

**NYS Department of Health  
Public Health and Health Planning Council  
Deputy Commissioner Executive Report  
June 24, 2026**

**OFFICE OF PUBLIC HEALTH**

**Farmers' Market Nutrition Program Funding Update**

The Women, Infants and Children (WIC) Program Farmers' Market Nutrition Program is funded by the United States Department of Agriculture and is administered through a Memorandum of Understanding between the Department of Health and the Department of Agriculture and Markets, with funding provided from the United States Department of Agriculture to the Department of Agriculture and Markets directly. Eligible Women, Infants and Children Program (WIC) participants can receive up to one \$25 coupon booklet per season, distributed between June 1st and September 30<sup>th</sup> annually. This season, an overall reduction in funding of over 2.5M for this purpose has resulted in fewer Women, Infants and Children (WIC) Farmers' Market Nutrition Program booklet allocations. This year, only 97,000 booklets are available for distribution, compared to 200,000 booklets available last year.

**Communicable Diseases Update**

**Andes hantavirus:** The Department became aware that three New York State residents were among the passengers exposed to Andes hantavirus on the cruise ship MV Hondius. Andes hantavirus infection has a mortality rate of 30-40%, and this hantavirus strain is unusual in that there can be limited person-to-person spread. At the time of this writing, there have been 13 cases and 3 deaths. U.S. passengers who disembarked the ship on May 10 were taken to the National Quarantine Unit in Nebraska. They were in quarantine until June 21.

**Bundibugyo virus:** An outbreak of Bundibugyo virus, a virus in the Ebola family, was reported in the Democratic Republic of the Congo (DRC) in mid-May. The outbreak is in a remote region with ongoing civil strife, and precise numbers of cases and deaths are difficult to obtain. The outbreak spread to Kampala, Uganda. This outbreak led to travel restrictions on non-US citizens returning to the US after having been in the Democratic Republic of the Congo (DRC), Uganda, or South Sudan, and there is currently screening of returning travelers at certain airports, including John F. Kennedy International Airport (JFK).

For both Andes hantavirus and Bundibugyo virus, Health Advisory Notices were disseminated to clinicians; New York State Department of Health Emergency Management System was activated and is meeting daily; the Department's public website was updated; and coordination with State and Local partners is ongoing.

## **Center for Environmental Health**

### **Lead Rental Registry Program update**

Staff in the Center for Environmental Health's Bureau of Community Environmental Health and Food Protection have been working with local health departments on implementing the Lead Rental Registry in 25 communities of concern across the state. Landlords can now register their multi-unit rental dwellings (two or more units) in the Lead Safe NY database. As of June 1st, 2026, more than 11,000 properties are registered. Inspections and lead safety certificates are due every three years, with the first-round due no later than December 2028. We look forward to providing initial numbers of completed inspections later in the year.

## **Division of Public Health Infrastructure**

### **Office of Local Health Services**

Under the direction of the New York State Division of Homeland Security and Emergency Services, the Department of Health has activated its Incident Management System to plan and assess preparedness resulting from numerous mass gatherings scheduled to take place across New York State in June and July. Estimated tourism is expected to exceed 2 million during peak times as a result of events centered around the Federation Internationale de Football Association World Cup Soccer, the United States' 250<sup>th</sup> Anniversary of Independence, and the US Open Golf Championship, among others.

The Department's Office of Health Emergency Preparedness is leading the effort and has convened an Incident Management System Team, including staff from the Office of Public Health to address potential risks and key strategic focus areas. The Office of Local Health Services, leading the Health Promotions and Partner Engagement strategic focus area workgroup, is working with Department Central and Regional Office staff and the New York State Association of County Health Officials to promote awareness of planning efforts to local health departments, provide information about program support, and assess additional resource needs. A presentation was provided during the New York State Association of County Health Officials' State and Local Partners meeting on May 26<sup>th</sup>, 2026 to share an overview of the Incident Management Team effort and to address local health department questions and concerns. Communication regarding resource needs will continue throughout the summer.

### **Community Engagement & Outreach Unit**

The Community Engagement and Outreach Unit provided significant operational and coordination support toward the establishment of the New York State Rare Disease Advisory Steering Committee, which is helping lay the groundwork for the development of a permanent New York State Rare Disease Advisory Council. This work includes supporting cross-agency collaboration, assisting with planning and coordination activities, helping facilitate stakeholder engagement, and contributing to the organizational structure needed to support the future council.

Building on the National Public Health Week, rollout reported back in April, the Public Health Impact Card initiative is now being used not only to make public health programs and outcomes more visible, relatable, and actionable, but also to better understand how audiences engage with public health information. As part of the rollout, Public Health Impact Card content was adapted for social media across three posts. Collectively, the content generated 13,426 views and/or impressions, 118 interactions, and 22 reposts across Facebook, Instagram, and X. The ‘Building a Strong Public Health Workforce’ post was the strongest-performing post across all platforms and helped increase visibility for the New York State Community Public Health Leader Training Program. The program recorded 21 enrollments in April and May, reflecting continued interest in pathways to workforce and public health training opportunities.

## **OFFICE OF SCIENCE AND TECHNOLOGY**

The Office of Science has worked to update several major data dashboards in late winter/early spring. These dashboards can be found here: [State Health Data Hub | Public Health Science Center](#)

Since the December 2025 launch, the new 2025-2030 Prevention Agenda Dashboard application has been updated to include data from the Pregnancy Risk Assessment Monitoring System, the Vital Statistics National Survey of Children’s Health, the Behavioral Risk Factor Surveillance System, and the Youth Tobacco Survey. The Prevention Agenda dashboard is an interactive visual presentation of the most current tracking indicator data to assess progress of New York State’s Health Improvement Plan at state, county and sub-county levels. It serves as a key source for monitoring the progress that communities around the state will make regarding meeting the Prevention Agenda objectives.

The New York State Community Health Indicator Reports Dashboard tracks over 350 indicators organized by 15 health topics and is updated regularly to include the most recent available year of data for these indicators. Each county has its own dashboard that includes at-a-glance comparisons of the two most recent data points and allows for comparison of each county's data in relation to its region and New York State totals.

The New York State Leading Causes of Death data application provides an interactive visual presentation for up to seven leading causes of all deaths or premature deaths. The application adapts cause-specific color-coded tables, which allow users to assess the pattern of leading causes over time. At the state and regional levels, cause of death data tables is available by race and ethnicity, sex, and age. Ten-year trends for life expectancy data are presented by age group.

### **Additional Topic-specific Dashboards**

The New York State Pregnancy Risk Assessment Monitoring System Dashboard presents data from Pregnancy Risk Assessment Monitoring System, a national surveillance system designed to support research and guide policy changes that reduce infant morbidity and mortality by collecting information about maternal health, behaviors, and experiences before pregnancy, during pregnancy, and immediately after birth.

The New York State Asthma Dashboard provides a comprehensive view of asthma in the state by presenting emergency department, hospital discharge, mortality, prevalence, and healthcare cost and utilization data and serves as a resource for policymakers, healthcare providers, and other stakeholders to guide strategic actions and target interventions to serve the highest-risk individuals with asthma.

The Opioid Data Dashboard provides comprehensive and useful data on opioid use and misuse by improving timely opioid overdose reporting, supporting statewide prevention efforts, and serving as a valuable tool for planning, identifying where communities are struggling, helping communities tailor interventions, and showing improvements.

The Maternal and Child Health dashboard presents select national and state performance measures to support the assessment of needs and to monitor progress towards improving the health of New York State residents and reducing health disparities for women, infants, children and adolescents, including children and youth with special health care needs.

The Office of Science also continues to update several COVID-19 related dashboards on a weekly basis and the New York State Heat Risk and Illness Dashboard which updates daily between May 1-September 30th each year.

## **WADSWORTH CENTER**

### **Wadsworth Center Launches the First Cross-Division Summer Public Health Laboratory Academy**

The Wadsworth Center has been educating undergraduate students for several decades through the Research Experience for Undergraduates Program. Over the last three years we have been building on that experience to launch and expand the summer Public Health Laboratory Academy – an applied research internship experience funded in partnership with the Association of Public Health Laboratories. This year, we have 16 synchronous-track students and 3 asynchronous-track interns across infectious disease, environmental health, and genetics. The synchronous track students have just completed a two-week lab 101 training bootcamp and are off to their divisions and then their project mentors before coming together for end-of-summer presentations. This year, over 35 students, fellows, and staff are involved in teaching, mentoring, and/or organizing this program!

### **Wadsworth Center Scientists Advance the Development of a Lyme**

**Disease Vaccine** Scientists at the Wadsworth Center have made several important discoveries towards the development of a Lyme disease vaccine. Lyme disease is a tick-borne infection that afflicts thousands of New Yorkers each year. The disease is caused by the bacterium, *Borrelia burgdorferi*, which proliferates in skin tissues at the site of a tick bite before spreading to other organs. Dr. Nicholas Mantis, Chief, Laboratory of Microbial Pathogenesis and Immunology, and his team elucidated the immunological mechanisms by which antibodies elicited by vaccination may prevent *Borrelia burgdorferi* from surviving in skin tissues. The Mantis laboratory developed novel tools to assess the impact of antibodies on the killing of *B. burgdorferi* and delineated specific targets on the surface of the bacteria that are universally conserved. In collaboration with Moderna (Cambridge, MA) and Tufts University, Dr. Mantis and team report that vaccine is now in human clinical trials.

### **Wadsworth Center Reports First Detection of *Borrelia mayonii* in New York**

**State Ticks** The Wadsworth Center has identified *Borrelia mayonii* in blacklegged ticks (*Ixodes scapularis*) collected in New York State, marking the first detection of this Lyme disease-like pathogen outside of the upper Midwestern United States. *B. mayonii* causes an illness similar to Lyme disease and was first recognized as a human pathogen in Minnesota in 2016. In this investigation, ten ticks collected from Herkimer County – one nymph and nine adults – tested positive for the bacterium. Whole-genome sequencing is currently underway to further characterize these strains and better understand their relationship to previously identified isolates. This discovery resulted from a collaborative investigation involving the Wadsworth Center’s Bacterial Disease Laboratory, the Bureau of Communicable Disease Control, and the BCDC Vector Ecology Laboratory. Using a newly developed real-time PCR assay designed and validated at the Wadsworth Center by an Association of Public Health Laboratories fellow in collaboration with Center scientists, researchers screened more than 1,500 ticks collected from across New York State. The identification of *B. mayonii* in New York expands understanding of the geographic distribution of this emerging tick-borne pathogen and highlights the importance of continued surveillance for tick-borne diseases. The work also demonstrates the Wadsworth Center’s leadership in developing advanced diagnostic methods and strengthening public health preparedness to protect New Yorkers.

### **Wadsworth Center Scientists Share Advances in Molecular Newborn Screening at CDC Training Workshop**

Dr. Carlos Saavedra-Matiz and Dr. Denise Kay of the Wadsworth Center’s Newborn Screening Program participated in the 2026 Newborn Screening Molecular Training Workshop, co-sponsored by the Association of Public Health Laboratories (APHL) and the Centers for Disease Control and Prevention (CDC). The workshop was held in Atlanta, Georgia, from June 1-5, 2026. The workshop included trainees representing 14 state newborn screening programs, providing an important opportunity to strengthen national laboratory capacity and promote best practices in molecular newborn screening. The workshop equips laboratory professionals who are new to molecular testing and analysis with practical experience and foundational knowledge in areas including the purpose of molecular testing, contemporary molecular methods, assay validation, quality control and quality assurance, data analysis, and result interpretation. Dr. Saavedra-Matiz presented three lectures covering the fundamentals of DNA sequencing, laboratory mathematics, and case studies in severe combined immunodeficiency screening. Dr. Kay delivered a lecture on molecular analysis for cystic fibrosis screening. The leadership of Center scientists in this nationally recognized training program reflects the Center’s ongoing commitment to advancing newborn screening science and improving the early detection of serious genetic disorders across the United States.

## **OFFICE OF HEALTH CARE DELIVERY**

### **Office of Primary Care and Health Systems Management**

This office has undertaken a series of activities based on the changing circumstances of health care needs over the past few weeks.

### **Repatriation of passengers of the MV Hondius Cruise Ship Passengers**

In June this office led a state and local government multi-agency taskforce charged with safely and thoughtfully bringing home passengers who had travelled on the MV Hondius, a cruise ship where some passengers had contracted a rare, human-transmissible form of Hantavirus. The two passengers, or guests as they were called during the operation, were brought back to their homes from Nebraska where they were quarantining and will continue their quarantine for an additional 21 days.

Special recognition is due to the Department's Division of State Emergency Medical Services, who led this effort and Office of Health Emergency Preparedness that supported this activity. We also want to recognize the local government agencies that played a primary role in making sure that the last mile activities safely delivered these guests back to their homes.

### **Responding to the potential threat of Ebola**

There is currently an outbreak of Bundibugyo strain Ebola in three countries in Africa. As individuals return to the United States from the affected areas, the Department has ramped up activities to respond to the possibility of a symptomatic patient presenting with travel to the affected areas within the last 21 days.

These activities included:

- Publication of a Dear Chief Executive Officer/Administrator letter for Hospitals and Clinics focused on the issue of preparing for patients with a travel history and viral hemorrhagic fever symptoms on June 1<sup>st</sup>
- Hosting a webinar with over 700 participants on June 2<sup>nd</sup>
- Posting a slide deck and the publication of the recording of the webinar
- A one-time collection of personal protective equipment counts for all hospitals
- Gathering readiness information from hospitals identified as potential Ebola patient treatment centers
- Coordination with multiple statewide associations and local agencies

### **Rural Health Transformation Program Progress**

The Department is thankful to the Governor and the Legislature for providing additional procurement flexibility in the State budget that will enable the Rural Health Transformation Program to move quickly to allocate dollars to health care providers. The Department has been working on funding guidance for the four major rural health initiatives. The funding guidance and application for the Rural Community Health Integration initiative were both released on June 11, 2026.

### **Office of Aging and Long-Term Care**

Building off Governor Hochul's commitment to improving state government operation, the Office of Aging and Long-Term Care responded with ongoing support of Commissioner McDonald. Much work has been completed and will continue based on input from internal and external stakeholders to determine which existing policies and/or requirements, can we reduced, eliminated, or modified to decrease the burden on regulated providers. We wish to extend our appreciation to Governor Hochul and Commissioner McDonald for their ongoing support and for the introduction to this very important statewide effort, now expanded to include public input and known as **EXPRESS NY**.

To date, the Office of Aging and Long-Term Care has taken steps to decrease burden and restrictions in the following program areas:

### **Contribution Requirements for Residential Health Care Facility and Adult Day Health Care Program Capital Projects**

- The Office of Aging and Long-Term Care is responding to a long-standing request from the nursing home industry that was embedded in policy (Berger era). A *Dear Administrator Letter* was developed that indicates that relevant Certificate of Need applications submitted prospectively, would be subject to the revised ten percent equity (10%) requirement versus the previous 25%, consistent with other Article 28 applications.

### **Telehealth Guidance for Adult Care Facilities and Adult Day Health Care Programs**

- A *Dear Administrator Letter* was developed to clarify the circumstances under which Adult Care Facilities and Adult Day Health Care Program providers may use telehealth as defined in Article 29-G of the Public Health Law, provided that such use is consistent with all applicable federal and state requirements. This clarification and alignment will result in provider relief.

### **Nurse Aide Training Program**

- A regulatory package that will result in a decrease in certified nurse aide training hours from 100 to 75 hours (59 didactic; 16 clinical lab), plus testing, will be presented for information at the June 24<sup>th</sup> meeting of the Public Health and Health Planning Council. The proposed amendments to the regulations were filed with the Department of State May 29, 2026, and will be published in the State Register on June 17, 2026, with the 60 day public comment period ending on August 17, 2026. This change will be welcomed by the industry as well as prospective Certified Nurse Aides who serve as the backbone of skilled nursing facilities.

### **Nursing Home Administrator in Training clock hours**

- A regulatory amendment was proposed by the Board of Examiners for Nursing Homes Administrators (the licensing board) that effectively will reduce the required clock hours for the completion of the Administrator-in-Training (AIT) program from **1820 to 1365**, making New York State's requirements consistent with several other states, and will increase the pool of professionals that oversee the daily operations of New York's skilled nursing facilities. Amendments will also add five additional practice/service areas that qualify as field experience, while retaining safe and efficient training. The regulatory amendments were published in the State Register in late December 2025 and were recently approved by the Board of Examiners for Nursing Home Administrators on April 15th, 2026.

## **OFFICE OF HEALTH EQUITY AND HUMAN RIGHTS**

### **Hepatitis C Elimination Progress**

The New York State Department of Health's AIDS Institute, through its Office of Hepatitis Health Care and Epidemiology, coordinates statewide efforts to eliminate hepatitis C as a public health problem by 2030. On May 6, 2026, the Office held its annual Hepatitis C Elimination Plan Progress Report meeting, which provided updates on the progress New York State and New York City toward that goal.

New York State is currently meeting its target for diagnosing residents with hepatitis C. It is falling short, however, of the 80% target for hepatitis C treatment and clearance, standing at 55%. This means 55% of persons diagnosed with hepatitis C have been cured or cleared their infection, leaving 45% of those diagnosed without completed treatment.

Continued work is needed to connect diagnosed individuals to treatment and to close the gap between diagnosis and being clear of hepatitis C. Meeting materials and a recording will be posted on the New York State Department of Health's [Hepatitis C Elimination](#) webpage and additionally, metrics are available in the Hepatitis C Dashboard at [hcvdashboard.ny.org](http://hcvdashboard.ny.org).

### **Harm Reduction and the Future of Drug Treatment**

The AIDS Institute's Office of Drug User Health works to reduce drug-related harm and to expand access to treatment and supportive services across New York State. On May 4, 2026, Allan Clear, Director of Office of Drug User Health, AIDS Institute, spoke at the conference "Harm Reduction After the War on Drugs: Reimagining New York's Treatment System," held at the John Jay College of Criminal Justice."

The event was cohosted by the [National Black Harm Reduction Network](#), Data Collaborative for Justice, [From Punishment to Public Health](#), and [Center for Justice Innovation](#). This conference brought together policymakers, practitioners, researchers, and advocates to describe the future of the drug treatment system. Director Allan Clear participated in the closing panel, "Promising Practices: On the Ground and In the Community: Harm Reduction Innovations Redefining Treatment in New York."

The Office of Drug User Health within the New York State Department of Health continues to advance harm reduction practices and to strengthen connections between treatment providers and the communities they serve.

### **Cannabis Legalization and Public Health**

The New York State Department of Health's Cannabis Program monitors cannabis use and its public health implications following the legalization of adult-use cannabis in New York State. On May 20, 2026, Prescription for Progress, a coalition of leaders dedicated to addressing the opioid crisis in New York State's Capital Region, hosted a regional conference in Albany, New York. The coalition focused this year's conference on cannabis in light of recent legalization in New York State and proposed changes to legalization and scheduling at the federal level. The topic of the meeting was Cannabis Legalization: Five Years Later.

The New York State Department of Health’s Cannabis Program Manager, J’Aimee A. Louis, MPH, was invited to attend the conference as a keynote speaker and panel participant. The presentation focused on a data review of the New York State Behavioral Risk Factor Surveillance System brief on cannabis use in New York State adults, and what the data means for policy, practice, and public health. Cannabis use is common and increasing among adults. Legalization has changed access, perception, and use patterns. Understanding the data helps us move from assumptions to evidence-informed decisions.

During the panel discussion, participants emphasized addressing community health impacts and concerns, including how legalization impacts workplace rights, traffic safety, concerns about contamination and product safety, and the importance of fact-based information and harm reduction resources. The goal of New York State Department of Health’s participation in this conference reflects a broader aim to align systems across sectors so that public health responses are effective and equitable.