



Connected **for Life**

Dear Employer:

The American Diabetes Association, in its position as a global authority on diabetes and author of the *Standards of Care for Diabetes*, writes to share information that may be useful to you, as an employer of individuals with diabetes, during the COVID-19 pandemic. This letter has been and will continue to be updated as the body of medical literature concerning diabetes and COVID-19 grows.

Medical Information Concerning Diabetes and COVID-19

People with diabetes face a higher chance of experiencing serious illness and death if they contract COVID-19. Recent CDC data indicates that as many as 40% of the patients who have died from complications of COVID-19 had diabetes. As only 10% of the U.S. population lives with diabetes, this disproportionate figure is an indication of the grave risk that people with diabetes face, should they contract COVID-19.

The CDC has stated that risk for severe outcomes related to COVID-19 increase with age. But people with diabetes of all ages are at higher risk for serious outcomes.

While people with diabetes face a higher risk of serious outcomes if they do contract the virus, there is no evidence to suggest that people with diabetes are more likely to contract COVID-19 than any other person.

In general, people with diabetes are more likely to experience severe symptoms and complications when infected with any virus. Viral infections can increase inflammation, or internal swelling, in people with diabetes. This is also caused by above-target blood sugars, and both can contribute to more severe complications. When people with diabetes experience fluctuating blood sugars, they are generally at risk for a number of diabetes-related complications. Having heart disease or other complications in addition to diabetes can worsen the chance of getting seriously ill from COVID-19, like other viral infections, because the body's ability to fight off infection is compromised.



Connected **for Life**

When sick with a viral infection, people with diabetes also face an increased risk of DKA (diabetic ketoacidosis), commonly experienced by people with type 1 diabetes. DKA can make it challenging to manage fluid intake and electrolyte levels—which is important in managing sepsis. Sepsis and septic shock are some of the more serious complications that some people with COVID-19 have experienced.

To date, there is insufficient evidence to conclude that COVID-19 carries a difference in risk based on type of diabetes alone.

Information Pertaining to the Employment Setting

The Americans with Disabilities Act (ADA) is a federal law that prohibits discrimination against qualified individuals with disabilities.¹ Individuals who have diabetes should easily be found to have a disability under the ADA because they are substantially limited in the major life activity of endocrine function.² The ADA requires that employers provide reasonable accommodations to qualifying employees with disabilities.³ The ADA continues to apply during this time of pandemic.⁴

Because people with diabetes face a greater risk of getting seriously ill from COVID-19, employees may require reasonable accommodations. The COVID-19 pandemic may mean that employees who have been working without any accommodations will require them for the first time, or it may mean that employees with reasonable accommodations in place may need new or different accommodations.

The most common reasonable accommodations for people with diabetes during the COVID-19 pandemic include teleworking, temporary reassignment to meet physical distancing recommendations (either of certain job functions or to another vacant position), temporary leave, and modifications to the work environment that reduce the risk of virus transmission such as installing plexiglass barriers. There may be other

¹ EEOC, *Questions & Answers about Diabetes in the Workplace and the Americans with Disabilities Act (ADA)* <https://www.eeoc.gov/laws/types/diabetes.cfm>.

² *Id.* (citing 29 C.F.R. §1630.2(j)(3)(iii)).

³ *Id.*

⁴ EEOC, *What You Should Know About the ADA, the Rehabilitation Act, and COVID-19*

https://www.eeoc.gov/eeoc/newsroom/wysk/wysk_ada_rehabilitaion_act_coronavirus.cfm



Connected **for Life**

accommodations appropriate for people with diabetes that are related to the pandemic and are tailored to the particular job. Employers are obligated to participate in the interactive process to work with employees to determine whether a reasonable accommodation exists.

While people with diabetes face more serious risks if they contract COVID-19, in many cases, reasonable accommodations exist which allow people with diabetes to continue working.

Additionally, Congress has passed new laws in response to the pandemic. The Families First Coronavirus Response Act contains two laws that expand paid leave options for employees.⁵ The first is the Emergency Paid Sick Leave Act (EPSLA) and the second is the Emergency Family Medical Leave Expansion Act (EFMLEA). The EPSLA provides paid sick leave for workers in several circumstances, including for all people with diabetes who are unable to telework. The CDC has advised people with diabetes to stay home, causing them to be unable to work even though their employers have work for them. 29 CFR § 826.10. We encourage you to consult with your legal counsel to determine whether you are a covered employer under these new laws.

Conclusion

Thank you for considering this information as you work to provide reasonable accommodations to your employees during a difficult time for all. For more on these topics, the ADA has additional resources here:

<https://www.diabetes.org/diabetes/treatment-care/planning-sick-days/coronavirus>; here: https://care.diabetesjournals.org/content/34/Supplement_1/S82; and here <https://www.diabetes.org/resources/know-your-rights/discrimination/employment-discrimination/for-employers>.

Last Revised 7/31/2020

⁵ See DOL, Families First Coronavirus Response Act: Questions and Answers <https://www.dol.gov/agencies/whd/pandemic/ffcra-questions>