

## MEMORANDUM

November 8, 2021

To: Licensed Long-Term Care Facilities (LTCFs) in Vermont  
From: William Fritch, Director of Operations  
RE: Monoclonal Antibody Treatments for COVID-19

Please be advised that treatment with monoclonal antibody therapies (mAbs) can reduce the risk for hospitalization and death among persons with COVID-19. These therapies are also approved for use as post-exposure prophylaxis in certain situations, and there is now a preparation that can be administered subcutaneously, facilitating outpatient use. Access to these therapies should be routinely discussed as part of situation and outbreak response in LTCFs. Additional details are included below.

### Overview of Therapies

The FDA has issued [Emergency Use Authorizations](#) (EUAs) for a number of investigational antibodies that can attach to parts of the SARS-CoV-2 virus (the virus that causes COVID-19). These antibodies could help the immune system recognize and respond more effectively to the virus.

Recently, [studies have shown](#) that treatment with mAbs can **reduce the risk for hospitalization and death among persons with mild to moderate COVID-19 by 70%**.

The FDA's [EUA](#) for the mAb REGEN-COV (casirivimab and imdevimab, administered together) includes provisions for use with persons who have tested positive for COVID-19, as well as for persons who had or are likely to have close contact with someone with COVID-19, who meet additional risk criteria. REGEN-COV is currently the only mAb for COVID-19 with allowances for administration subcutaneously.

Providers and LTCF staff should review the FDA materials linked above, as well as [guidance published by the Department of Health](#), for additional eligibility and treatment information.

### Implications for Facilities

LTCFs should expect discussion of mAbs to occur during situation and outbreak response calls with the Vermont Department of Health (VDH), alongside other standing discussion items, such as PPE and staffing capacity.

The VDH Healthcare Outbreak Prevention and Response (HOPR) team leads response calls with LTCFs. If there is potential indication for use of mAbs, the HOPR team will send a follow-up email to the facility. This email will include eligibility guidance as well as a form to request

mAbs, to be completed by facility staff (e.g., Medical Director, Director of Nursing) once permissions and medical orders have been collected for eligible residents. For facilities who do not have a Medical Director, those medical orders may need to be obtained from residents' primary care providers (PCPs).

In addition to the HOPR team leading response calls, there is another team at VDH who will be assisting LTCFs in accessing mAbs. The Healthcare Coalition Communications (HCC) team at VDH will receive any requests for mAbs that are submitted by LTCFs. The HCC team is available to work with LTCFs to determine the most appropriate way for mAbs to be administered.

Typically, mAbs are administered intravenously. There are allowances for subcutaneous administration in certain situations with one mAb product (REGEN-COV). In either case, administration of mAbs may be challenging for LTCFs, perhaps excepting skilled nursing facilities (SNFs). The HCC team can work with LTCFs, particularly non-SNFs, to determine how best to proceed with administration. This might involve partnership with a local hospital, either for staffing support or for utilization of their infusion clinic. Alternatively, it might involve deployment of EMS staff to support onsite administration of mAbs.

The HCC team is also available to work through situations involving a need to prioritize in the event of limited mAb resources.

While there will be opportunities to discuss this process with the teams at VDH, during response calls or in follow-up with the HCC team, if you have questions you feel would be more appropriately answered by DAIL, please email [william.fritch@vermont.gov](mailto:william.fritch@vermont.gov). If you would like to contact the VDH HCC team directly, you can email [AHS.VDHVTHPP@vermont.gov](mailto:AHS.VDHVTHPP@vermont.gov).

Thank you for all your work on behalf of your residents and communities. It is our privilege to continue partnering with you on this response.

Sincerely,

Will Fritch  
Director of Operations