



## Department of Health

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Commissioner

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Executive Deputy Commissioner

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Dear Colleagues:

A new year usually gets rung in with affirmations and plans for the twelve months ahead. Although New York State is beginning this new year with a preexisting adversary, I am optimistic about what lies ahead for public health. I am excited about New York State's historic push to vaccinate millions against COVID-19 in record time. As we get there, week by week and month by month, we can begin the physical, emotional and economic recovery from this pandemic.

And we will end up in a much better place; with greater and more equitable protections for every New Yorker. This month, I want to discuss Department of Health priorities in 2021 and what they mean for healthcare delivery. I will also give an update on the virtual Commissioner's Grand Rounds scheduled for March.

First, I want to update you on COVID-19 vaccinations in New York State. More than 7 million New Yorkers are currently eligible to receive the vaccine, but our large population of eligible individuals still far exceeds the supply coming from the federal government. As of January 29th, New York State's 3,000 healthcare distribution sites had administered 95% of our 1,387,840 received first doses (or 1,316,032 doses). We had administered 78% of first and second doses combined (or 1,560,676 doses out of 2,005,955 received). We were very happy to receive news that the federal government had increased the weekly supply of vaccines by 16%.

**Maintaining Equity and Fairness in Vaccine Distribution.** The [CDC has determined](#) that Hispanic, non-Hispanic Black, and non-Hispanic American Indian or Alaska Native people in the United States have died from COVID-19 at higher rates than non-Hispanic whites. COVID-19 has underscored the prevalence of health disparities and the lack of fair access across racial and ethnic equities to healthcare. This year, New York proposes to implement a statewide COVID-19 vaccination program, covering nearly 20 million residents at no cost and ensuring that vulnerable and underserved communities in all regions have fair and equitable access to vaccines.

**Telehealth.** As I discussed in my [June letter](#), millions of Americans have turned to telehealth during the pandemic, including many who would otherwise struggle to access healthcare. Telehealth increases both the access to coordinated, patient-centered care and the quality of care, particularly in rural and medically-underserved areas. It also establishes technology-enabled healthcare delivery as a basis for future innovations, such as those in artificial intelligence, and electronic medical record integration. To build on this positive transformation in New York, the State is proposing

telehealth reforms that will lower costs, enhance care for vulnerable populations, and increase access to telehealth services.

Through comprehensive regulatory reform, we will expand covered telehealth providers and reimbursement for patient monitoring, eliminate obsolete location requirements, integrate telehealth into the Statewide Health Information Network for New York (SHIN-NY), and require telehealth in commercial insurance and the expansion of access to mental health and addiction services. We will also increase training and education opportunities, establish a pilot telehealth program for vulnerable populations, require insurers to offer e-Triage and Virtual Emergency Department, and allow insurers to satisfy contractual care management requirements with telehealth solutions.

**Help for Mental Illness and Substance Abuse.** This pandemic has exacerbated serious challenges posed by mental illness and substance abuse. The Department has determined that we can better address these critical needs—both during the pandemic and after—by coordinating and aligning services. That is why in 2021 New York State will authorize the Department of Health, the Office of Addiction Services and Supports, and the Office of Mental Health to establish a single, integrated license for outpatient mental health, substance use, and physical health services. In practical terms, that means New Yorkers can receive any and all of the services they need in one location.

**Fast-Tracking Innovative Protections against Infectious Diseases.** Another State priority is a collaboration between Empire State Development and private biomedical experts to establish a New York State Infectious Diseases Resiliency Commercialization Fund. The Department will advise on this important effort. New York State is fortunate to have thriving life sciences, biotechnology, and biodefense industries with research and development investments totaling \$40 million. With Department guidance, this new initiative will identify and help fast-track promising innovations that protect against emerging infectious diseases and other public health threats.

**Building a Public Health Corps.** In 2021, the State will work to create a New York Public Health Corps, members of which will receive an intensive public health training developed by Cornell University. These fellows will range from public health, nursing, medical, and pharmaceutical students, from undergraduate to doctoral level, as well as retired medical professionals and volunteer first responders. We will build on this Public Health Corps model, recruiting and training public health professionals to serve the State in any future crisis. The new Public Health Corps will enable New York to build a public health emergency response capacity that lasts beyond COVID-19 by preparing a new generation to respond to the next crisis that may compromise our health and safety.

**Commissioner's Grand Rounds.** Cancer survivors often have unique care needs because of the continuing effects of the disease and treatment on their health,

well-being, and social relationships. It is important for providers to understand cancer treatment's long-term impact and patients' ongoing care needs in terms of physical and mental health. The Department's next Commissioner's Medical Grand Rounds will discuss the importance of identifying key physical and psycho-social effects of cancer treatment and approaches for coordinating survivorship care. Please join me for "Caring for Patients Living with and Beyond Cancer", on March 5th, from 1:00 p.m. to 3:00 p.m., virtually, via Webcast. Presenters include Dr. Charles Kamen from the University of Rochester Medical Center, Dr. Larissa Nekhlyudov from Harvard Medical School, and Dr. Mary Reid from Roswell Park Comprehensive Cancer Center. Register to participate in this live webcast [here](#).

As we begin the second year of this pandemic, I thank all of you for your resilient and unwavering commitment to maintaining the health and wellbeing of your patients. The entire world remains under much physical and emotional stress as we begin the race to vaccinate billions. Within this difficult environment, New York State providers stand out for their continued optimism, energy and initiative. Thank you again for helping us navigate this crisis to reach better days (and much better health) ahead.

Sincerely,

A handwritten signature in black ink that reads "Howard Zucker M.D." in a cursive style.

Howard A. Zucker, M.D., J.D.  
Commissioner of Health