State Rules and Recommendations Regarding Chloroquine, Hydroxychloroquine and Other Drugs Related to COVID-19

States Restricting Dispensing
New York: Executive Order from Gov. Andrew Cuomo restricting dispensing:
 Bans pharmacists from dispensing hydroxychloroquine or chloroquine except: When written as prescribed for a US Food and Drug Administration (FDA)-approved indication; or As part of a state approved clinical trial related to COVID-19 for a patient who has tested positive for COVID-19 Positive COVID-19 test result must be documented as part of the prescription.
 Prohibits use of hydroxychloroquine or chloroquine for experimental or prophylactic use. Any permitted prescription is limited to one 14-day prescription with no refills.
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Nevada: Board of Pharmacy guidance restricting dispensing:
 Restricts the dispensing of chloroquine and hydroxychloroquine.
 May only be dispensed for the treatment of, not for the prevention of, COVID-19 so long as:
 The patient has a diagnosis of COVID-19 and the diagnosis is indicated on the prescription; The prescription is limited to no more than a 14-day supply; No refills may be permitted unless a new prescription is furnished; and The pharmacist confirms that the prescribing practitioner submitted an individual "compassionate use" or expanded access request with the FDA. Issued to prevent the stockpiling of chloroquine and hydroxychloroquine. Remains in effect until June 30, 2020.
Ohio: <u>Emergency rule</u> restricting dispensing:
 No prescription for chloroquine or hydroxychloroquine may be dispensed by a pharmacist or sold at retail by a licensed terminal distributor of dangerous drugs unless all of the following apply: The prescription bears a written diagnosis code from the prescriber; and If written for a COVID-19 diagnosis, the diagnosis has been confirmed by a positive test result, which is documented on the prescription, and both of the following apply: The prescription is limited to no more than a 14-day supply; and No refills may be permitted unless a new prescription is furnished. Prescriptions for either presumptive positive patients or prophylactic use of
chloroquine or hydroxychloroquine related to COVID-19 is strictly prohibited unless:

- The drugs are for use as part of a documented institutional review boardapproved clinical trial to evaluate the safety and efficacy of the drugs to treat COVID-19; or
- \circ $\;$ The drugs are used for the continuation of inpatient treatment for COVID-19.
- The rule applies only to outpatient use.
- The board does not have a formal position on the use of chloroquine or hydroxychloroquine to treat patients diagnosed with COVID-19 and defers to the FDA and US Centers for Disease Control and Prevention to determine whether chloroquine or hydroxychloroquine is appropriate in the treatment of COVID-19.

Idaho: Board of Pharmacy <u>Temporary Rule</u> restricting dispensing:

- No prescription for chloroquine or hydroxychloroquine may be dispensed except if all the following apply:
 - The prescription bears a written diagnosis from the prescriber consistent with evidence for its use;
 - The prescription is limited to no more than a 14-day supply, unless the patient was previously established on the medication prior to 3/19/2020; and
 - No refills are permitted unless a new prescription is furnished.

Kentucky: Board of Pharmacy FAQ and Guidelines restricting dispensing:

- Prescriptions for chloroquine, hydroxychloroquine, mefloquine, and azithromycin may only be dispensed if:
 - The prescription bears a written diagnosis from the prescriber consistent with its use;
 - The prescription is limited to no more than a 10-day supply, unless the patient was previously placed on the medication prior to March 25, 2020; and
 - No refills may be permitted unless a new prescription or medication order is furnished with established written diagnosis and indication for continuation of therapy.
- Prescribers may continue to write prescriptions for large quantities of these drugs, but pharmacists cannot dispense them.
- For other drugs being prescribed for off-label use for COVID-19, pharmacists must use professional judgement to determine if a valid patient-prescriber relationship exists and if the quantity prescribed is appropriate. A pharmacist may also need to obtain a diagnosis.

North Carolina: Board of Pharmacy Emergency Rule restricting dispensing:

- Rule applies to hydroxychloroquine, chloroquine, lopinavir-ritonavir, ribavirin, darunavir, and azithromycin;
- For above drugs, a pharmacist can only fill or refill a prescription if that prescription bears a written diagnosis from the prescriber consistent with its evidence for use;
- If a patient has been diagnosed with COVID-19, any prescription of a drug listed above for the treatment of COVID-19 must:

- Indicate on the prescription that the patient has been diagnosed with COVID-19;
- $\circ~$ Be limited to no more than a 14-day supply; and
- Not be refilled, unless a new prescription order is issued, including not being refilled through an emergency prescription refill.
- A pharmacist cannot fill or refill a prescription for a drug listed above for the prevention of, or in anticipation of, the contraction of COVID-19 by someone who hasn't yet been diagnosed.
- This rule doesn't apply to prescriptions for a drug listed above for a patient previously established on that drug before March 10, 2020.

Texas: Board of Pharmacy <u>restricting</u> dispensing:

- No prescription or medication order for chloroquine, hydroxychloroquine, mefloquine or azithromycin may be dispensed or distributed unless all the following apply:
 - The prescription or medication order bears a written diagnosis from the prescriber consistent with the evidence for its use;
 - The prescription or medication order is limited to no more than a 14-day supply unless the patient was previously established on the medication; and
 - No refills may be permitted unless a new prescription or medication order is furnished.

States Offering Recommendations

Louisiana: The Board of Pharmacy <u>encourages</u> pharmacies to exercise discretion.

- The board originally issued an emergency rule to limit the dispensing of chloroquine and hydroxychloroquine to address shortages, but rescinded the rule after it received information about a significant donation and distribution of the drugs from the manufacturer, along with the removal of the drug from FDA's drug shortage list.
- It now encourages each pharmacy to exercise professional discretion to dispense limited quantities of the drug as appropriate.

Kansas: The Board of Pharmacy <u>encourages</u> vigilance, and:

- Strongly encourages vigilance in processing new prescriptions for chloroquine and hydroxychloroquine.
- Recommends that if used, chloroquine and hydroxychloroquine should be restricted to patients who are admitted to hospitals with COVID-19 infections.
- Urges pharmacists to consider that patients currently taking hydroxychloroquine for FDA-approved indications (lupus, rheumatoid arthritis) could be affected by increased prescribing and that supplies should be monitored by pharmacists for medication availability.
- Recommends reaching out to prescribers to verify COVID-19 diagnosis.

Missouri: Board of Pharmacy recommendations:

- The recommendations were made in response to concerns about stockpiling of medication, inappropriate use, and potential drug shortages for patients with a legitimate need.
- Recommendations to prescribers to prevent drug shortages:
 - Prescribing hydroxychloroquine, chloroquine, and azithromycin for COVID-19 prophylactic is discouraged and not recommended.
 - Prescribers include the diagnosis code or diagnosis with the prescription.
 - Prescribers should consider limiting the amount prescribed.
- For pharmacies:
 - Pharmacists should use professional judgement and take steps to verify that newly issued prescriptions for hydroxychloroquine, chloroquine, and azithromycin are issued for a legitimate medical purpose. They should contact prescribers to confirm a diagnosis.
 - Licensees should limit supplies of hydroxychloroquine, chloroquine and azithromycin prescribed for presumptive COVID-19 patients or prophylactic use.
 - They should consider limiting dispensing for patients newly prescribed hydroxychloroquine, chloroquine, or azithromycin without a supporting diagnosis.
- The board did not recommend that pharmacies refuse to fill, just recommended using caution.