



July 2019

Dear Colleagues:

Last month, the State celebrated the meaningful contributions of LGBTQ New Yorkers. To mark the 50th anniversary of the Stonewall Uprising, New York City hosted WorldPride. This was the first time WorldPride, a culturally diverse expression of the quest for equality of LGBTQ people worldwide, has ever been hosted in the United States. The Pride celebrations may have ended, but New York State continues to protect the health and wellbeing of LGBTQ and all New York State residents every month of the year.

I thought that I would use this month's letter to share with you how Governor Cuomo's Justice Agenda is improving public health and protecting rights. In addition, I will provide an update on the Department's work to ensure LGBTQ health and wellness.

The Justice Agenda and Public Health. Last December, the Governor laid out an aggressive blueprint to ensure social and economic justice for all New Yorkers, addressing climate change, workers' rights, transportation needs, gender equity, and LGBTQ rights. His Justice Agenda has accomplished much for public health this Legislative Session, especially by codifying provisions of the Affordable Care Act. It has ensured protections for New York women with the passage of the Reproductive Health Act, Comprehensive Coverage Contraceptive Act, and the Domestic Violence Survivors Justice Act, and a ban on revenge porn. The Justice Agenda has also delivered important protections for LGBTQ New Yorkers. The Governor signed the Gender Expression Non-Discrimination Act (GENDA); legislation banning the deplorable practice of conversion therapy; and legislation banning the gay and trans panic legal defense, which prohibits those accused of violent crimes from using homophobia and transphobia as a viable defense strategy in court.

The Governor has also taken several actions through the Department of Financial Services (DFS) to ensure that New Yorkers receive the healthcare insurance coverage they deserve. Sexual orientation, gender identity or expression, and transgender status are now included among nondiscriminatory protections, regardless of future action by the federal government. New York insurers must now cover the HIV-prevention drug for Pre-Exposure Prophylaxis (PrEP) without cost-sharing upon coverage issuance or renewal in 2020. DFS has also proposed a new regulation requiring clear standards for health insurer ID cards that will benefit all New Yorkers, especially the LGBTQ community, and is providing better consumer information so that transgender New Yorkers can fully access gender-affirming care through their insurance coverage.

LGBTQ Health and Wellness. As clinicians seeking to deliver high-quality care, we naturally ask our patients questions about their lifestyle and behaviors. As our sociocultural norms have changed over the years, it has become accepted and expected that we ask our patients more detailed questions about such topics as sexual behaviors, substance use, and mental health. As walls come down, more individuals who have been left out of the healthcare system because of sexual orientation and gender identity will be able to find healthcare providers they trust and who support them.

It is important to ask *every* patient to identify their sex *assigned at birth*, their current gender identity, and their sexual orientation. Doing so—and doing so in a manner that is free of prejudice or assumptions—is a critical step in identifying essential services your patients may need, such as testing for sexually transmitted infections, providing access to PrEP for the prevention of HIV, providing breast exam for transgender men and prostate exams for transgender women. Simply put: we need to identify and treat potential pathology as related to a person’s anatomy (regardless of how they present).

In recent years, the Department has expanded its data collection efforts to accommodate the different ways in which New Yorkers identify themselves. This information is crucial for planning programs, for understanding epidemiologic trends, and for making sure that the data we present reflect the communities we serve.

Legal protections like those the Governor enacted are fundamental to ensuring safe spaces for vulnerable communities, but we also have a responsibility to try to remove biases that adversely affect the health of LGBTQ New Yorkers. A significant part of ending the AIDS epidemic that Governor Cuomo committed to in 2015 is ending stigma. To this end, the Department’s AIDS Institute conducted surveys to measure levels of stigma within 80 healthcare facilities. Results showed that persons who identify as transgender and gender-nonconforming reported experiencing the highest levels of stigmatization.

In response, the Department recently announced awards totaling \$5.6 million over five years to support HIV prevention, care, and support and gender-affirming services for transgender and gender non-conforming/non-binary (TGNCNB) individuals, with a focus on TGNCNB communities of color. As part of the State’s initiative to end the AIDS epidemic in New York State, the programs seek to reduce disparities in health outcomes, remove barriers to HIV prevention, and facilitate early access to quality HIV and gender-affirming healthcare. They will improve the well-being of TGNCNB people living with, and at risk for, HIV by addressing their health and social issues.

We are seeing more effective ways to treat sexually transmitted diseases within the LGBTQ community. The FDA recently cleared the first diagnostic tests for extragenital testing for chlamydia and gonorrhea. Data confirm that many infections are missed with genital-only screening. Extragenital testing is currently available in New York State and is covered by Medicaid.

Significant progress is also being made to ensure that PrEP—a once-daily pill to prevent HIV infection—is affordable and available across the State. Since December 2017, all insurance plans in New York that offer prescription drug coverage are required to cover PrEP. We have seen significant increases in PrEP uptake, but more must be done to ensure that individuals who need or want PrEP have access. Needless to say, the conversation begins with you in your practice. If you want more information about PrEP, it can be found [here](#).

Finally, I want to stress that the AIDS Institute’s [Clinical Education Initiative](#) (CEI) is a great resource for enhancing capacity within New York State’s diverse healthcare workforce. CEI is an essential resource for clinicians seeking to improve health outcomes related to HIV, STIs, and hepatitis C.

As we were preparing to send this letter, New York State celebrated a legislative victory that I felt had to be included here since it will improve the health of generations of New Yorkers: raising the minimum sales age for tobacco and electronic cigarette products in the State from 18

to 21. The Governor's signing of this new law is part of a progressive timeline of anti-smoking milestones that began in 1964 with the Surgeon General's landmark report on smoking and health. Cigarettes and e-cigarettes pose serious health threats, and now New York is doing even more to eliminate opportunities for addiction.

Every New Yorker should have the same opportunity to thrive and prosper in good health in the Empire State. This objective is a priority for me as Commissioner, and I appreciate the opportunity to share these perspectives.

I have one last thing to share this month—[a talk I gave this spring](#) at Cornell University's TEDx forum. I wanted to share this short presentation because it addresses some of the most critical public health issues we are facing in 2019, but in the larger context of our evolving public views about science. I hope that it will get you thinking about how we can protect public health in the age of viral misinformation.

As always, thank you for your continued commitment to providing the best care for all New Yorkers. Best wishes for a safe and relaxing summer.

Sincerely,

A handwritten signature in blue ink that reads "Howard". The signature is written in a cursive, slightly slanted style.

Howard A. Zucker, M.D., J.D.