



April 16, 2020

VIA EMAIL

Governor Doug Ducey
Executive Tower
1700 West Washington Street
Phoenix, AZ 85007

Re: Current Modeling of Arizona Patient Surge and Request to Reevaluate Executive Orders Relating to Hospital Capacity and Limitations on Elective Procedures (Executive Orders 2020-10 and 2020-16).

Dear Governor Ducey:

Thank you for your leadership on Arizona's COVID-19 response. The public health interventions that you and your team have implemented and the changes that Arizonan's have made in their personal and professional lives to prevent the spread of COVID-19 in Arizona have proven effective. The surveillance data and predictive models clearly demonstrate that Arizona's social distancing measures are working to "flatten the curve" and are saving lives.

The success of those interventions means that the environment is quite different than it was in mid-March and the data and predictive models suggest we now have adequate capacity to meet peak COVID-19 demand. While it is critical that none of us become over-optimistic and we remain ever vigilant, we believe this current success provides you an opportunity to revisit some earlier policy decisions. The adjustments we recommend in this letter would ensure Arizona has the hospital surge capacity to meet peak demand for patients with COVID-19 while providing needed surgeries and procedures for Arizona patients.

Evidence continues to mount that the public's social distancing measures are slowing the spread of new COVID-19 infections in our state. The Institute for Health Metrics and Evaluation ([IHME](#)) model now predicts hospitalizations will peak on April 30 with peak hospital and ICU bed estimates with a wide safety margin—even without the 50% bed capacity increase directed by Executive Order 2020-16.

Under Executive Order 2020-16, Arizona hospitals have already implemented plans to increase hospital capacity by 25%. The Order further directs hospitals to implement an additional 25%

increase by April 24. Given the success of Arizona's control measures, and the predictive models suggesting Arizona already has adequate capacity to meet peak demand with a wide safety margin, we ask you to consider deeming the directive to be met if hospital capacity is sustained at the 25% increase.

Your leadership in setting the stage for slowing the spread of COVID-19, the resulting safety margin for hospital capacity, and our hospital and health system's contingency planning for conserving and also acquiring additional personal protective equipment also provides an opportunity to relax the limitations on elective procedures under Executive Order 2020-10. Specifically, we believe that adjusting Executive Order 2020-10 to allow hospitals more discretion regarding elective procedures would allow us to meet the growing patient demand for crucial medical procedures.¹

We are sincerely grateful to you and your administration for implementing important interventions. Your administration's interventions have "flattened the curve" and are saving lives of Arizonans. Without those interventions, our health system would have been overwhelmed with tragic consequences.

By implementing our suggested changes to Executive Orders 2020-10 and 2020-16, we believe that you can improve public health by providing more patient access to needed procedures and continue to ensure that Arizona has the hospital surge capacity to meet peak demand for patients with COVID-19.

Thank you for your leadership during these unprecedented times.

Sincerely,



Ann-Marie Alameddin
President and Chief Executive Officer

cc. Dr. Cara M. Christ, Director, Arizona Department of Health Services
Sandra Watson, Arizona Commerce Authority President

¹ We request consideration that the Executive Order 2020-10 align with current CMS COVID-related guidance "[CMS Adult Elective Surgery and Procedures Recommendations](#)" that allows hospitals to weigh various relevant considerations such as: (1) current and projected COVID-19 cases in the facility and region; (2) PPE supply; (3) staffing availability; (4) bed availability, especially ICU; (5) ventilator capacity; (6) health and age of the patient; and (6) urgency of procedures.