

**Talking Points Regarding Outpatient Remdesivir in Pediatric Patients**

- The U.S. Food and Drug Administration recently expanded the use of the antiviral drug VEKLURY (more commonly known as remdesivir (rem-des-uh-veer)) to certain non-hospitalized adults and pediatric patients. It was previously only available to hospitalized patients.
- It is used for the treatment of mild-to-moderate COVID-19 to reduce the risk of hospitalization in high-risk patients.
- It isn't a substitute for being vaccinated.

**Requirements for pediatric patients**

- It is approved for use in pediatric patients 28 days old or older who weigh at least 3 kilograms (about 7 pounds).
- Patients must have a positive COVID test with mild-to-moderate symptoms and be at a high risk for progression to severe COVID-19.
- The drug should be administered within 7 days of symptoms appearing.

**How is remdesivir administered?**

- This antiviral drug is administered through a vein with daily IV infusions for 3 consecutive days in an outpatient setting at Children's Hospital.
- On the day of the first infusion, lab tests will be sent before infusion is started. The infusion can be administered prior to those labs resulting.
- Patients are monitored during the infusion and observed for at least 1 hour after the infusion.
- The amount of the dose is adjusted for the child's body weight.

**What is the cost?**

- There are costs for the drug itself, for the infusion used to deliver the drug, and for lab tests.
- The cost of the antiviral drug will vary depending upon the child's weight and how much of the drug is used.

Weight	Total number of vials for 3 days of therapy based on PINETREE	Cost of Drug
20 kg (44 pounds) or less	3	Up to \$5,460 Up to \$3,276 with 40% self-pay discount
21 kg (46.2 pounds) or more	4	Up to \$7,280 Up to \$4,368 with 40% self-pay discount

- Costs will vary depending on whether the patient has insurance. We expect patients with insurance to have much less out-of-pocket costs.
- Most insurance plans will cover the cost of the infusion so parents should check with their insurance provider to see if they are covered. Medicare and Medicaid provide coverage for cost of the infusion.
- Lab tests that are included with the infusion treatment will total \$327 for four different tests. For those who are self-pay, the discounted cost will be \$196.20.
- Some patients with commercial insurance plans may have out-of-pocket costs for the infusion or lab tests. Check with your insurance provider. Parents may call the BJC Price Estimate line for specific questions about their potential costs at 314.747.8845 or toll-free 1.844.747.8845.