Since March 2020, when Coronavirus disease-19 (COVID-19) was declared a global pandemic, racial and ethnic minoritized groups have been disproportionately affected. Non-Hispanic Black, Hispanic/Latino, and Native American persons are twice as likely to be hospitalized or die from COVID-19 or related morbidities when compared to White persons.¹ This number has remained constant during the two-year span of the pandemic with minimal fluctuation. With the emergence of COVID-19 variants and persistence of COVID-19 related hospitalizations, mitigating health disparities among minoritized groups is imperative. We are writing to emphasize the importance of equity and parity surrounding the access and allocation of COVID-19 therapeutics and vaccinations within racially and ethnically minoritized communities.

Irrespective of preventive measures and COVID-19 specific therapeutics that have been developed, minoritized individuals continue to remain at a disadvantage.²⁻⁴ Also, minoritized individuals are less likely to have insurance or an established primary care
provider, limiting their access to necessary, life-saving healthcare. In a letter delivered in February of 2021, the National Pharmaceutical Association (NPhA) and Society of Infectious Diseases (SIDP) advocated for equitable access to COVID-19 vaccinations and the role of pharmacists in mitigating observed health inequities. Since this pharmacist-led call for equity, three COVID-19 vaccines have been introduced. Pharmacists have employed unique, tailored approaches to promote equity in the immunization process and vaccinated millions. Although pharmacists have served as racially concordant, trustworthy messengers and translators of COVID-19 scientific information, as well as clinical coordinators for outreach efforts that prioritize minoritized patients, vaccine uptake continues to lag in communities of color. Furthermore, advocacy of vaccine equity and accessibility is waning as the pandemic wears on. This is particularly alarming, as the need for third doses of the COVID-19 vaccines has become imperative and uptake remains minimal among minoritized groups, placing them at great risk.

COVID-19 directed therapeutics such as Paxlovid® (nirmatrelvir-ritonavir), molnupiravir, and sotrovimab have shown activity against the most recent COVID-19 variant. However, minoritized individuals are less likely to be the recipients of these novel agents despite being disproportionately represented among those with COVID-19 severe illness and death. Thus, strategies to promote equitable access and allocation of these COVID-19 medications, including developing risk-based allocation protocols that incorporate race and ethnicity, are of extreme importance. While some states have attempted to implement such measures, they have been met with opposition. Thus, it is imperative that the federal government provide clear guidance and recommendations that place health equity at the forefront of access and allocation processes. As pharmacists play a major role in providing these medications to patients, we are dedicated to advocating for their equitable distribution to minoritized individuals and strongly urge the federal government to exercise urgency in addressing these barriers.

As pharmacists who share with other healthcare professionals the responsibility to ensure health equity, we offer the following recommendations for your consideration:

- Federal adoption of therapeutic allocation protocols that prioritize race and ethnicity, which are strong indicators of COVID-19 severe illness and death, as a means of equitably distributing medications that may be in limited supply.
- Recognition of the continued importance of engaging community pillars within minoritized communities in conversations regarding the need for additional vaccinations to protect against morbidity and mortality associated with a continually evolving SARS-CoV2 virus.
• Continued engagement of racially concordant pharmacists and other healthcare professionals as trusted messengers to overcome the dissemination of COVID-19 related misinformation and disinformation.
• Increased allocation of vaccines to primarily minoritized communities and utilization of pharmacists, student pharmacists, and pharmacy technicians to help narrow vaccination disparity gaps.

We recognize that the equitable access and allocation of COVID-19 treatment modalities will be essential to ending the pandemic. We are committed to supporting the healthcare community and the Biden-Harris Administration in efforts to ensure a transparent and just allocation of COVID-19 therapeutics and preventive measures.

Please contact us if we can provide additional information relevant to the foregoing recommendations.

Respectfully,

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References:


