



Paul W. Abramowitz, Pharm.D., Sc.D. (Hon), FASHP
Chief Executive Officer

May 7, 2020

The Honorable Michael R. Pence
Vice President of the United States
The White House
Office of the Vice President
1600 Pennsylvania Avenue, N.W.
Washington, DC 20500

Re: Ensuring Transparency of Remdesivir Allocations

Dear Vice President Pence:

On behalf of our more than 55,000 pharmacists, student pharmacists, and pharmacy technicians practicing on the front lines of COVID-19 response, we urge the Administration to take immediate action to ensure transparent and orderly allocation of remdesivir to our nation's hospitals.

Following the Food & Drug Administration's announcement of the Emergency Use Authorization (EUA) for remdesivir, hospitals immediately sought supply for their COVID-19 patients. To date, our understanding is that Gilead has donated its current supply of remdesivir, and AmerisourceBergen will distribute that supply based on direction from the federal government. However, the process for hospitals to access the drug remains unclear.

Given the very limited initial supply of the drug, 1.5 million doses that translate into a 5- or 10-day course of treatment for 140,000 patients, it is clear that the majority of current COVID-19 patients will not receive it. Understandably, hospitals with COVID-19 patients are desperate to access the product. Because the current supply is so limited, many of these hospitals will likely have to wait to purchase remdesivir until Gilead has commercial supply available. To allow hospitals to plan, it is imperative that the allocation process for the drug be transparent and well communicated to our nation's hospitals, and their Chief Pharmacy Officers and Directors of Pharmacy.

We urge the Administration to make public its process for determining which hospitals will receive the drug, to communicate information about the drug allocations to all hospitals, and to provide as much information as possible on the timeline for commercial availability of remdesivir, as well as how commercially available product will be distributed. Please ensure that the same level of transparency is applied to new treatments and vaccines as they become available. Further, we request that the Administration coordinate with the FDA and the Department of Health & Human Services to provide flexibility to hospitals to reallocate product to meet changing needs. For example, if only one hospital in a region receives an allocation, but another hospital in the state experiences a spike in severe cases, hospitals should have the ability to send remdesivir doses where they are most needed.

ASHP and other stakeholders stand ready to help disseminate this information to our members and to provide you with any available information about COVID-19 patient volume and treatment that could support orderly distribution of remdesivir.

ASHP thanks the Administration for its continued efforts to defeat COVID-19. Please do not hesitate to let us know if we can provide any additional information or assist the Administration in any way.

Sincerely,

Paul W. Abramowitz