Remdesivir to be Sold to Hospitals, Allocated through Existing Federal Mechanism

HHS Secures Nearly All of Gilead Production for Next Three Months

The Department of Health and Human Services (HHS) yesterday announced it struck a deal with Gilead to secure 500,000 additional treatment courses of remdesivir that will be distributed during the months of July, August and September. Unlike previous distributions of the medication, hospitals will be expected to buy the medication from Gilead and its distributor, AmeriSource Bergen. It will be made available to hospitals at the negotiated price of about $3,200 per average treatment course, according to the HHS announcement.

Hospitals will be allowed to make purchases for the amount of product determined by the federal government and their state health department to be their fair share of the available product every two weeks. As with HHS’s previous distributions of donated remdesivir, this determination will be made using hospital-reported information on the number of currently hospitalized COVID-19 patients and, of those hospitalized, the number requiring placement in intensive care units (ICUs).

Hospitals will be asked to submit data through the TeleTracking web portal by Monday at 8 p.m. ET every two weeks beginning July 6. For additional information on how to submit data, see the AHA’s May 11 Special Bulletin on what data to submit and how to enter it into TeleTracking. Hospitals that already use TeleTracking for their daily reporting do not need to do anything differently for this remdesivir data collection, other than ensure their data are in by the deadline. All hospitals should report at least the six data fields for COVID-19 admissions and ICU numbers into TeleTracking, even if they are using another reporting mechanism (e.g., National Healthcare Safety Network, or state reporting) for daily reporting. For issues with accessing the TeleTracking portal or questions about the data, contact TeleTracking Technical Support at 1-877-570-6903.

The federal agencies will use these data to determine the proportional amount to be allocated to each state and territory, as well as to the Veterans Administration, Department of Defense and Indian Health Service hospitals. The states and territories will determine how to distribute the remdesivir among the hospitals in their jurisdiction.

Unlike previous distributions, the states will communicate to AmeriSource Bergen how the remdesivir should be allocated to their hospitals, and AmeriSource Bergen will deliver it directly to the designated hospitals. To facilitate this distribution and the billing
for the product received, hospitals will need to have a relationship with AmeriSource Bergen. If your hospital does not already have a relationship with AmeriSource Bergen, you are encouraged to establish such a relationship immediately.