

LANGUAGE ACCESS PLAN FOR LIMITED ENGLISH PROFICIENT INDIVIDUALS

State Agency: New York State Department of Health

Effective Date of Plan: 5/30/2019

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PART 1 – INTRODUCTION

Pursuant to Executive Order No. 26 (“Statewide Language Access Policy”), we have prepared this Language Access Plan (“Plan”) that sets forth the actions we will take to ensure that limited English proficient (“LEP”) individuals have meaningful access to agency services, programs, and activities.

Statement of Agency Services to the Public:

The New York State Department of Health (Department) protects and promotes the health of the people of New York by preventing epidemics and the spread of disease; promoting healthy lifestyles for children and families; protecting against hazards in homes, work, communities and the environment; assuring access to high quality health care; and preparing for and responding to emergencies. As part of the Department’s mission to promote healthy lifestyles and to protect the health of the people of this State, the Department seeks to ensure that all individuals, including those with limited ability to read, speak, write or understand English, are able to access our services, programs and activities.

In developing this plan, we have understood LEP individuals to be persons who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English. We will reassess language needs periodically as needed, at and no later than every two years starting from the effective date of this plan.

PART 2 – ASSESSING LEP POPULATION LANGUAGE NEEDS

The estimated total number of individuals in our service area is: Approximately 19,798,228- the NYS population in 2017.

The top six languages spoken by LEP individuals that our agency serves or could potentially serve are as follows:

Language	Estimated Number of LEP Individuals Who Speak this Language
Spanish	1,249,541

Chinese	386,290
Russian	122,150
Haitian Creole	63,615
Bengali	62,219
Korean	60,405

Source: U.S. Census Bureau, 2013-2017 American Community Survey

We use the following resources to determine the top six languages spoken by LEP individuals:

- U.S. Census data (including American Community Survey)
- Agency data on client contacts
- School system data
- Information from community organizations that serve LEP individuals

Names of organizations: AIDS Community Organizations/Providers.

- Information from other government agencies

Names of agencies: NYS agencies including Department of Corrections and Community Supervision, Office of Mental Health, Office of Children and Family Services, Office of Temporary and Disability Assistance, Department of Motors and Vehicles; County Social Service agencies; and school districts statewide.

- Other Migration Policy Institute (www.migrationpolicy.org) and Office of Minority Health and Health Disparities Prevention.

We have determined the frequency of our contacts with LEP individuals as follows:

Upon initial contact with any of the Department program areas providing direct public services, language needs are determined and documented by program staff. Additional data is gathered from contact with social workers that assist the LEP individual; advocacy groups; Department contractors; and local municipal staff.

Frequency of contact is based on the LEP individual's level of need and may occur in various settings or circumstances. Some examples of contacts with LEP individuals include, but are not limited, to the following: (1) contacts occurring when the LEP individual applies to obtain services or benefits under programs administered by the Department; (2) contact with LEP individuals through the AIDS Institute wherein the Department staff contact known partners of persons infected with HIV or AIDS, or conduct HIV/STD testing in the field; (3) contact with LEP individuals when such individuals seek information or documentation maintained by the Department, including birth, death or marriage certificates; and (4) during the course of the Department's monitoring and

oversight role, which includes home/health care facility visits, surveillance, and inspections, such as inspections of summer camps and restaurants.

PART 3 – PUBLIC OUTREACH AND NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES

We inform LEP individuals, in the languages indicated in the chart in Part 2 of this plan, about their right to free language assistance services by using the following measures:

- LEP individuals are informed directly by our staff

In what ways? If an individual indicates a need for language assistance at any point of public contact (in person or by phone), staff informs them of the services that are available.

- Brochures or flyers about language assistance services

- In public areas of the agency

- Elsewhere in the agency's service areas

- Signs posted about language assistance services

- In public areas of the agency

- Elsewhere in the agency's service areas

- Outreach and presentations at schools, faith-based groups, and other community

What are the LEP populations targeted? In addition to the languages indicated in the chart in Part 2 of this Plan, outreach may be conducted to LEP populations based on community need.

- Local, non-English language media directed at LEP individuals in their languages

- Telephonic voice menu providing information in non-English languages

In which languages: The New York State of Health has individual telephonic prompts for Spanish, Russian, Cantonese, Mandarin, Haitian Creole and an additional prompt for all other languages.

- Other (describe) The Department's website informs the public about free language assistance services. It also offers translated links to current public and community health concern announcements, emergency disease notifications, the New York State of Health, the AIDS Institute and Rape Crisis and Sexual Violence Prevention Program.

PART 4 – PROVISION OF LANGUAGE ASSISTANCE SERVICES

We use the following resources to determine when an individual is LEP, and what the individual's primary language is, when the encounter is *in person*:

- "I Speak" posters or visual aids

- Reception staff makes those determinations based on experience, with the assistance of bilingual staff members where available
- Other Self-identification by the individual during the encounter; referral from an outside source.

We use the following resources to determine when an individual is LEP, and what the individual’s primary language is, when the encounter is *by telephone*:

- Reception staff makes those determinations based on experience, with the assistance of bilingual staff members where available
- Telephonic interpreting service
- Other Self-identification by the individual during the encounter; referral from an outside source.

We record and maintain documentation of each LEP individual’s language assistance needs as follows:

Language assistance needs are documented in a centralized intra-agency database, accessible to all employees in the various programs within the Department. The information derived from the database will assist the Language Access Coordinator in evaluating the effectiveness of the Plan and the services being provided.

A. Oral Interpreting Services

Our protocol(s) for assessing whether an LEP individual needs oral interpreting services is as follows:

For in-person encounters: The need for an interpreter may be determined by reception staff with the assistance of bilingual staff members, “I Speak” posters, self- identification by the LEP individual, or through a referral from outside sources. “I Speak” posters have been distributed to staff.

By telephone: Telephone contacts to programs from LEP individuals are handled by telephonic interpreting services under contract with the Department. In addition, bilingual staff may assist with calls when available.

At initial contact in the field: “I Speak” cards will be utilized by field staff, and telephonic interpreting services can be employed through cell phones and other similar devices. In addition, bilingual staff may assist in the field dependent on community need, when available.

For pre-planned appointments with LEP individuals: Information concerning language needs is gathered as appointments are made. The need for an interpreter may be determined

by reception staff with the assistance of bilingual staff members, self- identification by the LEP individual, or through a referral from outside sources.

Other (describe): [Click here to enter text.](#)

Our protocol(s) for informing LEP individuals that they do not need to provide their own interpreters and that free interpreting services will be provided is as follows:

For in-person encounters: Staff will utilize the “I Speak” card which includes a message that advise LEP individuals that language assistance is available at no cost to them. Bilingual staff, if available, and who are fluent in the LEP individual’s language, will inform the LEP individual that he or she does not need to provide his or her own interpreter and that free interpreting services will be provided.

By telephone: Staff will inform the LEP individual that he or she does not need to provide his or her own interpreter and that free interpreting services will be provided. Staff will also utilize telephonic interpreting service to notify LEP individuals.

At initial contact in the field: Staff in the field utilize the “I Speak” card to assist in identifying the language of an LEP individual. Bilingual staff, if available in the field and who are fluent in the language of the LEP individual, will inform the LEP individual that he or she does not need to provide his or her own interpreter and that free interpreting services are provided.

For pre-planned appointments with LEP individuals: Information concerning language needs is obtained as appointments are made. Reception staff with the assistance of telephonic interpreter or bilingual staff members when available will notify an LEP individual that free interpreting services are available.

Other (describe): Written notice, translated in the languages indicated in the chart in Part 2 of this Plan, will be provided to advise LEP individuals that free language assistance is available. In addition, the Department’s website includes information about the availability of free language assistance services and a contact number for further assistance.

If an LEP individual insists on using a family member, friend, or other person as an interpreter, our protocol(s) for determining whether to accept or decline such an arrangement is as follows:

LEP individuals that come into contact with our agency will be informed of the availability of interpreting services provided at no cost to them. Generally, an LEP individual may not use a family member, friend, or a minor as an interpreter. However, **during emergencies** an LEP individual will be permitted to use a minor, a family member or friend as an interpreter. Upon request, an LEP individual may also be permitted to use a minor, a family member or friend as an interpreter for routine matters, such as asking the location of the office, hours of operation or rescheduling an appointment. Where the interaction with the LEP individual occurs at the agency’s office, and an individual is permitted to use an interpreter of his or her choosing, he or she must fill out a written consent/waiver form.

Where an LEP individual is engaged in official business with the agency, the agency will provide an independent interpreter at all times. An LEP individual will not be permitted to provide an interpreter of his or her choosing when filling out applications or when involved in other legal matters.

Our protocol(s) for obtaining interpreter services in a timely manner is as follows:

When it is determined that an interpreter is needed, programs arrange interpreter services for scheduled appointments; telephonic interpreter services are utilized as needed; or bilingual staff who are available and have been identified who may assist the LEP individual.

We record and maintain documentation of oral interpreting services provided to LEP individuals at each encounter as follows:

Language interpreting services are documented in a centralized intra-agency database, accessible to all employees in the various programs within the Department. The information derived from the database will assist the LAC in evaluating the effectiveness of the Plan and the interpreting services being provided. The Department also utilizes interpreting services obtained through a statewide contract, which provides monthly detailed reporting on the services provided to LEP individuals.

Competency and confidentiality

The linguistic and cultural competence of interpreters is addressed as follows:

Language parenthetic staff are tested through Civil Service for spoken-language proficiency. Department multilingual staff volunteers self-identify their ability to read, write and speak a language other than English. Where the Department utilizes independent interpreting services, that vendor will implement quality assurance standards to guarantee that its interpreters are trained and are linguistically and culturally competent.

The issue of confidentiality pertaining to the use of interpreters is addressed as follows:

All Department staff in programs identified as covered programs under Health Insurance Portability and Accountability Act (HIPAA) are trained in HIPAA and confidentiality compliance. Interpreters under contract with the State must comply with confidentiality requirements, including applicable HIPAA requirements. The training provided to staff will address the importance of confidentiality. Furthermore, independent interpreters will enforce standards of confidentiality in accordance with NYS Law.

Maintaining a list of oral interpreting resources

We use, or have available for oral interpreting, the following resources:

- Bilingual staff members who work directly with LEP individuals

Number of staff and languages spoken: A total of four staff are in parenthetic language titles: three for Spanish, one for Chinese.

- Bilingual staff members who provide oral interpreting when necessary

Number of staff and languages spoken: Collectively, approximately 100 staff speak 18 languages, including the languages listed in the chart in Part 2 of this Plan and Arabic, Fanti, French, German, Greek, Hindi, Romanian, Polish, Portuguese, Ukrainian, Chao Chow and Vietnamese.

- Telephonic interpreting service

Names of vendors: Providers under the NYS Office of General Services (OGS) Statewide Administrative Services Contract.

- Contracts or other arrangements with community organizations or individuals for oral interpreting services

Names of individuals/organizations and languages: [Click here to enter text.](#)

- Other [Click here to enter text.](#)

The agency's Language Access Coordinator maintains the list of oral interpreting resources that are available to staff, which includes:

- Names and contact information for all resources
- Names and locations of staff members who are available to act as interpreters or provide services directly in the LEP individual's primary language
- Languages in which each interpreter or service is qualified
- Procedure for accessing each interpreter or service

We inform all staff members who have contact with the public how to obtain oral interpreting services as follows:

Mandatory annual training is required for all staff. Training is administered through the Statewide Learning Management System with both a general training course, and a DOH specific course.

B. Translations of Written Documents

The process to determine and reassess, at least every two years starting from the effective date of this plan, those vital documents (including website content) which must be translated is as follows:

Documents determined to be vital include intake and consent forms; notice of rights, requirements and responsibilities; and such others that contain pertinent information to assist in accessing program benefits. Programs within the Department will determine which documents are vital and

in need of translation. The Public Affairs Group will review all forms and documents the program has identified as being vital prior to translation. All translated documents will be reviewed and monitored as part of our Language Access Plan.

The process to timely translate documents that LEP individuals submit in their primary languages is as follows:

Upon receiving a document or correspondence from an LEP individual in their primary language, the said document or correspondence will be sent to the selected vendor for translation in a timely manner.

The process for ensuring that documents are written in plain language before they are translated into other languages is as follows:

Language Access Work Group liaisons in all Department programs will review documents for plain language compliance prior to translation.

The following table contains a non-exhaustive list of translated documents by the agency in the languages indicated:

	Name	Top Six Languages						Additional Languages
		Spanish	Chinese	Russian	Haitian Creole	Korean	Bengali	
1.	HIV Uninsured Care Programs	✓	✓	✓	✓	✓	In process	French, Italian
2.	New York State Confidentiality Law & HIV	✓	✓	✓	✓	✓	In process	Italian
3.	Need Help Paying for Prep (AIDS Institute)	✓	✓	✓	✓	✓	In process	French, Italian
4.	Prep Yourself Against HIV (Brochure)	✓	✓	✓	✓	✓	In process	French, Italian
5.	ADAP Privacy Notice	✓	✓	✓	✓	✓	In process	
6.	ADAP Language Sheet	✓	✓	✓	✓	✓	In process	

7.	PrEP- AP (ADAP)	✓	✓	✓	✓	✓	In process	
8.	PrEP – AP Card (ADAP)	✓	✓	✓	✓	✓	In process	
9.	Expect The Test - Brochure	✓	✓	✓	✓	✓	In process	Urdu, Uzbek
10.	Early Intervention Program: A Parent’s Guide (58-pages Booklet)	✓	✓	✓	✓	✓	✓	Arabic, French, Greek, Hmong, Italian, Japanese, Khmer, Laotian, Punjabi, Vietnamese, Yiddish
11.	Newborn Screening	✓	✓	✓	✓	✓	In process	Italian, Vietnamese, French
12.	Ready, Set, Grow with WIC	✓	✓	✓	✓	✓	✓	Arabic, Burmese, Farsi, French, Hindi, Italian, Karen, Nepali, Polish, Somali, Turkish, Urdu, Vietnamese
13.	WIC Participants Rights and Responsibilities	✓	✓	✓	✓	✓	In process	Arabic, Burmese, Farsi, French, Hindi, Italian, Karen, Nepali, Polish, Somali, Turkish, Urdu, Vietnamese
14.	WIC Termination Letter	✓	✓	✓	✓	✓	In process	Arabic, Burmese, Farsi, French,

								Hindi, Italian, Karen, Nepali, Polish, Somali, Turkish, Urdu, Vietnamese
15.	WIC Fraud Booklet (Fraud: It's a Trap)	✓	✓	✓	✓	✓	In process	French, Italian, Polish
16.	WIC Food Cards Booklet	✓	✓	✓	✓	✓	✓	Arabic, Burmese, Farsi, French, Hindi, Italian, Karen, Nepali, Polish, Somali, Turkish, Urdu, Vietnamese
17.	Handling Concerns About Care & Services in Nursing Homes	✓	✓	✓	✓	✓	In process	Italian
18.	Managed Care Bill of Rights	✓	✓	✓	✓	✓	In process	Italian
19.	NYS Proxy Law: Appointing Your Health Care Proxy	✓	✓	✓	✓	✓	In process	Italian
20.	Your Rights as a Hospital Patient In New York State (available on DOH website only)	✓	✓	✓	✓	✓	In process	Italian

21.	Your Rights as a Nursing Home Resident in New York State	✓	✓	✓	✓	✓	In process	Italian
22.	NYS Immunization Information System	✓	✓	✓	✓	✓	Under review	
23.	New York State Requirements for School Entrance/ Attendance	✓	✓	✓	✓	✓	In process	
24.	How to Choose a Medicaid Managed Care Health Insurance Plan	✓	✓	✓	✓	✓	In process	Arabic, Hebrew, Hindi, Laotian, Polish, Urdu, Vietnamese
25.	Medicaid Enrollment Submission of Application on Behalf of Applicant	✓	✓	✓	✓	✓	In process	French, Italian
26.	Office of Professional Medical Conduct Complaint Form English	✓	✓	✓	✓	✓	In process	Arabic, Italian, Polish
27.	Donate Life: Pass It On!	In process	French, Italian					
28.	Pulse Oximetry Screening for Critical Congenial Heart Disease Information for Parents and Guardians	✓	✓	✓	✓	✓	In process	French, Italian
33.	Pulse Oximetry Screening for Critical Congenial Heart Disease. What does a low result mean?	✓	✓	✓	✓	✓	In process	French, Italian

29.	Access NY Office of Health Insurance Programs	✓	✓	✓	✓	✓	In process	Italian
30.	Medical Marijuana Patients Brochure (NYS Patient Information)	✓	✓	✓	✓	✓	✓	Italian
31.	Zika Virus Fact Sheet	✓	✓	✓	✓	✓	In process	Italian, Portuguese
32.	Partner Services Let's Talk About You!	✓	✓	✓	✓	✓	In process	
33.	Hepatitis C Testing Law. Consumer Fact Sheet	✓	✓	✓	✓	✓	In process	
34.	Hepatitis C Screening, Diagnosis &Linkage to Care	✓	In process	In process	In process	In process	In process	
35.	Medical Orders for Life- Sustaining Treatment	✓	In process	In process	In process	In process	In process	
36.	Essential Plan Fact Sheet	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
37.	Enrollment Period Fact Sheet	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian,

								Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
38.	How to Select a Health Care Plan Fact Sheet	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
39.	Immigrant Fact Sheet	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
40.	NY State of Health – Poster (You Deserve Affordable Health Care in 3 sizes)	✓	✓	✓	✓	✓	✓	French
41.	NY State of Health – Rack Card (You Deserve Affordable Health Care)	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali,

								Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
42.	DACA Rescission Fact Sheet	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
43.	At a Glance Cards (Medicaid, Child Health Plus, Essential Plan, Qualified Health)	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
44.	NY State of Health - Postcard	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
45.	NY State of Health – Young Adults	✓	✓	✓	✓	✓	In process	French

46.	A Guide to the Appeals Process – Individuals and Families	✓	✓	✓	✓	✓	✓	Arabic, Burmese, French, Hindi, Italian, Japanese, Karen, Nepali, Polish, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese, Yiddish
47.	NY State of Health- Why you Need Health Insurance Fact Sheet	✓	✓	✓	✓	✓	In process	French, Italian
48.	Guide to Form 1095-A Brochure	✓	✓	✓	✓	✓	✓	French, Italian
49.	Facts About Temporary Agricultural Workers (H-2A Visa Holders) and Health Insurance	✓	✓	✓	✓	✓	✓	French, Italian
50.	Facts About Student Visa Holders and Health Insurance	✓	✓	✓	✓	✓	✓	French, Italian
51.	Common Health Insurance Terms & Definitions	✓	✓	✓	✓	✓	✓	French, Italian

Any document determined to be vital during the course of this plan will be timely translated.

The process for ensuring that translations are accurate and incorporate commonly used words is as follows:

The Department, through its vendor (where applicable), will ensure that proofing/editing for correctness and cultural sensitivity are a component of the translation services provided by any vendor under contract as part of the publication process. The Department will also ensure that plain language is used in materials produced before translation to ensure information is accessible to a range of literacy levels.

We use, or have available for translating, the following resources:

- Contracts with language service vendors

Names of vendors: Providers under the NYS OGS Statewide Administrative Services Contract.

- Contracts or other arrangements with community organizations or individuals for oral interpreting services

Names of individuals/organizations and languages: [Click here to enter text.](#)

- Oral translations of written documents by bilingual staff members

- Oral translations of written documents by other individuals or community organizations

- Other [Click here to enter text.](#)

The agency's Language Access Coordinator maintains the list of written translation resources that are available to staff, which includes:

- Names and contact information for all resources

- Names and locations of staff members who are available to provide oral translations of written documents

- Languages in which each translation service is qualified

- Procedure for accessing each translation service

PART 5 – STAFF TRAINING

The person(s) in the agency who is responsible for the provision of training to staff in language access issues is: Brian Caldwell, Director of Staff Development.

The staff training includes the following components:

- The legal obligations to provide meaningful access to benefits and services to LEP individuals

- How to access language assistance services

- How to work with interpreters

- Cultural competence and cultural sensitivity
- Documenting the language needs of LEP individuals and the language services provided to them by the agency
- How to obtain written translation services

The methods and frequency of training are as follows:

Mandatory online training will be provided for all employees within 90 days of being hired and annually thereafter. Staff will have to complete Governor’s Office of Employee Relation’s Language Access Training and the Department’s agency specific Language Access Plan training.

- On and after September 30, 2014, employees newly assigned to functions that bring them into contact with the public must complete the computer based training within 90 days of assignment to the program.
- As changes occur in the program, the training will be updated, designated program liaisons will be informed of changes to communicate to relevant staff and updates will be posted on the Department's News Site.

PART 6 – ADMINISTRATION

Monitoring

To ensure compliance with the Plan, the LAC will monitor its implementation as follows:

The LAP Work Group meets to review progress, identify gaps and develop work plans to resolve any gaps. Frequency of the LAP Work Group meetings is determined by priorities set. The Plan will be monitored by the LAP Work Group and updated as needed.

Complaints

We provide information to the public in at least the top six languages, advising them of the right to file a complaint if they feel that they have been the subject of discrimination. The information we provide describes how and/or where to file a complaint. We do not retaliate or take other adverse action because an individual has filed a complaint alleging discrimination based on LEP status or needs.

We display information on the right to file a complaint, and the procedures to file a complaint, in the following manner:

In addition to its website, the Department requires that all programs identified by the Department as providing direct public services place notifications in reception areas indicating the availability of a complaint form in the languages indicated in Part 2. The Department

utilizes the Statewide Language Access Complaint Form that provides information on the right to file a complaint and procedures to do so. The complaint form is available in the languages described in Part 2.

Additionally, the Department requires that hospitals in the State adopt and make available the "Patient's Bill of Rights", available in English, Spanish, Italian, Russian, Greek, Yiddish, Haitian Creole, Korean and Chinese. The following are inserts from the Patient's Bill of Rights:

As a patient in a hospital in New York State, you have the right, consistent with law, to:

Understand and use these rights. If for any reason you do not understand, or you need help, the hospital MUST provide assistance, including an interpreter.

Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, source of payment, or age.

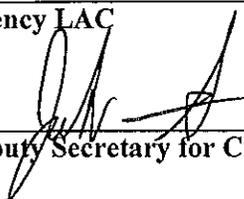
Complain without fear of reprisals about the care and services you are receiving and to have the hospital respond to you and if you request it, a written response. If you are not satisfied with the hospital's response, you can complain to the New York State Health Department. The hospital must provide you with the State Health Department's telephone number.

We handle complaints made to the agency regarding the provision of language assistance services in the following manner:

Program staff will respond to complaints received regarding the provisions of language assistance services. The LAC will address complaints received that cannot be resolved by program staff.

All complaints must be timely forwarded to the Statewide Language Access Coordinator.

PART 7 – SIGNATURES

	NYS Commissioner of Health	May 24, 2019
Head of Agency	Title	Date
	Associate Commissioner Director, Office of Minority Health & Health Disparities Prevention	May 24, 2019
Agency LAC	Title	Date
	Deputy Secretary for Civil Rights	5/30/19
		Date