GOAL/KEY RESULT 5.2:
By Fall 2023, test your readiness framework, and ensure scalability with 100% success rate.

We recommend the following best practices to implement as part of their COVID-19 therapeutics reactivation protocols.

Basic Principle	Readiness Checklist
Prepare your teams through training and reinforcing support models during non-emergent times.	During this non-emergent time, implement the readiness checklist for Objectives 1-4. • Test and evaluate the processes and tools implemented for Objectives 1-4 to ensure your support model readiness. • Develop a plan to scale and activate the necessary emergent support to your members within one week of a COVID-19 surge event. • Develop communication plans to inform and refresh plan protocols for possible new COVID-19 therapeutic guidelines, including those requiring IV infusion. • Develop communication plans to inform members, employer groups and health networks of your plan's actions to support members during a COVID-19 surge.
Push notifications Push COVID-19 information to members.	• Prepare to send push notifications to members offering the latest COVID-19 treatment information and how to seek care, timed when COVID-19 case rates are high or within 5 days of a COVID-19 surge.

Helpful Links

The following sites offer readiness recommendations.

- CDC Guidance for Pandemic Readiness
- CDPH COVID-19 Surge Readiness for SNF
- FEMA COVID-19 Best Practices
- The White House Surge Readiness

Thank You

We expect COVID-19 to persist, and we appreciate the work your health plan is doing to integrate therapeutics into the daily operations in managing member COVID-19 health.

Your members rely on their health plans for trustworthy information on COVID-19 vaccines and boosters, monitoring exposure, knowing the signs and symptoms of COVID-19, knowing when and how to test, and knowing how to access COVID-19 treatments. We encourage your teams to continue educating members through web pages, information bulletins, push notification reminders, and information shared to their employer groups. This toolkit is intended to assist your team in preparing your call agents, telehealth providers, contracted health systems and clinical support teams to support COVID-19 therapeutics prescribing and stay up to date on the latest in COVID-19 vaccination and therapeutics guidance.

Our team is available through June 30, 2023, to answer any questions or offer other helpful tips or links as they become available. If you have any questions or would like communications materials to share with providers or members, please contact COVIDRxProviders@cdph.ca.gov.

Aligning your system with the objectives outlined in this toolkit will save lives, strengthen operations, and prepare you for future surges.

Appendix 1: Health Plan Website Best Practices

Health Plan Website Best Practices

The California Department of Public Health (CDPH) wants to ensure that your members have timely, accurate, and easily accessible information about COVID-19 treatments to decrease their risk of hospitalization and death, as well as long COVID.

Below is a summary of best practice principles and guidance for all member and contracted provider-facing content and educational materials, including clinical advice phone lines, online content, mailed content, and internal policies.

Guiding Principles of Website Content & Design

1. COVID-19 information should be current and pertinent to your members with relevant resources for testing and options for accessing treatments.
2. Members should be **prompted to seek testing and treatment** for COVID-19 symptoms and provided with clear pathways for getting an appointment within 24 hours.
3. Pathways for accessing treatments should clearly state:
    a. **why** treatment is recommended (prevention of serious illness, probable prevention of Long COVID),
    b. that treatments are recommended for **most adults**, and
    c. what the **treatment window** is (within 5-7 days of symptom onset).
4. Recommendations for isolation should always prominently include the advice to also seek treatment.

As a best practice, CDPH recommends that health plan websites contain the following:

1. Up-to-date and accurate information about COVID-19 treatments in an easily accessible place to members.
    a. **Members with symptoms should be encouraged to immediately get tested and seek COVID-19 treatment options if positive – in addition to isolating.**
    b. The short time window (within 5-7 days of symptom onset) for initiating treatment should be emphasized, as well as the fact that **treatments are indicated for mild to moderate symptoms.**
    c. Your website should include information about:
        i. signs and symptoms of COVID-19,
        ii. how to get tested &/or find treatment,
        iii. what to do upon testing positive, and
        iv. what treatments are currently available.

Appendix 1: Health Plan Website Best Practices *(continued)*

2. Clear next steps for members to take if they are symptomatic or if they have tested positive for COVID-19 (i.e., contact their provider/nurse advice line, schedule an appointment using a provided link, etc.).

   Members with symptomatic COVID-19 should be directed to an urgent care-type pathway for either in-person or telehealth access within 24 hours.

3. If your plan sends members to a telehealth service, ensure that:

   a. Your telehealth vendor protocols prioritize rapid access to care for even mild symptoms.

   b. Your telehealth vendor protocols accurately assess individuals for high-risk conditions – please note that includes:

      i. Being unvaccinated or not fully vaccinated and boosted,

      ii. Being over the age of 50 regardless of the presence of other comorbidities, or

      iii. Having common conditions like diabetes, obesity, physical inactivity, depression, and many others. You can find more information at the CDC.

   c. Your telehealth providers are prescribing appropriately.

   d. Your covered pharmacies can provide the medications within the window of treatment.

4. If your website has a digital triage system or symptom screener, next steps and what to expect should be clear. The prompts should both:

   a. Identify appropriate members for treatments, **and**

   b. Give members the reasons why treatments could be important for them.

If you have any questions or would like communications materials to share with provider networks or members, please contact COVIDRxProviders@cdph.ca.gov before June 30, 2023. We can review your specific website pages and advise you on how to improve them.

Appendix 2: Best Practices for Health Systems

Guidance Topic	Checklist	Relevant Links
Testing	☐ **For symptomatic patients:** Share instructions on how to access same- or next-day testing. Note: A positive test is no longer required for oral COVID-19 therapeutics if the clinical suspicion is high based on the patient's exposure history. ☐ **For patients that test positive:** Emphasize that therapeutics are available, recommended for most adults, and share instructions on how to access a same-day prescriber to discuss COVID-19 treatment. ☐ **Accept self-attestation of a positive COVID-19 test to facilitate care.**	FDA Roundup: February 3, 2023 | FDA
Prescribing	**A: Provider Education** ☐ **Regularly share updates on therapeutics** ○ Ensure all relevant staff receive up-to-date information (via internal provider communication channels, using webinars, CME opportunities, and relevant listservs including CDPH's weekly email therapeutics update). ○ Set a regular cadence to share updates, such as a monthly provider meeting. ☐ Point providers to helpful tables reviewing therapeutics treatment **options and clinical decision aids.** ☐ **Provide clarifications on clinical guidelines.** ○ **Per *CDPH guidance*, encourage providers to prescribe COVID-19 therapeutics for:** ✔ **All symptomatic patients over the age of 50 regardless of the presence of other risk factors.** Those over 50 have a 25-fold risk of death compared to 18–29-year-olds, or ✔ Symptomatic patients who face structural barriers to health and/or face disproportionate rates of hospitalization or death from COVID-19. ○ Verification of oxygen saturation is not a pre- requisite to prescribing COVID-19 therapeutics.	CDPH COVID-19 Therapeutics webpages COVID-19 Therapeutics Provider Warmline. While this remains available, recommend providers Call 1-866-268-4322 (COVID-CA) to receive free and confidential consultation on COVID-19 testing and treatment or submit your cases online CDPH Therapeutics Updates signup CDC Risk of COVID-19 Infection, Hospitalization, and Death by Age Group

Guidance Topic	Checklist	Relevant Links
Prescribing	**A: Provider Education** *(continued)* ☐ Highlight data on treatment efficacy. ☐ Clarify that viral rebound is typically mild and should not be considered treatment failure. ○ No evidence currently exists to suggest rebound is due to antiviral resistance. **B: Enhanced Workflows** ☐ **Minimize number of steps to access treatments.** ○ Ensure those with symptoms and a clinical diagnosis can see a provider the same or next day (in-person or telehealth). ☐ **Provide a member/patient call center line to assist with access.** ☐ **Identify high-risk patient populations and encourage COVID-19 treatment pre-planning.** **C: Navigating Drug Interactions** ☐ **Make providers aware of online tools to check drug-drug interactions (DDIs),** especially with Paxlovid which contains ritonavir, a CYP3A4 inhibitor. ☐ **Make clinical consultation advice lines available for providers and pharmacists** (including having an on-call pharmacist or pharmacy hotline). ○ While this remains available, recommend providers Call 1-866-268-4322 (COVID-CA) to receive free and confidential consultation on COVID-19 testing and treatment or submit your cases online. ☐ **Find alternative ways to verify patients' current medications.** This can include calling the patient's pharmacy or their usual doctor's office for their medication list. ☐ **If available, utilize Electronic Health Record (EHR) e-prescribing function** to ensure access to medication reconciliation.	Nonhospitalized Adults: Therapeutic Management | COVID-19 Treatment Guidelines (nih.gov) COVID-19 Health Care Professional Resources FDA Underlying Medical Conditions Associated with Higher Risk for Severe COVID-19: Information for Healthcare Professionals COVID-19 Therapeutics Decision Aid (hhs.gov) Liverpool COVID-19 Interactions (covid19-druginteractions.org)

Guidance Topic	Checklist	Relevant Links
Prescribing	**D: Prescribing to a Pharmacy** ☐ **Regularly review and confirm prescribing workflows** that accurately connect patients to: ○ Same-day receipt of oral therapeutics and ○ COVID-19 infusion sites. ☐ **Identify pharmacies that carry COVID-19 therapeutics at:** HHS Therapeutics Locator. ☐ **Promote prescription options with same-day home delivery** through courier and/or expedited mail order.	
Dispensing	☐ Pharmacies should prioritize the prescription fill and ensure timely turnaround to support initiating therapy as soon as possible. ☐ In making a reasonable attempt to clarify any concerns with the provider and/or patient, pharmacists should use clinical judgement and consider the impact of delayed COVID-19 treatment. Treatment must be started within 5 days of symptoms onset. Confirmation of eGFR is not a necessity to fill a COVID-19 therapeutic prescription, as it is only used as a guidance for recommended Paxlovid dosing. **Confirmation of eGFR is not a necessity to fill a COVID-19 therapeutic prescription, as it is only used as a guidance for recommended Paxlovid dosing.**	PAXLOVID Patient Eligibility Screening Checklist Tool for Prescribers Resource Guide for Pharmacies to Prevent Delayed COVID-19 Treatment

Guidance Topic	Checklist	Relevant Links
Other Best Practices	☐ **Share educational materials** from public health campaigns on COVID-19 treatments with patients. ☐ Caring for uninsured patients and/or a patient new to your clinic or system. ○ Lower barriers to seek urgent care for evaluation and treatment for COVID-19, including shortening or bypassing standard enrollment processes. ○ Become a Medi-Cal Qualified Provider. ○ Offer low-cost telehealth options. ☐ **Regularly review therapeutics utilization data to understand barriers and disparities.**	COVID-19 Treatment - Coronavirus COVID-19 Response (ca.gov) CDPH Therapeutics Communications Toolkit HHS ASPR Test-To-Treat Digital Toolkit California's commitment to health equity - Coronavirus COVID-19 Response Medi-Cal Applications by Provider Type PAVE - Provider Application and Validation for Enrollment

Appendix 3: Inventory of Toolkit Links and Resources

Topic	Link
End of Emergency Resources	
California's COVID-19 SMARTER Plan	• SMARTER Plan (PDF) • SMARTER Plan Fact Sheet (PDF) • SMARTER Plan Home Page (ca.gov) • SMARTER Plan Q&A (ca.gov)
California end of emergency and commercialization information	• Department of Consumer Affairs (DCA) Waivers (ca.gov) • Department of Health Care Services Medi-Cal COVID-19 PHE Unwinding Plan (PDF) • DHCS Medi-Cal PHE Unwinding Guide (ca.gov) • End of California's COVID-19 State of Emergency and the Federal Public Health Emergency for COVID-19 (ca.gov) • Pharmacy Waivers Extended Beyond the COVID-19 Emergency (PDF)
Federal end of emergency and commercialization information	• ASPR PREP Act webpage (hhs.gov) • Commercialization of COVID-19 Medical Countermeasures (hhs.gov) • Coronavirus Waivers and Flexibilities (cms.gov) • Creating a Roadmap for the End of the COVID-19 Public Health Emergency (cms.gov) • Fact Sheet: COVID-19 Public Health Emergency Transition Roadmap (hhs.gov) • FAQs: What Happens to EUAs When A Public Health Emergency Ends? (fda.gov) • HHS ASPR's Technical Resources, Assistance Center, and Information Exchange (TRACIE) Medical Countermeasures Commercialization page hhs.gov) • Kaiser Family Foundation's Commercialization Impacts Guide (kff.org) • Kaiser Family Foundation's End of PHE Policy Memo (kff.org) • Preemption of State and Local Requirements Under a PREP Act Declaration (justice.gov) • Physicians and Other Clinicians: CMS Flexibilities to Fight COVID-19 (cms.gov) • PREP Act Q&A (phe.gov) • Working with partners to transition COVID-19 medical products to the commercial markets (hhs.gov)

Appendix 3: Inventory of Toolkit Links and Resources *(continued)*

Topic	Link
Patient Access Resources	
California's COVID-19 website	• California for All Landing Page (covid19.ca.gov)
Triage workflow	• Triage Workflows
Website Best Practices	• Website Best Practices
Patient Engagement Resources	
CDPH COVID-19 Therapeutics Communications Tools	• COVID-19 Therapeutics Communications Toolkit (ca.gov)
COVID-19 Treatment Guide	• California for All COVID-19 Treatments Page (ca.gov)
Provider Education Resources	
CDPH COVID-19 Warmline for Providers	• 1-866-268-4322 (1-866-COVID-CA) Submit Cases Inquiries Online Form (google.com) *Note: funding/availability past 6/30/23 not guaranteed
CDPH COVID-19 Therapeutics Resources	• Therapeutics Myths and Facts (PDF) • COVID-19 Treatment Resources for Providers (ca.gov) • CDPH COVID-19 Treatments Landing Page (ca.gov) • COVID-19 Therapeutics Best Practices (Appendix 2) • COVID19RxProviders@CDPH.CA.gov • Provider Webinar Registration Link (zoom.us) • Therapeutics/Test To Treat FAQs (PDF)
CMA Grand Rounds COVID-19 Treatments Recording	• CMA Grand Rounds (cmadocs.org)
Liverpool COVID-19 Drug Interactions	• Liverpool Interactive Drug-Drug Interaction Checker (covid19-druginteractions.org)
US Federal COVID-19 Treatments Resources	• CDC Eligibility Guidelines for Therapeutics (cdc.gov) • FDA COVID-19 Landing Page for Health Care Professionals (fda.gov) • FDA Paxlovid Patient Screening Checklist (PDF) • NIH COVID-19 Clinical Treatment Guidelines (nih.gov) • HHS ASPR COVID-19 Therapeutics Decision Aid (PDF)

Appendix 3: Inventory of Toolkit Links and Resources *(continued)*

Topic	Link
Equity Resources	
ASTHO Website	• Association of State and Territorial Health Officials COVID-19 page (astho.org)
CalHHS Equity Metrics	• COVID-19 Equity Metrics (ca.gov)
CDPH Health Equity Resources	• Commitment to Health Equity (ca.gov)
COVID-19 therapeutics locator (arcgis.com)	• Therapeutics Locator (arcgis.com) • 1-800-232-0223 (TTY 888-720-7489)
HHS.gov Test-to-Treat	• Test-to-Treat (hhs.gov)
Surge Readiness Resources	
CDC COVID-19 Pandemic Planning	• CDC COVID-19 Planning (cdc.gov)
CDPH COVID-19 Facility Surge Readines	• CDPH COVID-19 Surge Readiness for SNFs (PDF) • CDPH COVID-19 Surge Readiness for LTCFs (PDF)
FEMA COVID-19 Best Practices	• FEMA COVID-19 Best Practices (fema.gov)
White House Surge Readiness	• The White House Surge Readiness (whitehouse.gov)

Appendix 4

Quick Reference List of Priority Surge Preparation Activities

At a Glance

1. Ensure website and call lines have accurate, current information.
2. Push notifications to members about treatment availability and access pathways should they develop COVID-19.
3. Review triage/advice line call scripts and pathways to ensure timely access to treatments.
4. Remove prior authorization requirements or ensure these requirements are not delaying therapeutics access.
5. At first signs of a COVID-19 surge, push messages containing available treatments and any relevant coverage information to provider networks.
6. Confirm infusion sites are accepting COVID-19 patients and share this information with provider networks.
7. Verify telehealth capacity for your members is sufficient to meet needs and the telehealth vendor is prescribing COVID-19 medication.
8. Notify employers of treatments coverage and current processes, including covered infusion sites.

Member Education	
Push notifications Push COVID-19 information to members.	• Establish push notifications through email or SMS text to members offering the latest COVID-19 treatment information and how to seek care. • Prepare push notifications to inform members on prevention and care within 5 days of a new COVID-19 surge.
Website and mobile applications Websites should offer information about COVID-19 and minimal steps to accessing care	• Implement web/mobile pages to present COVID-19 information on the first or second click, before member login. • Prompt members who are logged in to their account to view their plan's coverage options and how to find a prescribing provider.

Appendix 4

Quick Reference List of Priority Surge Preparation Activities *(continued)*

Provider & Employer Education	
Real-time access to COVID-19 therapeutics information and coverage for providers and employer groups Offer up-to-date COVID-19 information.	• Document and distribute your plan coverage options for members seeking COVID-19 care and therapeutics. Define coverage available immediately following commercialization of therapeutics and available benefit offerings for members at open enrollment. • Establish routine COVID-19 prevention, testing and treatment communications to share with employer groups, which can be shared with their employees. • Prepare communications for employer groups about your plan's actions to support members, to be sent within the first 5 days of a COVID-19 surge event in your coverage area.
Refresh and update provider knowledge	• Provide clear coverage information and therapeutics options to provider networks via email messages, newsletters, and any other established communications channels. • Include covered infusion site information in provider messages.
System Resources	
Live call and triage systems Prepare call agent scripts, online chat scripts, or automated call routing pathways.	• Establish processes to maintain up-to-date COVID-19 treatment information in call or chat features available to members. • Enable automated call routing pathways and online chat scripts to guide members through COVID-19 triage and provide members with next action guidance for seeking care within 24 hours.

Appendix 4

Quick Reference List of Priority Surge Preparation Activities *(continued)*

System Resources	
Telehealth and advice lines Assess call lines to ensure members are routed to appropriate COVID-19 information.	• Set up call routing trees to guide members to COVID-19 questions/answers or quickly route to speak directly with an agent. • Update agent call scripts to guide members to important COVID-19 information and emphasize the value of seeking reatment for COVID-19. • Schedule ongoing verification that agents are communicating the value and importance of COVID-19 therapeutics on a routine basis. • Develop a protocol for providing up-to-date information and revising call scripts as information changes. • Develop a process to revise agent information and call scripts within 5 business days of a COVID-19 surge event. • Establish member post-call surveys to measure efficacy of therapeutic information provided during the call.
Telehealth Provide telehealth options for members.	• Evaluate your plan's telehealth coverage to ensure members with symptomatic COVID-19 can access therapeutics through telehealth options. • Ensure contracted telehealth providers have the ability to provide quality care and have information to accurately and equitably prescribe COVID-19 treatment to members.
Infusion access Give members who require IV treatment information on their plans covered infusion centers.	• Ensure that members who receive prescriptions for IV COVID-19 therapeutics have access to infusion sites that are covered by your plan.
Timely coverage decisions	• Ensure that prior authorization is not required for COVID-19 therapeutics that have a 7-day or less window for initiating treatment. If prior authorization is necessary for any COVID-19 treatment, ensure that systems for authorizing are streamlined to prevent treatment delays.