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**NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE**
Dave A. Chokshi, MD, MSc
Commissioner

Testimony

of

**Dave A. Chokshi, MD, MSc
Commissioner
New York City Department of Health and Mental Hygiene**

Before the

New York City Council

Committees on Health and Mental Health

on

2022 Fiscal Year Preliminary Budget

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Introduction

Good afternoon, Chair Levine, Chair Louis, and members of the Committees on Health, and Mental Health, Disabilities, and Addiction. I am Dr. Dave Chokshi, Commissioner of the New York City Department of Health and Mental Hygiene. I am joined today by Dr. Torian Easterling, First Deputy Commissioner and Chief Equity Officer and Sami Jarrah, Deputy Commissioner for Finance. Thank you for the opportunity to testify on the Department's preliminary budget for fiscal year 2022.

Impact of COVID-19

First and foremost, allow me to take a few moments to acknowledge the devastating impact that COVID-19 has had on New York City. To date, over 770,000 New Yorkers have had COVID-19, and sadly we have lost over 30,000 New Yorkers to the virus. Beyond the numbers, the pandemic has had a profound impact on every facet of our lives, and our City has faced immeasurable loss – both of life and livelihood.

But the burden of COVID-19 has not been felt equally across the city: we have seen disparate outcomes in both illness and mortality in Black and Latino New Yorkers when compared to rates experienced by White New Yorkers. These inequities are a result of longstanding structural racism and underinvestment in Black, Latino, immigrant, and low-income communities, and mirror the disparities we see in other health outcomes across these communities as well. The Health Department has centered an equity lens in all of our work for many years, but this public health emergency has demonstrated that we have significantly more work to do in order to undo decades of racism, bias, and discriminatory policies that led to these inequities – and to prevent the propagation of these unacceptable outcomes in the future.

Health Department's response to COVID-19

Before I dive into the work we've done in the past year, my leadership team is here with me today and collectively, we represent the approximately 6,000 Health Department employees who have been working on this response for over a year. I want to take this opportunity to publicly thank the whole staff for everything they've done in service of their fellow New Yorkers this year. It has been a challenging time to work in public health and their work often goes unrecognized. Thank you all. It is a true privilege to serve with you.

I am incredibly proud of the Health Department's response to the challenges of the pandemic over the past year and am honored to have joined this institution as Commissioner in August. The Department's workforce is made up of world-renowned public health experts; flexible and tireless policy, operations, and communications professionals; and all-around passionate and empathetic public servants. Over 4,500 of our staff have deployed since our Incident Command Structure was activated on January 30th, 2020, and they have worked around the clock since. Thus far, over two million staff hours have been spent on COVID-19. Allow me to repeat: over two million staff hours. This has included the work of our disease surveillance systems, the Public Health Laboratory – originally the only lab in the City running COVID-19 tests – our data experts who have been at the heart of our commitment to transparency, and the external affairs team working indefatigably to communicate the ever-changing information about COVID-19 to over 8 million New Yorkers. From our finance, legal and policy teams, to provider and community liaisons, this response has been a true all-hands-on-deck effort.

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I am further grateful for the partnership the Health Department has maintained with our sister agencies throughout this response, but in particular want to acknowledge our work with NYC Health + Hospitals as they created the NYC Test & Trace Corps (or T2), the country's largest public testing and tracing operation. Our staff has brought their expertise in both testing and contact tracing to T2 and continue to work in lockstep with them in the Department of Education Situation Room, through investigations of cases and clusters in congregate settings, and in our community outreach work, including the funding of 41 CBOs who have done incredible outreach on both testing and COVID-19 vaccines, among many other efforts every day.

Quickly, I want to touch on data. From the early days of the pandemic, the Department realized the value of accurate and comprehensive data on the virus and its impact on NYC. We have developed the most rigorous and transparent COVID-19 public reporting system of any city in the country to make sure that New Yorkers have the most up to date information – and have used this to guide the City's response. We are committed to this same transparency for vaccination data, and are now reporting rates by race, ethnicity, age, and zip code on our website.

Turning to vaccination, the City's COVID-19 Vaccine For All effort is now well underway, and over 2.8M doses have been administered in NYC. The vaccines are safe, effective, and life-saving, and we encourage all eligible New Yorkers to get vaccinated, whether it be with the Johnson & Johnson, Moderna, or Pfizer vaccines. The Health Department has taken an active role in the City's Vaccine Command Center (VCC), led by Deputy Mayor for Health and Human Services Melanie Hartzog, where our team offers expertise to the VCC on distribution plans, outreach and communications, and strategy for increasing both access to, and confidence in, the vaccine. In order to do this, we need additional supply from the federal government and more flexibility from the State within eligibility categories and in order to meet communities where they are. The City will continue disseminating information about the vaccines and how to access them, including through vaccinefinder.nyc.gov and the call center at 877-VAX-4-NYC. As always, our focus is equity – and we are working hand-in-hand with the City's Taskforce on Racial Inclusion and Equity (the Taskforce) and our sister agencies to address the disparities we see in vaccine uptake thus far.

To address these disparities, the Mayor announced an equity strategy that includes locating City vaccine sites in communities that need it most – with a focus on the 33 Taskforce neighborhoods – and we are working with CBOs, senior centers, faith-based organizations, and others to set aside appointments for residents of these neighborhoods at our Vaccine Hubs. We are also working in those communities to address vaccine confidence – offering what we call “Community Conversations,” training community leaders to be vaccine navigators, and getting information out through town halls and boots-on-the-ground outreach in multiple languages.

Overview of FY21 activities

While the Department has redirected significant resources and staff time to pandemic response, much of our critical public health work continues, and in many ways is more important than ever. We have continued to conduct Early Intervention services, issue permits and offer technical assistance for child care providers and food service establishments, distribute Health Bucks for nutritious food, address elevated blood lead levels in children, operate our Sexual Health Clinics, and issue birth and death certificates. We have dramatically changed how we do our work – prioritizing the health and safety of

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both our staff and the New Yorkers we serve has meant transitioning to digital platforms and reimagining how to conduct analog, in-person operations.

One area I want to highlight is the serious toll the pandemic has taken on New Yorkers' mental health; many of us have faced immense grief, trauma, and stress throughout this time. Similar to physical health disparities, the mental health disparities of COVID-19 are driven by underlying health and social inequities, including those caused by structural racism. Recognizing this, the Health Department has implemented strategies over the past year to support both the immediate and long-term behavioral health needs of New Yorkers, and we continue to prioritize the most burdened communities. Much of this work has been done in partnership with the Mayor's Office of ThriveNYC and our sister agencies throughout City government. To reach neighborhoods hardest hit by COVID-19 and address the pandemic's impact on mental health, we have prioritized community education reaching over 14,000 New Yorkers with virtual presentations that address COVID-19's impact on mental health; health disparities; and the effects of trauma, grief, and anxiety.

We also created and adjusted our substance use support programs: we launched a new methadone delivery system to make medication available to patients who are isolating or in quarantine – making over 4,000 deliveries thus far – and made naloxone available for free at 15 pharmacies in neighborhoods with a high burden of fatal overdose and in many congregate care settings.

With funding we received just prior to the onset of the pandemic, we also expanded key programs that provide or connect New Yorkers to treatment and support. This included Health Engagement Assessment Teams (HEAT), which strive to promote equity and eliminate the overrepresentation of people experiencing behavioral health challenges in the criminal justice system. During the pandemic, HEAT conducted outreach to people in communities who may be experiencing homelessness or behavioral health needs to distribute PPE, naloxone, and sexual health kits – and to provide light counseling and connections to treatment and services. In partnership with the Mayor's Office of ThriveNYC, we also added four Intensive Mobile Treatment (IMT) Teams, increasing our capacity to provide mental health and substance misuse treatment and supports to an additional 108 people with serious behavioral health concerns and complex life situations. And, serving New Yorkers 24/7, NYC Well has met unprecedented demand for crisis counseling and emotional support, information, and referrals to ongoing mental health and substance use services since the onset of the pandemic.

Budget

City

I will now discuss the Preliminary Budget. The City of New York is facing extraordinarily difficult financial circumstances but continues to invest in lifesaving public health work. The Department currently has approximately 6,000 employees and an operating budget of \$1.68 billion for fiscal year 2022, of which \$836 million is City Tax Levy. The remainder is federal, State, and private dollars. In the preliminary budget, the Department received \$10.7 million in City Tax Levy for new activities in FY22, and took \$33.7 million in savings for FY21 and FY22.

Regarding new funding, for fiscal year 2022 we received \$7.8 million in City Tax Levy to allow the Department to meet the growing demand over the last several years for naloxone kits. This funding will also support additional syringe litter pick up and outreach services, enhanced buprenorphine outreach

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to the homeless, and naloxone vending machines. Additionally, \$2.9 million in funding was added to hire nurses for new community schools, which will fund 30 new nurses.

The Health Department also saw \$29.7 million of savings in this budget for FY21 and \$4 million in FY22. I want to assure you that regardless of the current budget situation, our work continues, and the Administration is supporting us in this mission.

State

Turning to the State budget, I will start by expressing deep concern with the Governor's proposed FY22 budget, as it will lead to significant funding reductions for the Health Department that will jeopardize multiple areas of our vital work.

The Governor's budget proposes approximately \$50 million in annual cuts to critical public health funding for New York City. Let me be clear, now – in the middle of a deadly pandemic – is the worst time to cut public health funding. This is a once-in-a-lifetime moment and reducing resources for public health will worsen the health disparities that led to devastating COVID-19 illness and death rates in Black and Latino communities.

The most significant of these cuts is the proposed reduction to the Article 6 reimbursement rate, which alone would result in a cut of \$35 million for essential public health programs at the Health Department. Article 6 provides partial reimbursement for City Tax Levy funding to support local public health activities and services; the Governor is proposing to cut this reimbursement rate from 20% to 10%. This is on top of a \$59 million cut to the same funding source two years ago – and is only applied to New York City. If this cut is enacted in the State budget, we will see devastating impacts to Early Intervention, Nurse Family Partnership, our Sexual Health Clinics, tuberculosis detection and treatment, and other vital public health programs. I'd like to thank the State Senate and Assembly for rejecting this devastating cut to public health in their budget proposals; the State has an obligation to support public health in New York City and the Governor's proposed cut must not be enacted.

In addition to Article 6, the Governor has proposed a 5% cut impacting mental health, substance use, and intellectual/developmental disability providers. This will result in fewer licensed treatment, housing and supportive services for publicly insured, uninsured and underinsured populations, including those experiencing serious mental health or substance use disorders. It would also lead to financial instability for the programs that provide these vital services, further impacting all the people they serve. This potential lack of resources for these programs would then increase the burden on the hospital system, shelter system, and Federally Qualified Health Centers.

New York State has a responsibility to the health of New York City residents – and if we didn't realize it before COVID-19, the pandemic has shown us how our health is interconnected. Now is the time for massive investment in public health, not a time to cut basic funding. Let me state clearly and unequivocally: our economic recovery hinges on public health. Therefore, we continue to advocate for the restoration of this funding and appreciate the Council's support in this effort.

Federal

On the federal level, we are grateful to President Biden and his administration for their engagement with New York City on the COVID-19 response thus far, as well as improved vaccination strategies, particularly increasing vaccine supply. The Executive Orders signed by the President over his first few

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weeks in office in response to the pandemic are aligned with our public health values and priorities, and we look forward to working with this new Administration as we continue to respond to, and then recover from, this public health crisis.

We are pleased to see the passage of the American Rescue Plan, which will infuse billions of dollars of relief into New York City. However, we remain concerned with the overall level of public health funding from the federal government, which has been systematically cut over the last decade. We are asking for additional funding for the Public Health Emergency Preparedness (PHEP) and Hospital Preparedness Program (HPP) cooperative agreements, which, respectively, help health departments strengthen their ability to respond to disease threats, and build health care system preparedness and response. As with all federal funding, it is essential that resources are appropriated and allocated directly to local health departments. Furthermore, we need funding flexibility, as localities across the country have vastly different public health needs and we, not the state government, are in the best position to determine how to deploy resources in New York City.

Conclusion

This has been an incredibly painful year for all of us and has been an unprecedented time to work in public health, especially here in New York City. You all have heard me say this before, but I will reiterate – I am fiercely committed to science, equity, and compassion in all that we do at the Health Department. To that end, I'd like to once again acknowledge the Department's leadership team and all of our Health Department employees who are similarly committed to these core values, and who continue to serve New Yorkers day in and out. I would also like to thank the Council and the Chairs for your ongoing partnership and support throughout the past year, and beyond. Thank you, and I am happy to answer your questions.