

COVID-19 FAQs for AmerisourceBergen Wholesale Distribution Customers



Updated 5.4.2020: This document is intended to answer questions from AmerisourceBergen customers about what we are doing to respond to the global COVID-19 pandemic. With additional questions, please reach out to your AmerisourceBergen representative.

Updated and new FAQs are marked with **New!** or **Updated!** below Heather Zenk's letter.

We want your feedback!

We want to hear how AmerisourceBergen is doing to support you during the Covid-19 crisis. Share your feedback via a 2-minute survey. [TAKE THE SURVEY HERE.](#)

What I've Learned Leading AmerisourceBergen's COVID-19 Task Force

Heather Zenk, RPh, PharmD

I have the privilege of leading AmerisourceBergen's COVID-19 Task Force. Over the last two months, the Task Force has had the responsibility and the privilege to lead our enterprise response to COVID-19, making recommendations on actions and policies to AmerisourceBergen's Executive Management Committee as our 22,000 associates navigate this global pandemic together.



[Read more about what I've learned.](#)

Q: **New!** Where can I find recordings of AmerisourceBergen's recent customer calls?

A: AmerisourceBergen has been holding regular calls with our customers and manufacturers to share insights on what we've learned and what we are seeing in the supply chain throughout the COVID-19 crisis. To listen to any of the recordings, see the list below.

For details to join any upcoming calls, reach out to your sales representative or solutions@amerisourcebergen.com.

Calls for hospitals, health systems and IDNs (Health Systems & Specialty Services):

- AmerisourceBergen Inventory Huddle #4 (April 24) [Watch now](#)
- AmerisourceBergen Inventory Huddle #3 (April 17) [Watch now](#)
- AmerisourceBergen Inventory Huddle #2 (April 10) [Watch now](#)
- AmerisourceBergen Inventory Huddle #1 (April 3) [Watch now](#)
- AmerisourceBergen Health Systems COVID-19 Townhall (March 27) [Watch now](#)

Calls for retail, LTC and specialty pharmacies (Community & Specialty Pharmacy):

- AmerisourceBergen Community & Specialty Pharmacy Customer Town Hall (April 21) [Watch now](#)

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- AmerisourceBergen Community & Specialty Pharmacy Customer Town Hall (April 7) [Watch now](#)
- AmerisourceBergen Community & Specialty Pharmacy Customer Town Hall (March 24) [Watch now](#)

Calls for Manufacturers:

- Manufacturer town hall: Managing through COVID-19 (April 9): [Watch now](#)
- Manufacturer town hall: Responding to COVID-19 (March 20): [Watch now](#)

Q: Updated! What factors is AmerisourceBergen seeing in the marketplace that are influencing the supply chain?

Every partner in the pharmaceutical supply chain is doing their part to manage current patient needs and the long-term needs of the supply chain nationwide and globally.

1. The world was unprepared for the patient influx associated with a global pandemic. The fact of the matter is that in some cases, pharmaceutical demand is exceeding supply. While product demand is starting to normalize, we are keeping a watchful eye on the supply chain in case of unexpected spikes, especially as some states and localities prepare to relax social distancing and stay-at-home guidelines
2. Early in the spread of COVID-19 in the U.S., the pharmaceutical supply chain saw surge ordering, especially in the acute care and retail settings due to increased patient volume, payers allowing early script refills and longer script durations, and health systems' execution of business continuity plans.
3. As demand spiked and manufacturing hubs like China and India experienced the effects of a global pandemic, manufacturers began protecting and allocating inventory to pharmaceutical wholesalers to sustain the supply chain on a long-term basis.
4. Travel bans across the globe are contributing to decreased capacity for air freight carriers. This primarily impacts product and supplies coming to the U.S. from overseas, but also impacts deliveries outside the continental U.S.
5. Supply chain players continue to implement business continuity plans to protect the essential workers that support the healthcare supply chain, including manufacturing sites, packaging facilities, distribution centers and couriers, among others. The supply chain is supported by hundreds of thousands of human resources facing their own health and wellness concerns.
6. Emerging experimental treatments for COVID-19 continue to be evaluated for efficacy to combat the severity of COVID-19. At the same, concerns are escalating about the ability to maintain treatment for those with chronic conditions treated with these therapies on an ongoing basis.

Inventory & Allocation Questions:

Q: New! Is AmerisourceBergen distributing COVID-19 test kits?

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A: Since the outbreak of the current crisis, AmerisourceBergen has been working diligently to source antibody (serology) COVID-19 test kits for our customers. Antibody serology tests detect the specific antibodies that could indicate if a patient has developed an immune response to COVID-19. The FDA has issued Emergency Use Authorization (EUA) for some serology tests, however, others are being marketed without EUA or other FDA approval.

Unfortunately, the quality, efficacy and accuracy of currently marketed test kits varies greatly, and the ability to source serology test kits with an EUA has proven challenging for a multitude of factors outside of AmerisourceBergen's control. Most importantly, at the current time, AmerisourceBergen does not have confidence in the quality of serology test kits that have been offered to us.

As a result, we've made the decision not to distribute COVID-19 serology tests for our customer base at this time, and instead AmerisourceBergen's near-term efforts will focus on continuously monitoring the market for reliable test offerings, helping prepare and educate our customers and staying up-to-date on our customers' needs. We will continue to consider and prepare for market entry pending clearer FDA guidance on EUA approval and availability of reputable and reliable tests to ensure that every product sourced and distributed by AmerisourceBergen is in line with the standards of care that we and our customers expect.

Q: **New! On May 1, the FDA is issued Emergency Use Authorization (EUA) for Gilead Sciences' remdesivir for use to combat COVID-19. Will AmerisourceBergen distribute remdesivir?**

A: On May 1, 2020, the FDA granted an Emergency Use Authorization (EUA) for Gilead's remdesivir for the treatment of COVID-19. Gilead has been working closely with the U.S. government on preparations to donate and distribute remdesivir across the country to treat critical COVID-19 patients, and will work with AmerisourceBergen as the exclusive distributor for the donated remdesivir.

Given the severity of illness of patients appropriate for remdesivir treatment and the limited availability of drug supply, hospitals with intensive care units and other hospitals that the U.S. government deems most in need will receive priority in the distribution of donated remdesivir. The U.S. government will coordinate the distribution of remdesivir to hospitals in regions most heavily impacted by COVID-19. Gilead and AmerisourceBergen are not deciding which hospitals will receive remdesivir.

If you are a hospital identified by the U.S. government as a recipient for donated remdesivir, you will be proactively contacted by an AmerisourceBergen representative. Retail and specialty pharmacies are not eligible to receive donated remdesivir.

At this time, we are unable to provide additional information about whether or not your hospital will receive donated remdesivir.

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- For questions about the distribution of remdesivir, call the national remdesivir donation inquiry line at 877-987-4987.
- For information on clinical trials that are testing the use of remdesivir in COVID-19, please visit www.clinicaltrials.gov.
- For additional medical information about remdesivir, please visit <https://www.askgileadmedical.com/remdesivir/> or call 1-866-MEDI-GSI (1-866-633-4474) Monday – Friday, 6am – 4pm PT.

We will update this message on [AmerisourceBergen's COVID-19 website](#) as additional information becomes available.

Q: Updated! What are the ongoing inventory challenges in the supply chain? For which products is demand exceeding the current supply?

A: Generally, some of the most constrained products are ventilator and intubation drugs, sedatives, any experimental COVID-19 treatment, antivirals, hydroxychloroquine, azithromycin, injectable narcotics, insulin and meter-dose inhalers. These products are being used to treat COVID-19 while patients who had been using these medications are also maintaining or preparing for quarantine by requesting [longer-term prescription refills](#). In order to ensure as many customers as possible have access to the products they need, AmerisourceBergen has placed additional products on allocation to protect inventory. AmerisourceBergen has made it a priority to keep in constant communication with manufacturers to buy in-demand inventory as quickly as possible, meet increased orders from customers and ensure supply chain stability for future patient needs.

Q: How can customers gain access to product from the Strategic National Stockpile (SNS)?

A: The [Strategic National Stockpile's](#) role is to supplement state and local supplies during public health emergencies. Many states have products stockpiled, as well. The supplies, medicines, and devices for life-saving care contained in the stockpile can be used as a short-term stopgap buffer when the immediate supply of adequate amounts of these materials may not be immediately available.

SNS requests will be channeled through the geographical area's Regional Emergency Coordinator: The plan is for requests to be made by the local facility treating the affected patient. Once a request for SNS medication is validated, state and local public health authority will coordinate sending/fulfillment of request to the requesting facility. Look for more information and contact information [here](#).

Any product AmerisourceBergen receives from the SNS is being directed to specific locations by FEMA and the White House, with AmerisourceBergen supporting

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distribution to those locations. To date, AmerisourceBergen has supported two large-scale shipments of hydroxychloroquine in accordance with direction from the SNS.

Q: Updated! How is AmerisourceBergen supporting acute care customers in COVID-19 hot zones?

A: As you know, we use fair share allocations to ensure all customers can access the treatments their patients need. As hot zones emerged across the country, we proactively increased allocation percentages for customers serviced in “hot zones” as indicated by Johns Hopkins, CDC and WHO data. This increased percentage applies to all products on allocation to allow those customers in hot zones to care for patients in critical condition. Likewise, we’re routing additional product to our distribution centers (DCs) servicing customers in hot zones, and track cases daily to ensure our logic is up-to-date. Our sourcing teams are working with manufacturers on a daily basis to add inventory for COVID-19 supportive care and other essential products.

For more detail, read [this article](#) on how allocations work.

Q: Have any manufacturers given AmerisourceBergen notice that customers should request direct dropship for their items?

A: **Genentech (Actemra):** AmerisourceBergen and Genentech collaborated on a specific process for customers to procure Actemra via dropship. To request Actemra dropship if your AmerisourceBergen distribution center is out of stock on Genentech Actemra, customers should reach out to AmerisourceBergen Customer CARE directly. Customer CARE will request a dropship on your behalf. Direct delivery orders will be submitted by our Customer CARE team, meaning Genentech will ship directly to the customer and AmerisourceBergen will facilitate invoicing.

Q: Why is there sometimes a difference between what manufacturers communicate about their inventory levels versus what product is available from AmerisourceBergen?

A: Inventory levels for both the manufacturer and AmerisourceBergen are rapidly changing and even trade reps for manufacturers may not be communicating the most up-to-date information—inventory changes on an hourly basis. We are working with manufacturers to increase in-demand inventory as quickly as possible to meet the increased needs of patients in response to COVID-19.

In some cases, there is not enough finished product in the supply chain to meet demand, and we are seeing many manufacturers hold AmerisourceBergen to historical purchasing amounts to protect the long-term stability of the supply chain—meaning they will ship AmerisourceBergen only enough product to meet the demand from purchases in January and February, as this is what they had forecasted for production.

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This means that even as AmerisourceBergen is now placing larger orders that reflect the increased demand from our customers and their patients, we sometimes only receive a percentage (anywhere between 30% and 100%) of that order from manufacturers. While that order may in fact meet 100% of what the manufacturer supplied in January and February, it does not fulfill the larger purchase orders being placed by AmerisourceBergen. Each supplier is approaching their allocation to AmerisourceBergen differently. While many manufacturers are increasing finished goods in the supply chain, this process takes time.

Q: Do manufacturers and wholesalers have the same definition of a shortage?

A: Not always. In most cases, manufacturers do not qualify their supply as “in shortage” unless available inventory falls below *historical* demand (in this case – supply levels from January and February), which is often how they determine how much product they can supply to AmerisourceBergen on an ongoing basis. Alternatively, AmerisourceBergen defines a shortage as any time when there is not enough supply to meet true, current patient demand. In other words – we consider the product to be constrained or in shortage if you do not have the product you need to meet current patient needs.

Q: Why has it been hard to get meter dose inhalers (MDIs), insulin and diabetic supplies?

Demand for insulin and meter dose inhalers increased dramatically from late February through March for a number of reasons and we saw surge ordering from customers across our network. As of late April, we are starting to see the demand for these products normalize and are hearing fewer supply challenges from our manufacturers and our downstream customers.

- **For MDIs:** Many acute care settings switched from nebulizers to MDI to accommodate increased COVID-19 patients. In addition, patients who typically use MDIs for asthma or other conditions are getting additional fills to ensure they can maintain their own health during lockdowns and shelter in place mandates. Overall, it is very challenging for suppliers to keep up with this increased demand.
- **Insulin and diabetic supplies:** We are hearing from acute care customers that demand for insulin is spiking not only to accommodate the treatment of COVID-19 patients, but also because diabetic patients are stockpiling insulin to treat their condition on an ongoing basis through lockdowns and social distancing guidelines.

Q: Is AmerisourceBergen stocking short-dated products to increase supply to meet customer needs?

A: Yes, AmerisourceBergen did a review of the “morgue” of short-dated products in our distribution centers as well as our supply of minimally damaged products to re-enter any

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viable product back into the supply chain. We are quickly setting up alternate item numbers for short-dated products. We are also working with manufacturers to address short-dated products as an opportunity to increase inventory on products in high-demand.

Q: Updated! Will the API restrictions and lockdown in India will cause supply disruptions?

A: India's stay-at-home guidance was extended through May 3 and could potentially be extended through mid- to late May, but restrictions have started to ease in regions with zero or few known cases. While pharmaceutical manufacturers are exempt from the standards of the lockdown in India, we continue to hear from the manufacturers that they face challenges in staffing, mobility, air cargo and absenteeism in their India-based manufacturing facilities. Manufacturers continue to mitigate risk and enact business continuity plans to support production, but logistical challenges continue with production management, air freight, and clearance through customs.

Many U.S.-based manufacturers with plants in India still have inventory in the supply chain, so we don't expect immediate disruption. Most generic manufacturers have several months of finished goods available in the U.S., and brand manufacturers have little dependency on India for production. However, we are still seeing many brand, generic and OTC manufacturers hold AmerisourceBergen to historical purchasing amounts—meaning they will ship us product only that meets the demand from purchases in January and February, as this is what they had forecasted for their production.

Q: Does AmerisourceBergen have inventory of N95 masks?

A: AmerisourceBergen is working with suppliers to source n95 masks as production begins to ramp up overseas and domestically. At this time, we have begun to receive product into our distribution centers. We expect to have very limited inventory but will continue to stock as possible and on an ongoing basis. To be clear, we will sell any PPE acquired at a fair price as acquired by our vendors—as always, our pricing is reflective of our own acquisition costs. In general, while AmerisourceBergen does stock some PPE, we are largely pharmaceutical focused. Our distribution centers are not designed to support large, bulky PPE items, so we will continue to focus our efforts on stocking N95 masks.

Q: How is AmerisourceBergen managing allocations?

A: We will continue to rely on our "fair share" allocation program, which creates safeguards on products in high demand to ensure stable availability. In recent weeks, we've also proactively increased allocation percentages for customers serviced in "hot zones" of COVID-19 infections as indicated by Johns Hopkins, CDC and WHO data.

Allocations have been put in place to manage increased demand on products such as:

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- Inhalers and nebulizers (respiratory meds)
- Sedation and pain relief, products used during intubation
- Antivirals
- Antibiotics
- Antipyretics
- IV fluids (ringers, NS, D5W)
- Essential medicine lists
- Cough/cold
- Insulin and diabetic supplies

Regardless of an item's allocations status, customers are still subject to order monitoring programs as required by law for controlled substances.

Q: If allocations are driven by “fair share,” why are some facilities seeing 0 (zero) allocation available?

A: Allocation quantities could appear as 0 for multiple reasons:

- If a customer has no purchase history of the specific product (see next FAQ);
- If a customer has already utilized/purchased their full allocation; or
- If your servicing distribution center is out of inventory.

Q: How are you accounting for the allocations for sites that do not have a historical purchase of an item but now are seeing ventilated patients and need the sedative products?

A: Where inventory is available, AmerisourceBergen will allow customers to purchase limited amounts of product for which they have no purchase history. Many items have a minimal allowed quantity regardless of customers history. If you are using a product with no purchase history in high demand, please call Customer CARE to discuss a one-time allocation override, which will help you build purchase history for your future allocation.

Q: How often do allocation quantities update? Are they updated weekly?

A: While allocation settings are reviewed daily based on market intelligence, customer allocation amounts reset weekly, on Saturday. In some cases, allocations reset on a monthly basis. Right now, only OTC items are managed with a monthly allocation.

Distributors' ordering systems assign allocation code(s) to specific products. These codes commonly signify the reason an item is on allocation. For example:

- Market shortage items (marked with “ALO” in ordering platforms and described as “Allocated by Manufacturer” on invoices)

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- Items being managed by AmerisourceBergen's allocation policy "ABC Allocation" - (marked with "RES" in ABC Order and "Allocated by ABC" in the item description in ABC PassPort)

Right now, many products related to COVID-19 have been moved to the "Market Shortage" allocation in AmerisourceBergen's ordering platforms. As a result, we are now also looking at additional factors like hot zones for a prevalence of COVID-19 cases and the number of ICU beds at a facility in that hot zone where product needs are truly emergent and may not be adequately deduced based on historical demand.

Q: Are items on allocation available for secondary AmerisourceBergen customers (customers for whom AmerisourceBergen is not their primary wholesaler)?

A: No, items on allocation are reserved for primary AmerisourceBergen customers. By giving only primary customers access to allocated inventory, we are doing our best to fulfill our commitments to the customers who rely primarily on AmerisourceBergen for their pharmaceutical needs.

Q: What happens if the government moves to take greater control of the pharmaceutical supply chain?

A: President Trump signed an executive order giving the government the ability to redirect resources and manufacturing entities, particularly around personal protective equipment and ventilators. We are confident in the strength of the commercial supply chain and how well we and our competitors understand pharmaceutical distribution, as well as our relationships with our manufacturer partners and their processes. Through our partnership with Healthcare Ready and other entities, we feel we have the right relationships with these government entities to ensure that we can all get our fair share of what we need to ensure stability of the supply chain.

Q: Does AmerisourceBergen sell inventory to other wholesalers?

A: The vast majority of AmerisourceBergen customers are primary sites of care like hospitals, physicians and pharmacies. AmerisourceBergen has a very small number of customers that are designated as "wholesalers," but most of those wholesalers are co-ops owned by the pharmacies to whom they distribute products. We closely monitor purchasing behavior to ensure wholesaler customers are not irresponsibly ordering product for resale. Most allocated products are not available for purchase by those wholesalers, as most do not have a primary distribution relationship with AmerisourceBergen.

Regulatory Questions:

Q: Updated! Is AmerisourceBergen helping to report and respond to grey market activity? (e.g. unethical product resale, fake test kits, fake testing sites, etc.)

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A: Yes. AmerisourceBergen has a team dedicated to investigations, including grey and black market activity. We encourage you to send evidence of grey market activity to your AmerisourceBergen representative, who can escalate to our internal Global Watch Center. Primarily, we work with the Office of the Inspector General in the U.S. Department of Health and Human (HHS-OIG) Services to report, address, and mitigate grey market activity. Please note that you may not hear an update on grey market activity after it has been submitted, as it often escalates to a formal investigation.

Q: Is AmerisourceBergen's controlled substance order monitoring program going to account for increased controlled substances demand based on increased patient volumes?

A: AmerisourceBergen's order monitoring program (OMP) was designed with the flexibility to address unforeseen healthcare market occurrences, and we are confident in our ability to assess each order to respond to COVID-19 appropriately. We are also working closely with DEA, healthcare associations, and manufacturers to ensure suppliers and regulators understand our customers' current needs. Any order held for review by our OMP will be reviewed quickly (daily) and we will reach out directly to our customers if we need more information about the reason for any flagged order. **If an order is flagged for review by our OMP and subsequently released for fulfillment, it is still subject to your allocation.**

We continue to recommend that customers not attempt to "stock up" on controlled substances, as such activity may actually increase the risk that the orders will be rejected and not be filled--and lead to unnecessary shortages. In particular, we are seeing an increased demand for injectable narcotics in the acute care setting.

Q: The DEA communicated that they'll temporarily accept DEA Form 222s via email and fax during the pandemic. Will AmerisourceBergen honor this process?

A: The DEA has recently released guidance that DEA Form 222s for controlled substance orders can be emailed or faxed however we strongly encourage all customers to use the CSOS platform for electronic orders. Wherever possible, customers should continue to use CSOS ordering for everyday CII orders. The new DEA guidance is intended to accommodate an increase in emergency orders to meet emergent patient needs.

As outlined in the guidance from the DEA, "upon the expiration of the state of emergency, purchasers will be required to send suppliers hard copies of executed DEA Form 222 that were transmitted to the supplier via email or fax during the public health emergency." To ensure continuous compliance, we ask that customers continue to use CSOS or hard-copy Form 222s whenever possible, but we will accommodate faxed or emailed forms for true patient emergencies.

Q: **New! [From the DEA] The government's current recommendations around social distancing have implications for distributors. For example, some of the regular**

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due diligence functions carried out by the distributor to fulfill "Know Your Customer" expectations may have to be delayed, such as pharmacy site visits. How can distributors practice social distancing while remaining in compliance with the CSA and DEA regulations?

A: [From the DEA] Distributors still remain responsible for maintaining effective controls against diversion by "knowing their customer" and conducting the appropriate due diligence. During the COVID-19 public health emergency declared by the Secretary, due diligence and site inspections via teleconferencing may be acceptable alternatives when the ability to conduct on-site inspections is determined to be impractical by the registrant. Distributors are also still able to obtain and review their customers' utilization reports and other documents as part of their due diligence.

Q: New! [From the DEA] Distributors are seeing changes in controlled substances ordering behavior by their customers, particularly by DEA-registered pharmacies and hospitals. What is DEA's guidance for distributors when faced with the issue of changes in customer ordering activity involving controlled substances tied to COVID-19?

A: [From the DEA] DEA is aware from its engagement with its federal partners and other controlled substances stakeholders that various DEA registrants may be changing their ordering patterns in order to fulfill their customers' and/or patients' needs. Distributors (and other registrants that distribute controlled substances) continue to have an obligation to maintain a system to detect suspicious orders of controlled substances and to inform their local DEA field office when suspicious orders are discovered. At the same time, recent significant increases in demand for certain controlled substances by pharmacies and hospitals may be attributable to legitimate needs arising out of the COVID-19 pandemic. When in doubt about the legitimacy of an order, distributors should carefully assess the circumstances surrounding the order, including the nature of the practice engaged in by the registrant placing the order, as well as the types, quantities and dosage forms of the controlled substances being ordered. Distributors should inquire with their customers to obtain an explanation for the deviation from their normal ordering patterns and document the changes in ordering behavior and the possible reasons for it in its due diligence file for each customer.

Sanitation & Cleanliness Questions:

Q: Updated! Is AmerisourceBergen screening distribution center associates' health and temperature?

A: To ensure continuity of operations of essential functions during the ongoing COVID-19 pandemic, the Centers for Disease Control and Prevention (CDC) has issued interim guidance that advises critical infrastructure employees may be permitted to continue

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work following potential exposure to COVID-19, provided they remain asymptomatic and **daily health pre-screening precautions** are implemented to protect them and the community. Temperature testing is one part of our daily health screening procedures.

Testing is conducted by a certified healthcare professional and is accompanied by a cell phone-based associate, visitor and vendor health screening questionnaire to ensure the utmost safety and privacy for our associates. The health screening questionnaire and temperature testing has already been implemented at 30+ sites, will be implemented at all AmerisourceBergen U.S. sites by early May.

Q: Given updated CDC guidance that non-healthcare workers should wear a cloth face covering to slow the spread of COVID-19, are distribution center workers wearing masks?

A: We are encouraging our distribution center associates to wear a mask while working in our facilities. Whenever possible, we'll provide surgical masks or other non-N95 masks to our associates. We are also sourcing cloth and tools for our associates to make their own masks, as even surgical masks are in short supply.

Q: How has AmerisourceBergen enhanced cleaning at the distribution centers?

A: Our distribution centers are taking extra measures for disinfectant procedures given the volume of human health products that are processed through each facility. Distribution centers are using BruTab 6s or Shockwave (powerful EPA-approved disinfectants) through electrostatic sprayers and standard spray canisters for 2-3 additional cleanings per day. We are also regularly bringing in third-party cleaning organizations for deep cleaning procedures during off hours.

Q: How does AmerisourceBergen clean totes?

A: Distribution centers across AmerisourceBergen's network use third-party companies and associates to clean totes on an ongoing basis. Wherever possible, distribution centers are using a mister to spray a bleach or disinfectant solution onto tote exteriors to disinfect. We are also piloting additional tote-disinfectant measures, where totes pass through a UV light to disinfect surfaces before being inducted into the distribution centers.

Because human contact is essential to our operations, we encourage customers to use enhanced cleaning processes when accepting orders as they see fit to protect their staff and their facility.

Q: How is AmerisourceBergen ensuring the safety of courier drivers—both to protect AmerisourceBergen's distribution centers as well as customers receiving orders?

A: As our trusted partners, we are implementing several new policies with our third-party couriers to ensure our mutual safety. We've clearly communicated our expectations for

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courier partners and drivers, and have vendor/visitor guidance for our distribution centers to continue to screen visitors. This includes:

- Drivers must report immediately to their management team and their local AmerisourceBergen contact if they or a family member has a confirmed case of COVID-19, has been exposed to a confirmed case of COVID-19 or is being tested for COVID-19.
- Drivers that regularly have access to an AmerisourceBergen facility will be granted access but will be required to sanitize their hands upon entry.
- All driver vehicles should be cleaned and sanitized on a regular basis to limit the spread of COVID-19.
- Drivers should follow any enhanced protocol outlined by delivery locations.
- Regarding masks and gloves for drivers: Couriers are not requiring their drivers to wear a mask and gloves to complete deliveries. Health agencies like the CDC and WHO agree that non-healthcare professionals do not need to wear a surgical mask. Additionally, as you know, face masks are experiencing an extreme market shortage. If a customer is requiring drivers to wear a mask, they will have to provide the mask for the driver's usage.

Business Continuity Questions:

Q: Do AmerisourceBergen's call centers (Customer CARE and Customer Platform Support) have business continuity plans?

A: Yes. In normal times of business, we have redundancy across multiple customer support locations to ensure continuity of service in the event of a disruption. Since March, most of AmerisourceBergen's service teams have been working remotely as we continue to do everything possible to protect our associates' safety and ensure your continuity of service.

Q: How do drivers and distribution center workers get to work if a county/city/state is on curfew or lockdown?

A: We are providing distribution center associates with a verified letter that designates them as an Authorized Responder. If stopped by authorities, they can provide this letter based on AmerisourceBergen's role in healthcare delivery. We also work with national healthcare agencies and the government to ensure access as a critical part of the healthcare infrastructure. This is something we have done in the past during natural disasters and other emergency situations.

Q: How is AmerisourceBergen preparing for staffing challenges in distribution centers (DC) due to childcare, illness, quarantine, etc.?

A: We are proactively implementing several measures in our distribution centers to ensure staffing continuity:

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Updated 5.4.2020: This document is intended to answer questions from AmerisourceBergen customers about what we are doing to respond to the global COVID-19 pandemic. With additional questions, please reach out to your AmerisourceBergen representative.

- Providing our associates with support from our HR department to help manage through childcare disruptions and other needs.
- Providing our associates with financial support, given the critical nature of their role
- Increasing staffing with temporary workers and additional onsite support.
- Implementing a cross-distribution center backup program, where a DC can “borrow” staff from another distribution center in the region.

Q: Is AmerisourceBergen experiencing a shortage of drivers?

A: No, we are not experiencing a shortage of courier drivers, and are in close contact with our partners to ensure continuity.

In the Event of a Confirmed COVID-19 Case

Q: What will happen if there is a confirmed case of COVID-19 at an AmerisourceBergen distribution center?

A: We have implemented a policy across our distribution network for how to handle any confirmed COVID-19 cases within our associate population, including associate guidance, deep sanitation guidance and mitigation steps.

In the event of any unanticipated closure, AmerisourceBergen would enact our business continuity plans and backup DC support. AmerisourceBergen has 27 wholesale distribution centers across the United States, 25 of which can support one another in case of emergency. We can transfer orders from one servicing DC to another and have done this in the past due to weather or other business continuity issues.

For example, on April 6, after multiple confirmed cases at our Newburgh, NY distribution center (in the NY hot zone), we made the decision to temporarily close and deeply clean our facility. This decision, while not an easy one, was made to protect our associates and give them the opportunity to monitor their own health so they can return to work healthy and ready to continue to support your business. During this temporary closure, customers normally serviced by the Newburgh, NY distribution center are being serviced by an alternative distribution center. In fact, in total, five of our DCs play a role in the business continuity plan we enacted to support the temporary Newburgh closure.

Q: What should I do if someone at my pharmacy or my facility has a confirmed case of COVID-19?

A: We understand some of our customers have staff that have been infected with COVID-19. If you have a confirmed case at your pharmacy location, AmerisourceBergen will continue to deliver to your location under the following conditions:

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- As long as your facility is open for business (not closed or quarantined by the Department of Health) and that the delivery does not violate guidance from the Department of Health;
- As long as your facility has implemented an enhanced cleaning protocol and taken measures to ensure safety of other team members;
- And as long as you are following the above guidelines for limited personal contact to ensure the safety of your delivery driver.

Please reach out to your AmerisourceBergen representative if you feel anyone at your facility with a confirmed COVID-19 diagnosis came into close contact with your courier driver.

Q: Will you inform me if an AmerisourceBergen associate or courier driver tests positive for COVID-19 after interacting with staff at my facility?

A: Per CDC guidelines, we will inform a customer if an AmerisourceBergen associate or third-party courier partner has had close and personal contact with any other person—including staff at your facility.

Because COVID-19 is so widespread, we will not notify our customers in every single instance of a confirmed COVID-19 case in one of our facilities. Rest assured, however, that we'll reach out to you proactively if 1) that associate came into close contact with anyone at your facility, or 2) if it impacts you operationally in any way.

Delivery Questions:

Q: Are we requiring customers to sign for deliveries and electronic devices at deliveries?

AmerisourceBergen will not require customers to sign the proof of delivery document or electronic delivery tool that is typically signed upon receipt of a delivery to limit personal interactions. Instead, drivers must print the customer's first and last name and date of delivery on the proof of delivery document. We will notify you when this policy has been lifted.

If you find that your local courier partner is not following these guidelines, please escalate to your AmerisourceBergen representative so we can coordinate with our courier teams.

Customers should continue to sign Material Return Authorization forms (MRAs) and provide to their driver.

Q: Can my pharmacy establish a "drop spot" in one location for the driver to drop off totes?

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A: Yes, couriers can accommodate a central drop spot at your pharmacy to ensure the safety of your staff, the facility and that of the driver. If you'd like to change your delivery location, please contact Customer CARE who will work with our Transportation team.