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Welcome

Welcome to the second issue of the New York City Department of Health and Mental Hygiene's (NYC Health Department) Chief Medical Officer (CMO) quarterly newsletter, *The Bridge*!

We hope this newsletter keeps you updated, informed, and connected with the NYC Health Department. Your input and collaboration are vital to our mission of protecting and promoting the health of all New Yorkers. We would love to hear from you — please share your thoughts and feedback on what else you would like to see in this newsletter, or inquire about how to connect with the Health Department by emailing us at chiefmedicalofficer@health.nyc.gov.

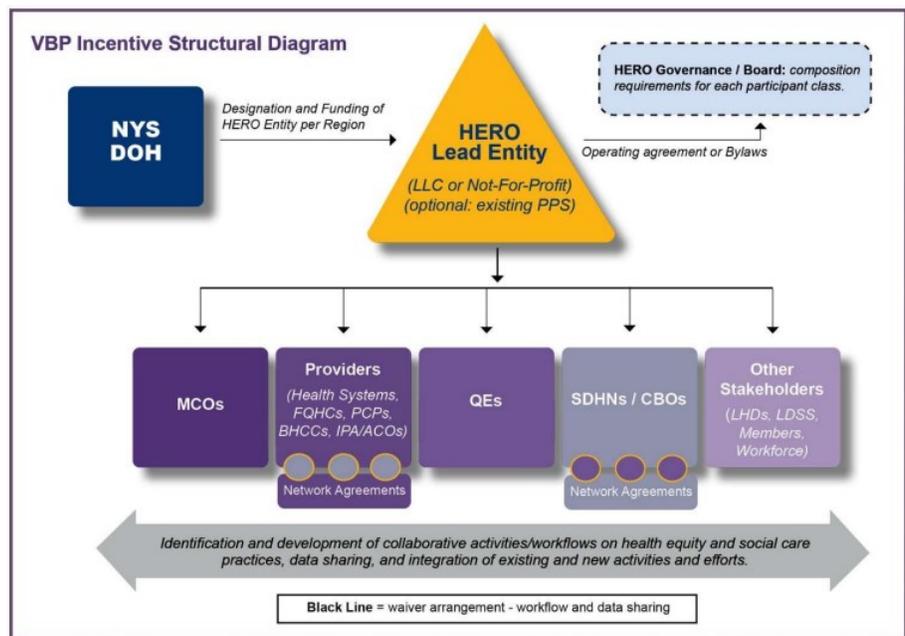
Thank you for your partnership and commitment to a more just and equitable New York City!

Message from the CMO

The New York City Health Department is encouraged to see the state moving forward with a new 1115 waiver program which will provide critical funding for, and stimulation of, innovative, collaborative, and promising models to better serve marginalized New Yorkers in the Medicaid system. The current 1115 waiver amendment demonstrates New York State’s commitment to embed equity policies, practices, and accountability into the healthcare delivery system by addressing social care needs (SCN) as part of comprehensive health care. This is a recognition that the health care delivery system must expand its purview and scope of action to include addressing and attending to the social determinants of health – factors that have as much, if not more, impact on health than clinical care. Historically, the health care delivery system has been structured to primarily address disease and illness, leaving little resources and attention to prevention. Unaddressed SCNs has led to stark and unacceptable inequities among marginalized New Yorkers in all facets of health.

Part of the 1115 waiver funding would be allocated to creating advanced value-based payment (VBP) arrangements to support the mid- to long-term transformation and integration of the healthcare and social care delivery system. The VBP funds would encourage the evolution of the Managed Care Organization (MCO)-network agreements into arrangements that incorporate health equity design and reward providers’ improvements in traditional health outcome measures, among other key features, while having a positive impact on financial sustainability. The aim would be to incentivize and appropriately reward health plans and providers for caring more holistically for vulnerable populations.

	Key
HERO	Health Equity Regional Organization
PPS	Performing Provider System
MCO	Managed Care Organizations
FQHC	Federally Qualified Health Center
PCP	Primary Care Provider
BHCC	Behavioral Health Care Collaboratives
IPA	Independent Provider Associations
ACO	Accountable Care Organizations
QE	Qualified Entities
SDHN	Social Determinants of Health Networks
CBO	Community Based Organizations
LHD	Local Health Department
LDSS	Local Department of Social Services



Source: https://www.health.ny.gov/health_care/medicaid/redesign/2022/docs/2022-04_1115_waiver_draft_amendment.pdf

The alignment of the health and social care systems in New York State is long-term endeavor and the COVID-19 pandemic has only intensified the importance of a comprehensive, whole-person approach to health. The New York City Department of Health and Mental Hygiene plans to serve as an active partner in the implementation of the 1115 waiver amendment and supports the focus on health equity.

CMO Strategic Plan Updates

Read below to learn more about each domain of the CMO Strategic Plan.

Domain 1: Bridging Public Health and Health Care

Post-Acute Sequelae of SARS-CoV-2 (PASC) - Long COVID

Long COVID is impacting the lives of many New Yorkers through a multitude of physical and psychological symptoms several weeks post COVID-19 infection. The NYC Health Department is committed to raising awareness of long COVID as an emerging public health issue. Local NYC survey data and emerging research reveals that up to 30% of people infected with COVID-19 may develop some form of long COVID. An ICD-10 code (U09.9) has been approved for reporting long COVID. To address the importance of this issue the CMO and the NYC Health Department Commissioner have issued a “Dear Colleague” letter with several tools for providers diagnosing and treating patients experiencing long COVID. The COVID-19 pandemic has disproportionately impacted communities of color, it is crucial that we learn from this and promote a patient centered, fair and equitable approach to long COVID. Providers can keep out to date with the latest long COVID work across New York city through the “Long COVID and the Road to Recovery” symposium that was co-hosted by the NYC DOHM and NYC Health + Hospitals earlier this month. Further resources can be found in the NY State Department of Health “Consortium for Long COVID”.

To read the “Dear Colleague” letter, visit <https://on.nyc.gov/392oLcq>.

To access the “Long COVID and the Road to Recovery” symposium recording and to keep up to date with the latest information on long COVID in NYC: <https://bit.ly/3nCPLTE>

For more resources on long COVID, visit <https://on.ny.gov/3nrsqnW>.

Domain 2: Advancing the NYC Health Department’s Commitment to Anti-racism in Public Health Practice and Policy

Healthcare Segregation

Racial segregation is an unacceptable reality in New York City’s health care system, among other systems. Studies (see links below) have previously demonstrated the depth of segregation by race/ethnicity and payer type, through which communities of color, people enrolled in Medicaid, and uninsured people are cared for in systems apart from white and privately insured city residents. The disproportionate impact of COVID-19 on low-income communities of color has laid bare the consequences of these inequities. As we look toward recovery from the pandemic and continue the work of building a more resilient and anti-racist health system, dismantling this deeply embedded racial segregation is a top priority. An interdisciplinary team at DOHMH is working on multiple fronts to:

- quantify the scope of payer-based segregation and identify the health systems that are providing – and those that are failing to provide – their fair share of care to low-income New Yorkers;
- document the experience of community members who bear the biggest burden of segregated systems of care; and
- identify policy mechanisms that can help dismantle segregated and inequitable systems of care, including by more equitably distributing funding to health systems that provide a disproportionate share of care to low-income New Yorkers.

Through rigorous data analysis, policy development, and stakeholder engagement, DOHMH is committed to taking the necessary steps to combat health care segregation in our city.

Links:

<https://pubmed.ncbi.nlm.nih.gov/28152644>

<http://www.centernyc.org/urban-matters-2/2020/9/15/hospital-care-in-black-and-white-how-systemic-racism-persists-saved>

Domain 3: Building Institutional Accountability ***CMO Birth Equity Initiative***

On June 21st, the CMO Birth Equity Initiative was launched in Brooklyn. Building off the agency's decades of work within the Divisions of Family and Child Health, Center for Health Equity and Community Wellness, and Epidemiology, the initiative uses a collective impact approach to convene stakeholders around an identified goal around reducing birth inequities. The initiative is first being implemented in Brooklyn based on it having the largest number of births. The CMO Birth Equity Initiative incorporates three main components:

- Multi-disciplinary working group. Convene diverse stakeholders to identify a collective impact goal around reducing birth inequities that is achievable within 4 years. The inaugural meeting included community members, doulas, hospital leaders, impacted persons, insurers as well as representatives from the American College of Obstetricians and Gynecologists and the NYC Department of Homeless Services. Our next meeting will be on August 29th.
- Advance a Medicaid maternal home payment bundle model. Establish a payer- and provider-agnostic Maternal Home payment bundle modeled on H+H's maternal home model.
- Support primary care integration with Birth Equity. Identify a specific scope of primary care services for pre-conception people who are in marginalized groups and establish connections and coordination with other primary care programming.

A comprehensive, cross-agency, CMO-convened initiative bridging public health and health care to improve birth equity across NYC with a focus on Brooklyn. We take a data-driven, anti-racist, and place-based approach to this work. The NYC Health Department will leverage our convening, technical assistance, policy, and data analytics capacity, together with our Neighborhood Health infrastructure and our health plan, provider, and F/CBO relationships. We are delighted to be convening brilliant, passionate, and purposeful minds towards continued reduction of birth inequities in the borough of Brooklyn and the city of New York.

CMO Spotlight: Public Health Corp Website

The Public Health Corps (PHC) is a city-wide effort to expand the public health workforce by partnering with community groups and community health workers to eliminate COVID-19 inequities through outreach and education. The PHC has launched its new webpage on the NYC Health Department's website, an exciting development for the PHC team and its partners. This website will increase the PHC's visibility as a NYC Health Department program, and it will serve as a hub for updates and resources for community partners. Check out the webpage for more information about the PHC, including the challenges and successes of its work outlined in the 2021 impact report COVID-19 Health Equity Through Collective Action.

- To see PHC website, visit <https://on.nyc.gov/3udML3H>.
- To read the COVID-19 Health Equity Through Collective Action report, visit <https://on.nyc.gov/3a5pY35>.

DOHMH Spotlight: Postpartum Health Study

The NYC Health Department is conducting in-depth interviews with people living in specific neighborhoods of the Bronx, Harlem, and Brooklyn who gave birth between March 2020 and March 2022. The study aims to understand the experiences of people who gave birth during the COVID-19 pandemic related to clinical care, breastfeeding, emotional wellbeing, and other factors related to their overall postpartum experience. Interviews will be conducted in English and Spanish depending on the participant's preference. All participants will receive a \$50 gift card.

Interested patients should contact Valentina Giraldo at 718-508-0625 or vgiraldo1@health.nyc.gov to determine if they are eligible to participate and to schedule an interview.

Upcoming Events

Fifth Coalition to End Racism in Clinical Algorithms (CERCA) Meeting

On Friday, July 29th, at 1:00 PM to 2:30 PM, CERCA will hold its fifth meeting. If you are interested in learning more about CERCA or joining the coalition, please email Adriana Joseph at ajoseph4@health.nyc.gov.

Quarterly CMO Convening

On Friday, September 9th, at 12:00 PM to 1:30 PM, the next CMO Quarterly convening will be held. If you are interested in joining the meeting, please email Haniya Abbasi at habbasi@health.nyc.gov

Health Department New Releases, Updates, and Announcements

Monkeypox Health Advisory

As of July 13th, 336 people have tested positive for orthopoxvirus. Vaccine supply remains low. We will be making more appointments available as we receive additional vaccine supply from the federal government.

The NYC Health Department's Chelsea Sexual Health Clinic is currently administering the JYNNEOSTM vaccine to those who may have been exposed to monkeypox. Vaccine eligibility includes:

- People who meet all of the following criteria can be vaccinated in NYC:
 - Are age 18 or older; and
 - Are a gay, bisexual, or other man who has sex with men and/or are transgender, gender non-conforming, or gender non-binary;
 - Have had multiple or anonymous sex partners in the last 14 days.

For more information on monkeypox, visit <https://on.nyc.gov/39ZHupl>.



COVID-19 Vaccine for Children Under 5

Children 6 months to 4 years old are now eligible to receive a COVID-19 vaccine. Both the Moderna and Pfizer vaccines have been authorized by the federal government for this age group.

To help families find a vaccine location, visit vaccinefinder.nyc.gov.

New England Journal of Medicine Catalyst — Payers and Public Health: A Novel Collaboration to Support COVID-19 Vaccination Uptake

We are excited to share this publication, authored by Dr. Morse and fellow colleagues, published in the August 2022 issue of NEJM Catalyst. This article describes NYCDOHMH's efforts to increase COVID-19 vaccine uptake through partnering with health plans to pay for vaccine counseling for unvaccinated people through the Vaccine Outreach and Counseling Program. This model was soon used by the U.S. Centers for Medicare & Medicaid Services and the New York State Department of Health as a guide for Medicaid programs to cover vaccine counseling.

Read more: <https://catalyst.nejm.org/doi/full/10.1056/CAT.22.0058>

CERCA Inaugural Report — Coming Soon!

The CMO team is finalizing the Coalition to End Racism in Clinical Algorithms (CERCA) Inaugural Report which is slated to be released in July. This report will describe the history of racism in clinical algorithms, the genesis of CERCA's, and methodology in facilitating system-wide changes in removing race from commonly used clinical algorithms. The report will also highlight achievements of CERCA members thus far. Finally, the report will outline CERCA next steps as we enter year 2 of the coalition. We look forward to sharing this report with you!

For more updates, follow [@nychealthy](https://twitter.com/nychealthy) and [@nychealthcmo](https://twitter.com/nychealthcmo) on Twitter.