Connecticut Department of Social Services
Medical Assistance Program **Provider Bulletin 2022-62**
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TO: Pharmacy Providers, Physicians, Nurse Practitioners, Physician Assistants, Clinics, Long Term Care Providers, and Hospitals
RE: Paxlovid Prescribing by Pharmacists

The U.S. Food and Drug Administration (FDA) recently revised the Emergency Use Authorization (EUA) for Paxlovid (nirmatrelvir and ritonavir), to authorize pharmacists to prescribe Paxlovid to eligible patients, with certain limitations to ensure appropriate patient assessment and prescribing of Paxlovid.

Effective 08/03/2022, pharmacists can prescribe and dispense to a patient a maximum of a 5 day supply of Paxlovid based on the below FDA guidance.

Patients who have tested positive for COVID-19 and are seeking to determine their eligibility for receiving Paxlovid at locations where prescribing by pharmacists is available should bring the following information to ensure that the pharmacist has sufficient information to determine their eligibility to receive Paxlovid:

- Electronic or printed health records less than 12 months old, including the most recent reports of laboratory blood work for the state-licensed pharmacist to review for kidney or liver problems. State-licensed pharmacists could also receive this information through a consult with the patient's health care provider.
- A list of all medications they are taking, including over-the-counter medications so the state-licensed pharmacist can screen for drugs with potentially serious interactions with Paxlovid.

Under the limitations outlined in the authorization, the pharmacist should refer patients for clinical evaluation with a physician, advanced practice registered nurse, or physician assistant licensed or authorized under state law to prescribe drugs, if any of the following apply:

- Sufficient information is not available to assess renal and hepatic function.
- Sufficient information is not available to assess for a potential drug interaction.
- Modification of other medications is needed due to a potential drug interaction.
- Paxlovid is not an appropriate therapeutic option based on the current Fact Sheet for Healthcare Providers or due to potential drug interactions for which recommended monitoring would not be feasible.

Paxlovid is authorized for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kilograms or about 88 pounds) with positive results of direct SARS-CoV-2 viral testing, who are at high risk for progression to severe COVID-19, including hospitalization or death. Patients in the authorized population who report a positive home test result from a rapid antigen diagnostic test, or a positive PCR test, to their provider are eligible for Paxlovid under the EUA. Confirmation of a positive home rapid antigen diagnostic test with additional direct SARS-CoV-2 viral testing, such as a PCR, is

not required. Antibody tests are not considered to be direct SARS-CoV-2 viral tests.

The pharmacist may submit their NPI as the prescribing provider's NPI on claims submitted to the Connecticut Medical Assistance Program (CMAP). If the pharmacist has not registered with NPPES for an individual NPI, the NPI of the pharmacy dispensing may be entered on the pharmacy claim. In that instance, the name of the pharmacist must be clearly documented on the Paxlovid prescription.