The Bridge (Issue #12)

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Welcome to our Fall 2025 issue of The Bridge, keeping you updated, informed, and connected with the New York City (NYC) Department of Health and Mental Hygiene (Health Department) and the Office of the Chief Medical Officer (CMO).

Your input and collaboration are vital to our mission of protecting and promoting the health of all New Yorkers. Please let us know what you would like to see in future newsletters or find out how to connect with the NYC Health Department by emailing us at chiefmedicalofficer@health.nyc.gov

Message from the NYC Health Department's CMO

In September, we celebrated 220 years since the founding of the NYC Health Department. We're very proud to build on our long legacy of changing the course of human health and history every day.

Actions at the federal level, however, have made clear that the future of public health is uncertain. The United States Department of Health and Human Services (HHS) under Secretary Robert F. Kennedy Jr.'s leadership has fired all 17 members of the Centers for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP), which issues the nation's immunization guidelines; replaced these career experts with new appointees, including many who have publicly expressed anti-vaccine rhetoric; added new restrictions on COVID-19 vaccine approvals through the Food and Drug Administration; canceled hundreds of millions of dollars in federal research contracts aimed at developing new mRNA vaccines; and fired the director of the CDC, leading to federal health officials resigning in protest of this action and vaccine policy decisions.

Recent ACIP meetings further undermined confidence in the long-established importance and strong evidence base supporting vaccination. Thankfully, weeks before these meetings and ensuing confusion over their decisions, Governor Kathy Hochul issued an executive order to ensure that in New York State (NYS), everyone who wants a COVID-19 vaccine can get it.

The NYC Health Department, together with NYS, has issued COVID-19 immunization recommendations for the 2025-2026 respiratory virus season for children, pregnant people, and adults. **Most people in NYC should get a 2025-2026 COVID-19 vaccine.**

Providers are strongly encouraged to offer COVID-19 and other vaccines to patients.

- **COVID-19 vaccine products for the 2025-2026 season are now available for ordering, including through the Vaccines for Children (VFC) program.**
- COVID-19 vaccinations continue to be covered by Medicare, NYS Medicaid, and other health insurance plans.
- Standing orders for pharmacists and templates for others have been issued by NYS.

With ongoing health misinformation from the federal government, we have an immense responsibility not just to New Yorkers, but to the nation. **The NYC Health Department is a proud member of the Northeast Public Health Collaborative, a voluntary regional coalition of state health agencies and NYC.** The collaborative, which includes Connecticut, Maine, Massachusetts, New Jersey, NYS, Pennsylvania, and Rhode Island, is designed to share expertise, improve coordination, enhance capacity, strengthen regional readiness, and promote and protect evidence-based public health interventions. Interjurisdictional working groups are already underway to identify opportunities for collaboration and shared planning across multiple public health disciplines, including emergency preparedness and response, vaccine purchasing and vaccination recommendations, data collection and analysis, infectious disease, epidemiology, and laboratory capacity and services.

We are grateful to represent the NYC Health Department and to strengthen our partnerships with national, state, and local public health leaders who remain committed to science, data, and equity. As the oldest and largest health department in the country, we remain committed to fill the vacuum left by uncertain federal support for evidence-based public health.

With appreciation,

Michelle Morse, MD, MPH
Acting Health Commissioner
Chief Medical Officer
NYC Health Department

Toni Eyssallenne, MD, PhD
Deputy Chief Medical Officer
NYC Health Department

CMO Strategic Plan Updates

Domain I: Bridging Public Health and Health Care

Insuring Uninsured New Yorkers

More than 30 certified application counselors, trained and certified by the New York State of Health Marketplace, at the NYC Health Department provide health insurance enrollment services in multiple languages and regardless of immigration status. They offer enrollment services in person at 12 Health Department centers throughout NYC and over the phone. Insurance programs that are part of the Marketplace include Medicaid, the Essential Plan, and Child Health Plus, among others.

Counselors also support New Yorkers by

- Facilitating enrollment for the Aged, Blind, and Disabled program: This is a NYS-funded initiative that connects New Yorkers who are age 65 years and older as well as those who are living with disability or blindness to free or low-cost health insurance options.
- Helping consumers apply for the Supplemental Nutrition Assistance Program.
- Providing community referrals to other social service organizations and programs as needed, such as housing, transportation, supplemental security income, and Medicare products.
- Offering guidance on NYC care as an option for New Yorkers who do not qualify for health insurance.

See Health Insurance: Enrollment Counselors for more information on these services and to find a counselor. Additional resources can be found in the Health Insurance Action Kit

No-Cost Home Remediation Services for Children With Asthma

The NYC Health Department and its partners offer no-cost home environmental remediation services for children in NYC with asthma.

- **Doctors for Asthma Integrated Pest Management** (Doc AIM; formerly Medicaid Together) works with caregivers and pest control vendors to remediate mouse and cockroach issues in homes and reduce children's asthma symptoms.
- The **Healthy Neighborhoods Program** (HNP) accepts referrals from health care providers with the patient or caregiver's consent. The HNP will contact the patient or caregiver to schedule a free home inspection. If the HNP finds environmental asthma triggers or other home health hazards, they will work with the property owner to correct the problems.
- The **Bronx Integrated Pest Management** (IPM) program offers no-cost pest control for children diagnosed with asthma who live in homes in the Bronx with mice or cockroaches.
- The **Harlem Integrated Pest Management** (IPM) program offers no-cost pest control for children diagnosed with asthma who live in homes in Brooklyn, Manhattan, Queens, or Staten Island with mice or cockroaches.

For details on eligibility and requesting services, see No-Cost Home Environmental Remediation Services for Children With Asthma. For more information on environmental asthma triggers and how to reduce them in the home, visit nyc.gov/health/asthma.

Progress and Challenges in Eliminating Race-Adjusted Clinical Algorithms
In an article published in the *New England Journal of Medicine, "The Race-Correction Debates—Progress, Tensions, and Future Directions," Darshali A. Vyas, MD, Leo G. Eisenstein, MD, and David S. Jones, MD, PhD, describe efforts made to replace race-based algorithms with race-neutral alternatives since their last piece, "Hidden in Plain Sight: Reconsidering the Use of Race Correction in Clinical Algorithms," challenges that have arisen amid these efforts, and possible next steps. Dr. Einstein's and Dr. Vyas' expertise has advised the NYC Health Department's Coalition to End Racism in Clinical Algorithms (CERCA).*

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

Improved Maternal Health Outcomes

The Health Department's Citywide Doula Initiative (CDI) has led to **reduced rates of C-sections, pre-term births, and low birth weights among Black and Hispanic mothers and birthing people**, compared with the general population of births in NYC, according to an analysis of birth outcome data among CDI participants from March 2022 through June 2024 by auditors with the NYC comptroller's office. Along with improved maternal health outcomes, compared with citywide averages, there were **no pregnancy-associated deaths** reported among CDI clients.

The audit also found that the CDI program increased doula access overall. Prenatal visits, doula-attended births, and post-partum visits increased significantly, with more than 2,000 clients receiving services through the program. CDI participants expressed strong satisfaction with the program; 77% rated their pregnancy/birthing experience with a doula as good or excellent

Black non-Hispanic women and birthing people accounted for 17.7% of all live births in the city, but 39.7% of all pregnancy-associated deaths. Black and Hispanic women and birthing people made up over 3 out of 4 deaths, despite accounting for less than half of all live births across the 5 boroughs.

The CDI program was launched to address longstanding inequities, including socioeconomic barriers, structural racism, and bias in healthcare services, that drive high rates of maternal mortality and adverse birth outcomes in communities of color. Doula services have long been championed by reproductive justice advocates to narrow racial inequities. Doulas provide non-medical physical, emotional, and informational support to pregnant individuals and families before, during, and after childbirth. Throughout pregnancy, doulas also advocate for clients' health decisions and help them navigate the challenges of childbirth.

The audit also identified areas for improvement, including advancing doula-friendly hospital policies, expanding access in shelters, and increasing non-English speaking doula provider capacity. Doulas reported that some hospitals prevented them from providing comfort measures, such as assisting their clients in using the restroom (17% of respondents), supporting mobility out of bed (25%), and staying with their clients during delivery (13%). Nearly 50% of respondents said their clients living in shelters were difficult to access or inaccessible. While 6 of the 7 CDI vendors stated they could provide services in Spanish, less than half of the vendors could provide services in other languages.

For more information on the NYC Health Department's work to increase access to doula support across the city, see The State of Doula Care in NYC, 2025. For eligibility for and connections to no-cost doula services, visit the CDI site.

Domain 3: Building Institutional Accountability

Strengthening Tobacco Use Treatment at Safety-Net Clinics

Each year, approximately 12,000 NYC residents die from smoking-related causes, with communities of color, immigrants, and TRIE neighborhoods disproportionately impacted. To address these inequities, NYC REACH has partnered with New York University's NYC Treats Tobacco (NYCTT) team to **help health care organizations update their tobacco use treatment policies and implement evidence-based practices for screening, intervention, and referral.**

This initiative, supported by the NYS Bureau of Tobacco Control for the past decade, has grown significantly in scope. Over the last 2 and a half years, NYC REACH and NYCTT have collaborated with 24 health care organizations serving more than 500,000 people, including more than 15,800 who currently smoke.

Participating organizations have received targeted support, including:

- Updated clinical protocols aligned with best practices;
- Up to $5,000 in mini-grant funding;
- Free Nicotine Replacement Therapy (NRT) supplies;
- Enhanced electronic health record tools for streamlined screening, treatment, and reporting;
- Automated referrals to the NYS Smokers' Quitline;
- Support for maximizing reimbursement for tobacco counseling and treatment;
- Multilingual patient education materials; and
- Staff training in motivational interviewing, NRT prescribing, and vaping cessation.

This work is part of a broader commitment to advancing health equity by integrating robust tobacco treatment into primary care. **For more information about the program or to explore partnerships at your clinic, contact Mikayla Hyman at mhyman2@health.nyc.gov.**

Leaving Against Medical Advice

In an article published in Health Affairs, "Sickle Cell Disease Patients Disproportionately Leave Hospitals Against Medical Advice," Kenneth Rivlin, MD, PhD, Director of the Division of Pediatric Hematology and Oncology at Health + Hospitals / Jacobi Medical Center, and NYC Health Department staff researchers, Anna Zhilkova, MA, Jenai Jackson, MPH, CHES, and our Deputy CMO Toni Eyssallenne, MD, PhD, argue that the code, "Left against medical advice," (LAMA) should be considered a preventable system failure that signals unmet care needs.

The authors encouraged hospitals to routinely track and stratify LAMA rates by diagnosis and race, and national accrediting bodies to include LAMA rates in their evaluations of institutional equity. Additionally, they suggested the Centers for Medicare and Medicaid Services begin holding hospitals accountable when LAMA leads to a subsequent readmission.

The authors focused on LAMA among people with sickle cell disease (SCD). They found that adults hospitalized with SCD in NYC left against medical advice 14% of the time—**more than three times** the citywide average of 4.2%. Although SCD accounts for only 0.6% of all adult hospitalizations, it ranks 12th among all diagnoses for LAMA volume. The authors noted that hospitals with higher SCD volumes and comprehensive care programs consistently had lower LAMA rates, suggesting that experience, trust, and care design make a measurable difference.

Climate Change and Vectorborne Disease

Climate change is one of several factors that influence the complex interactions between arthropod vectors, their ecosystems, and the animals and people they bite. Thus, the impact of climate change on vectorborne disease is less straightforward than its impact on weather events, such as more frequent heat waves and intense storms.

The NYC Health Department uses vector surveillance to identify new and emerging vectors, and monitor existing vectors, including tracking population density, geographic range, and seasonal activity. The NYC Health Department also tests mosquitoes and ticks for a wide variety of pathogens, and applies pesticides to control mosquito populations, focusing on areas where surveillance has shown mosquito breeding sites or where mosquitoes pose a high risk of disease to humans.

West Nile Virus

Since West Nile Virus (WNV) surveillance in NYC began in 1999, the annual number of WNV-competent mosquitoes trapped and WNV-positive mosquito pools has consistently increased, likely driven by climate change. Shifting precipitation and temperature patterns contribute to increased mosquito reproduction rates and amplification of WNV in mosquitoes.

Most people infected with WNV do not get sick or are only mildly ill; the more severe and more rare manifestation called West Nile Neuroinvasive Disease (WNND), affects the central nervous system typically causing meningitis and encephalitis. The number of people with WNND has been increasing in recent years. From 2012 to 2021, there was an average of 16 WNND cases per year; this increased from 2022 to 2024, to an average 31 cases per year.

Tickborne Diseases

The number of New Yorkers with tickborne diseases, including Lyme disease, anaplasmosis, and babesiosis, has also been increasing over time. Most New Yorkers are infected while spending time outdoors in areas outside of NYC. However, a smaller number were infected in Staten Island and the northern Bronx, which are the only places in NYC where the blacklegged and other types of tick live.

Vectorborne Disease Prevention

To help prevent vectorborne disease, encourage people to

- **Wear long pants and long-sleeve shirts when possible and use an EPA-registered insect repellent when outdoors.** This is especially important during dusk and dawn when the mosquitoes that transmit WNV are most active, and when in areas where ticks may live.
    - **People older than 55 or who have a weakened immune system should also minimize outdoor activities during dusk and dawn.**
- **Do tick checks** for themselves, their family, and their pets after being outdoors in areas where ticks may live.
- **Remove standing water on their property** so mosquitoes do not have a place to lay their eggs.

To learn more, read the NYC Health Department's new data story, "What climate change means for vector-borne disease in NYC."

Events and Services: Speak with our Experts

Bureau of Immunization
The Bureau of Immunization holds office hours for health care providers on the first Wednesday of every month from 12 pm to 1 pm. Staff will be available to answer questions about reporting to the Citywide Immunization Registry, the Vaccines for Children (VFC) program, vaccine recommendations and guidelines, measles, respiratory syncytial virus, and other topics. Email nycimmunize@health.nyc.gov with the subject line, "Provider Office Hours Distribution List" to receive registration details.

Mailed FIT Outreach for Colorectal Cancer Screening

On October 28, 2025, from 2 pm to 3 pm, join the New York Citywide Colorectal Cancer Control Coalition for a webinar on "**Using Mailed FIT Outreach to Increase Colorectal Cancer Screening in Community Health Centers**." The webinar will include a live question-and-answer panel discussion with Dan Reuland, MD, MPH, Michelle W. Lewis, MSW, LCSW, and Stephanie B. Wheeler, PhD, MPH. Register for the webinar here.

CMO Special Lectures
Sickle Cell
On June 27, the OCMO hosted a webinar, The Truth About Sickle Cell Trait, which debunked myths and discussed equitable approaches to treatment and care. Watch the webinar here.

Past webinars include Sickling Is Not Seeking: Uniting Patient and Provider Attitudes Towards Pain in Sickle Cell Disease, which discussed destigmatizing sickle cell disease and providing equitable care. Continuing medical education credit is available with this webinar.

Tuberculosis
On July 11, the CMO Office hosted a webinar, "TB Prevention and Elimination," to discuss the current epidemiology of active and latent tuberculosis (TB) in NYC and the latest prevention and treatment guidelines from NYC Health Department TB experts. To watch the webinar, go to this link; the passcode is ?Wmf*Qc5.

Events and Services: Speak with our Experts

Support for Youth with Special Healthcare Needs
The Children and Youth with Special Health Care Needs Program connects families to no- or low-cost health services and community resources for children and young adults under 21 years with developmental, physical, intellectual, and behavioral conditions. All services are provided regardless of immigration status and are available in multiple languages through staff or an interpreter. The program has assisted more than 470 children and families.

To learn more, see Children and Youth with Special Health Care Needs.

Bureaus of Neighborhood Health

The NYC Health Department has bureaus placed locally in the Bronx, Brooklyn, and Harlem; learn more about the health and wellness services and classes available to people in these communities.

- Bronx Health Services
- Brooklyn Health Services
- Harlem Health Services

Family Wellness Suites

Family Wellness Suites center education and partner with parents, their families, and their clinical and social care providers to address system failures that contribute to maternal and infant health inequities. These safe, welcoming, and supportive **spaces offer local families educational workshops, stress reduction activities, parenting skills education, lactation support, among other programs.**

Learn more at the Family Wellness Suites webpage.

Recent Publications

Bridging Public Health and Health Care

- Antwi M, Abdool A, King R, Slavinski S. Malaria in New York City, 2013-2024. NYC Health Department: Epi Data Brief. 2025:(147).
- Coleman JT, Grasso A, Conigliaro T, Jasek J. Alcohol Use and Cancer Risk among New York City Adults. NYC Vital Signs. 2025;22(4);1-4.
- Merizier J, Dominianni C, Debchoudhury I, Orkin-Prol L, Jackson J, Fenlon J, Talati A. Youth and Young Adult Vaping in New York City. NYC Vital Signs. 2025;22(3):1-4.
- NYC Health Department. 2025 Health Advisory #21: Increases in Synthetic Cannabinoid (K2)-Related Emergency Department Visits in NYC. October 6, 2025,
- NYC Health Department. 2025 Health Advisory #16: Travel-Associated Infectious Diseases. August 22, 2025.
- NYC Health Department. 2025 Health Advisory #15: West Nile Virus Detected in New York City Mosquitoes. July 22, 2025.
- NYC Health Department. 2025 Health Alert #4: Cluster of Legionnaires' Disease in Harlem. July 28, 2025.

Advancing Antiracism in Public Health Practice and Policy

- Dreisbach N, Campbell S, Castillo O, Correa H, Marquez Chien F, Escoffery D, Plasencia S. East Harlem's Asthma Counselor Program during COVID: Maintaining service continuity and understanding family needs in a community-based child asthma management program. Soc Work Public Health. 2025:1-14.

- Maru D, Flynn D, Alsabahi L, Gallego A, Clippinger E, Friedman R, Kuldip Y, Myers G, Oghenejobo E, Shah A, Tsao TY, Wojas E, Yim B, Morse M. Measuring equitable care in multi-hospital markets: A Proportional Share Index Application in New York City. Health Aff Sch. 2025;3(5):qxaf088.

Building Institutional Accountability

- Jimenez R, Dorvil S, Pierre J, Nieves C, Shiman LJ, Shaheen T, Dannefer R, Maulana S, Norvila N. Sliding down the socioeconomic health gradient of COVID-19 in New York City: Multinomial regression analyses of disproportionate financial hardship for Black, Latino, and Asian residents and households with children. Front Public Health. 2025;13:1603629.

- Maru D, Schwartz RE, Fordjuoh J, Wiewel EW, Sood RK, Clippinger E, Jackson J, Ayedun A, Flynn D, Vasan A, Morse M. Mitigating medical debt as a public health equity issue: Challenges and opportunities in New York City. Am J Public Health. 2025;115(5):668-672.

For more updates, follow **@nychealthy** and **@nychealthcmo** on Twitter.