



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

Promoting and protecting health, well-being, self-sufficiency, and safety of all in Marin County.

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PUBLIC HEALTH ADVISORY

COVID-19 Therapeutics | Test-To-Treat

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Background

COVID-19 case rates in Marin County are increasing rapidly, raising concerns about potential increases in hospitalizations and deaths. Appropriately prescribed oral antivirals can significantly reduce risk of COVID-19 hospitalization and death.

In an effort to enhance access to COVID-19 treatments, Marin County Public Health is directing residents seeking COVID-19 treatment to their healthcare providers. In addition, Marin residents can now [self-refer](#) to test-to-treat sites, which provide both COVID-19 testing and medication in a single visit for patients who meet criteria.

Marin healthcare providers should stay [up to date](#) on the evaluation and management of COVID-19, maintain therapeutics prescribing competence, and remain aware of the [test-to-treat resources](#) available to patients.

Test-to-Treat Site Protocols

In the test-to-treat model, patients wait approximately 20 minutes for results and undergo an on-site assessment to determine if they meet criteria to receive treatment in a single visit.

Test-to-treat sites may refer some patients back to their primary care provider for more comprehensive assessment for treatment.

California Department of Public Health (CDPH) is now offering a test-to-treat program at the Marin County [OptumServe testing site](#) (1177 E. Francisco Blvd., San Rafael, CA 94901). Other test-to-treat sites can be found [online](#).

Eligibility criteria for test-to treat:

- COVID-19 positive
- Symptomatic < 5 days
- 12 years and older
- Weigh more than > 40 kg
- Pass high risk criteria
- Pass drug interaction screen



The following patients will be referred by state test-to-treat sites to their primary care provider for evaluation:

- Asymptomatic patients with a positive antigen test
- Positive patients at low risk for severe illness
- Higher risk patients who do not pass the drug interaction screen

Actions Requested of Providers:

Prescribers should take the following steps when considering oral antiviral treatment:

1. Review the [FACT SHEET FOR HEALTHCARE PROVIDERS: EMERGENCY USE AUTHORIZATION FOR PAXLOVID.](#)
2. See self-referred patients and patients referred from test-to-treat sites as soon as possible (no later than 5 days of symptom onset). Review their patient’s medication list, discuss the risks and benefits of treatment, and discuss modified dosing (including hepatic / renal dosing; holding or reducing dose of concomitant medication while anti-viral treatment is administered).
3. Confirm that patient has an active COVID-19 infection with a positive rapid antigen or molecular test prior to treatment.
4. Review eligibility criteria, adverse reactions, and drug interactions with patients. Consultation with a clinical pharmacist and the [Liverpool COVID-19 Drug Interactions website](#) should be considered.
5. Refer patients who require emergency care due to severity of symptoms to the emergency room for evaluation.

Immunocompromising Conditions

- Active treatment for solid tumor and hematologic malignancies
- Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of CAR-T-cell therapy or hematopoietic cell transplant (HCT) Within 2 years of transplantation OR on immunosuppressive therapy
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection:
- HIV and CD4 cell counts <200/mm³
- History of an AIDS-defining illness without immune reconstitution
- Clinical manifestations of symptomatic HIV
- Active treatment with high-dose corticosteroids (i.e., ≥20 mg prednisone or equivalent per day for ≥ 2 weeks); alkylating agents; antimetabolites; transplant-related immunosuppressive drugs; cancer chemotherapeutic agents classified as severely immunosuppressive; tumor necrosis factor (TNF) blockers; or other biologic agents that are immunosuppressive or immunomodulatory

CDC-defined Underlying Medical Conditions Associated with Higher Risk for Severe COVID-19

- Cancer
- Cerebrovascular disease
- Chronic kidney disease
- Interstitial lung disease
- Current pulmonary embolism
- Pulmonary hypertension
- Bronchopulmonary dysplasia
- Bronchiectasis
- COPD
- Cirrhosis
- Non-alcoholic fatty liver disease
- Alcoholic liver disease
- Autoimmune hepatitis
- Diabetes mellitus, type 1 and type 2
- Congestive heart failure
- Coronary artery disease
- Cardiomyopathy
- Mood disorders - including depression, Schizophrenia spectrum disorders
- Obesity (BMI ≥ 30 kg/m²)
- Pregnancy
- Smoking
- Active Tuberculosis
- Social determinants of health, which may include but are not limited to: unstable housing, poverty or food insecurity, single head of household in minimum wage employment, non-English speaking immigrant, active substance use disorder.