June 4, 2020

Alex M. Azar II
Secretary
Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Re: Equitable Relief Funds for Obstetrician-Gynecologists and the Long-term Stability of Women’s Health Practices

Dear Secretary Azar:

On behalf of the American College of Obstetricians and Gynecologists (ACOG), the Nation’s leading women’s health organization, representing over 60,000 physicians and partners dedicated to advancing women’s health, thank you for your work to date in response to COVID-19, a global pandemic and serious public health threat. Obstetrics and gynecology practices across the nation are facing serious financial losses that threaten ongoing access to essential women’s health services. Despite this significant need, several weeks have passed since Congress allocated federal relief funds to support struggling physician practices, and many women’s health practices have been left behind. The Department of Health and Human Services (HHS) must immediately direct relief funds to obstetrician-gynecologists who have been excluded from receiving funds to date. To ensure the long-term sustainability of women’s health practices, HHS should also send targeted allocations of relief funds to all obstetrics and gynecology practices.

We recognize and appreciate the measures HHS has taken to support physician practices during this public health emergency, including the disbursement of funds provided by the Coronavirus Aid, Relief, and Economic Security (CARES) Act. To date, eligibility for relief funds has relied solely on Medicare fee-for-service claims, and therefore many obstetrician-gynecologists have been excluded. Many women’s health practices do not regularly see patients that are covered by Medicare-fee-for-service and therefore have not been eligible to receive relief funds. However, obstetrician-gynecologists care for a large proportion of patients covered by Medicaid and private insurance. Despite the fact that Medicaid and private insurance are primary sources of health care coverage for women across the lifespan, HHS has not provided relief to health care practitioners that care for patients enrolled in these health plans. This inequitable method of distributing funds is not reflective of congressional intent. Congress appropriated the Provider Relief Fund to support all practitioners that are facing financial strain due to COVID-19. Accordingly, obstetrics and gynecology practices report that they may be forced to permanently close in the coming weeks due to significant financial strain. The widespread shuttering of women’s health practices would result in many women being unable to access the care they need.
To prevent the erosion of our nation’s safety net and women’s health infrastructure, **ACOG strongly urges HHS to immediately distribute relief funds to women’s health practices that have been excluded from relief fund distributions to date.** This can be easily achieved by opening up the General Distribution portal to all TINS that have been ineligible for relief funds thus far, as we previously recommended in the enclosed letter address to Secretary Azar and dated May 13, 2020. **HHS must take immediate action – obstetrics and gynecology practices cannot wait any longer for this vital relief.**

While an immediate disbursement is critical to keeping practices open in the short-term, HHS must also take action to ensure ongoing access to essential women’s health services in the months and years to come. Obstetrician-gynecologists provide specialized care to women, including maternity care services, gynecologic surgery, management of chronic conditions, and treatment for gynecologic cancer. Women’s health practitioners also provide preventive services, such as cervical and breast cancer screenings, and serve as the entry point into the health care system for many women. These functions are essential to our public health and it is vital that obstetrics and gynecology practices have the resources they need to keep serving their patients. However, after months of cancelling non-urgent services, most women’s health practices will be unable to make up the revenue they have lost due to COVID-19.

While obstetrician-gynecologists are on the front lines of responding to the pandemic, they report that their practices have suffered devasting financial losses, with patient volumes decreasing by up to 75 percent. Liability insurance costs, rent and utility payments, and other operating costs continued to pile up while well-woman and other non-urgent visits were cancelled. Practices that have begun resuming non-urgent services report that they are facing increased operating costs due to purchasing personal protective equipment for their patients and staff. At the same time, physicians are reducing the number of available appointments to ensure social distancing guidelines can be maintained, and many patients are concerned about seeking in-person care as the pandemic continues. Obstetrician-gynecologists will be forced to evaluate the long-term financial viability of their practices, and without additional financial relief, many may have to close their doors or sell their practice to a large health system.

**ACOG recommends that HHS provide all obstetrics and gynecology practices with targeted allocations to offset some of this lost revenue and stabilize women’s health practices.** This investment in women’s health care is particularly urgent as our nation faces a persistent and unacceptable maternal mortality crisis in addition to the COVID-19 pandemic. The Centers for Disease Control and Prevention report that the national rates of maternal mortality and severe morbidity have been steadily increasing for several years. Our collective efforts to improve maternal health outcomes and eliminate preventable maternal mortality should not be lost amid the COVID-19 emergency; rather, more attention to women’s unique needs is imperative at this time. To this end, ACOG urges HHS to provide additional financial support to struggling obstetric and gynecologic practices using targeted allocations of federal relief funds.

We stand ready to work with you to ensure both the equitable distribution of relief funds and continued access to women’s health care during the COVID-19 pandemic and beyond. Should you have any questions, please contact Meredith Yinger, Health Policy Analyst, at myinger@acog.org.
Sincerely,

Maureen G. Phipps, MD, MPH, FACOG
Chief Executive Officer

Cc: Seema Verma, Administrator, Centers for Medicare and Medicaid Services

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