

June 29, 2020

The Honorable Alex Azar  
Secretary  
Department of Health and Human Services  
200 Independence Avenue SW  
Washington, DC 20201

*RE: Request to Extend the Public Health Emergency for Another 90 Days*

Dear Secretary Azar:

The Endocrine Society appreciates the actions that the administration, through the Department of Health and Human Services (HHS) and the Centers for Medicare & Medicaid Services (CMS), has taken to expand access to services to address the COVID-19 public health emergency (PHE). We urge you to extend the PHE declaration before it expires on July 25 to protect vulnerable patients with endocrine disorders, physicians, and first responders.

The Society is the world's largest professional organization of endocrinologists, representing the interests of over 18,000 physicians and scientists engaged in the treatment and research of endocrine disorders, including diabetes, cancer, obesity, osteoporosis, thyroid disease, and infertility. Our members continue to provide care to vulnerable patients with these complex, chronic conditions that place them at higher risk should they contract COVID-19.

We strongly recommend HHS extend the PHE for at least another 90 days. COVID-19 has affected areas of the country unevenly. While we are witnessing significant improvements in many states, others are now experiencing dramatic increases in COVID-19 infections and hospitalizations demonstrating the need for the flexibilities the PHE affords to remain in place. The Society recognizes that these flexibilities extend beyond those that apply to the delivery of care and are also critical to the research being done to develop both effective treatments and a vaccine for COVID-19.

Our institutions and hospitals continue to face challenges associated with treating patients with COVID-19. We also do not expect that office visits will return to pre-pandemic levels this calendar year as social distancing requirements and continued concerns about COVID-19 will limit the number of patients seeking face-to-face care. Patients with chronic endocrine-related conditions, like diabetes, remain at high risk and for the foreseeable future these individuals should limit their exposure, which they can do as long as they can access care via telehealth as the PHE flexibilities has allowed.



While we recognize that the administration is considering policies that can remain in place after the PHE, we are concerned that many of the changes would require a legislative fix or for CMS to make the changes through notice-and-comment rulemaking. Both of these options are appropriate for longer-term solutions, but would create unnecessary barriers to care during the COVID-19 pandemic and would be a regulatory burden to providers. The flexibilities available during the PHE have been a critical component to making telehealth viable for practices. As physician practices are already facing difficult financial situations, this would recognize the work required to deliver telehealth services, help to support the economic recovery of these practices, and ensure that they are able to provide services to patients in the safest possible method.

We appreciate the administration's continued efforts to protect the health of providers and patients during the PHE while ensuring that appropriate patient care remains accessible. Thank you for your consideration of this request, and please reach out to Mila Becker at [mbecker@endocrine.org](mailto:mbecker@endocrine.org) if we can provide additional information.

Sincerely,

Gary D. Hammer, MD, PhD  
President  
Endocrine Society