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March 3, 2022

Mayor Eric Adams
City Hall
New York, NY 10007

Dear Mayor Adams:

I write to express my strong opposition to the pending changes to the Key to NYC and public-school masking policies that were announced February 27¹ on Twitter. I urge you to consider the distinct likelihood that we will face another surge in the near future, and to adopt more measured policies that establish target metrics for relaxing critical safety measures while protecting the progress we have made in the ongoing battle against COVID-19.

As a large, densely-populated metropolitan city with a majority of multi-resident households and buildings with subpar ventilation systems, New York City is vulnerable to rapid spread of COVID-19. Since the pandemic struck, New York City and State have shown remarkable leadership in following the science and establishing evidence-based policies to help fight COVID-19 and protect public health in a manner that aims to reduce health inequities. Although no one can predict precisely what the next phase of the pandemic will look like, public health experts anticipate the rise of new variants and possible evolution of the virus due to conditions still being ripe for mutations.² Public health policy experts advise this is the time to plan and prepare for the next phase of the pandemic rather than prematurely declare victory.³

¹ Adams, Eric [@NYCMayor]. *More than a million New York City school children will return to class tomorrow. If our numbers continue to show a low level of risk, we will remove the indoor mask mandate for public school students, effective Monday, March 7. We will make a final decision on Friday, March 4.* Twitter, February 27, 2022, <https://twitter.com/NYCMayor/status/1498054449083953153>

² Gounder, Celine (2022): *Pandemic Predictions Are Tricky. Except This One: U.S. Hospitals Are Not Ready for The New Normal*, STAT, accessed online at: <https://www.statnews.com/2022/02/21/pandemic-prediction-us-hospitals-not-ready-for-new-normal/>; Burke, Donald S. (2022): *Coronaviruses Are 'Clever': Evolutionary Scenarios for The Future of SARS-CoV-2*, STAT, accessed online at: <https://www.statnews.com/2022/02/16/coronaviruses-are-clever-evolutionary-scenarios-for-the-future-of-sars-cov-2/>

³ Slavitt, Andy [@ASlavitt]. *COVID-19 Update: We have been through many stages of the pandemic. Now as the country & various states prepare to lay out the plan ahead, there are some things they must do. 1/.* Twitter, February 18, 2022, <https://twitter.com/ASlavitt/status/1494824496359956480?s=20&t=SljQ3mGzmuMoXbOVUQTiMQ>

Implementing the Key to NYC program enabled dining, fitness, and entertainment and meeting venues to re-open and conduct business indoors more safely, particularly once patrons and staff were required to be fully vaccinated. The program has also motivated individuals to get vaccinated who would not have done so otherwise. I have heard from many constituents, older adults in particular, who were happy to dine out again once the Key to NYC program was implemented because they felt safe.

In addition to the benefits of establishing the Key to NYC program, I would like to highlight a number of important arguments for why the program's vaccination requirement should not be lifted under the current circumstances:

- Getting vaccinated is the best protection against severe illness from COVID-19 and helps to reduce transmission. If the Key to NYC program is lifted, this layer of protection in establishments that are higher risk for transmission will be eliminated.
- After the CDC released updated mask recommendations on February 25, the President of the American Medical Association (AMA) issued a statement, strongly encouraging everyone to continue masking indoors: https://www.ama-assn.org/press-center/press-releases/ama-statement-cdc-covid-19-updates?utm_medium=Social_AMA&utm_campaign=amaone_shared_articles&utm_source=twitter&s=03
- Lifting the vaccination requirement will be counterproductive to the goal of promoting economic recovery while protecting public health. Lifting the vaccination requirement may actually encourage more unvaccinated people to come to New York City, thereby increasing community transmission and prolonging the pandemic.
- Unvaccinated and immunocompromised people, as well as older adults are at greater risk for severe illness and need to be protected. Children under the age of 5 will not be approved to get vaccinated for at least several months. Minors are unable to get vaccinated without parental consent.
- It is likely that the Key to NYC vaccination requirement would need to be reinstated to help keep dining, entertainment, and fitness establishments in business while managing future surges. Reinstating the Key to NYC program would be all the more difficult due to increased frustration with changing policies.
- Lifting the vaccination requirement for indoor dining will increase the risk to low-wage servers and staff. As we know, restaurants are already facing severe staffing shortages.
- Many people feel safe enough to dine, exercise, or attend events indoors because of the vaccination requirement. Some people decide to visit New York City, as the Key to NYC program allows them to attend the theatre and dine, etc. in a safer environment. If the requirement is lifted, this could harm tourism and hurt businesses.
- As we have witnessed, when community transmission increases, members of multi-resident households are at greater risk of transmitting the virus to each other.
- Our health care workers and hospital systems have been extremely stretched for more than two years and there is a staffing shortage. Our health care systems cannot continue to endure this burden.

Key to NYC provides an important layer of protection at a time when new variants have been mutating every several months. While the existing vaccinations have proven remarkably effective at preventing severe illness and death, particularly for people who have received booster doses, the vaccines do not stop all disease transmission and we do not know how much protection they will provide against future variants. Based on the current status of the pandemic, it would be premature to lift the vaccination requirement at this time. I strongly encourage continuing the Key to NYC vaccination requirement until appropriate metrics are met. Such metrics could include transition out of the pandemic; achieving an 85-90% vaccination rate of all New York City residents, including children under the age of 5; and/or surges decreasing in severity such that our health care systems and testing infrastructure are not on the brink of collapse when case rates spike.

I must also express strong opposition to lifting the masking requirement for all students and staff in New York City public schools. While case and hospitalization rates have decreased dramatically since the recent Omicron surge, the experiences of the last two years indicate we are likely to face another surge in a matter of months. Now is the time to focus on maintaining low community transmission and strengthening our public health infrastructure to be better prepared for future surges.

Even though the CDC and New York State have announced changes to masking requirements in schools, it is premature to lift school mask requirements in all New York City public schools. The following considerations demonstrate the need for a more measured policy:

- Wearing a mask is an essential public health safety measure to help prevent students, school staff, and their households from contracting the Coronavirus, becoming hospitalized, and even dying. Despite accusations to the contrary, research has shown that mask wearing is an effective mitigation strategy in schools.⁴
- The high transmissibility and severity of COVID-19 has required use of a layered approach, including mask wearing, to protect public health because no one safety measure provides 100% protection.⁵ COVID-19 vaccinations, masking, and testing, as well as other essential safety measures are all part of the layered approach.
- Removing the mask requirement fails to take into account enormous disparities in school vaccination rates, concerning environmental conditions in schools, school staffing shortages, and other aggravating factors. School masking requirements must be flexible and responsive to these conditions.
- Lifting masking requirements in all public schools will be unsafe due to low vaccination rates of children age 5-12 and the enormous disparities in school vaccination rates.⁶ The vaccination rate of New York City public schools ranges from a low of 12% of students who have received their first dose and 9.9% who are fully vaccinated to a high of 93.8% of students who have

⁴ Jehn, Megan, PhD et al. (2021): Association Between K-12 School Mask Policies and School-Associated COVID-19 Outbreaks – Maricopa and Pima Counties, Arizona, July-August 2021, CDC, accessed online at: <https://www.cdc.gov/mmwr/volumes/70/wr/mm7039e1.htm>; Varma, Jay K., MD et al. (2021): COVID-19 Infections Among Students and Staff in New York City Public Schools, Pediatrics, accessed online at: <https://publications.aap.org/pediatrics/article/147/5/e2021050605/180780/COVID-19-Infections-Among-Students-and-Staff-in>

⁵ McKay, Ian M. *The Swiss Cheese Respiratory Virus Pandemic Defence – recognizing that no single intervention is perfect at preventing spread*, figshare, posted June 9, 2021: https://figshare.com/articles/figure/The_Swiss_Cheese_Respiratory_Virus_Defence/13082618?file=30665237

⁶ NYC DOHMH COVID-19 Data webpage, *Vaccines – Vaccinations by Demographic Group*, accessed online February 28, 2022 at: <https://www1.nyc.gov/site/doh/covid/covid-19-data-vaccines.page>

received their first dose and 92.7% who are fully vaccinated;⁷ and children below the age of 5 are not yet eligible to be vaccinated. Lifting the mask requirement in all public schools will create additional burdens and inequities where vaccination rates are lower, particularly for unvaccinated and immunocompromised students, staff, and those with whom they interact. Mask wearing in many schools continues to be pertinent and necessary

- Many public schools with the lowest vaccination rates are also the most overcrowded, have poor ventilation, and are in communities with higher COVID-19 infection rates.⁸ Masking provides additional protection for our children, including those who are not yet eligible to get vaccinated.
- The benefits of masking cannot be supplanted with testing. Wearing a mask helps to prevent transmission, while the function of testing is to diagnose, provide surveillance, and interrupt the chain of transmission. School safety measures should include robust testing and mask wearing, along with other proven safety measures as appropriate.

Masking in schools is a core safety measure that has proven effective in helping to prevent community transmission. Instead of removing the mask requirement, it would be much more prudent to establish metrics as an indicator of when it is reasonable for a school to remove masking requirements. Metrics could include, for example, a minimum school vaccination rate of 70-80%, and a maximum community or city positivity rate of 3% or 7-day average case rate of 10 per 100K individuals.

In summary, this is the time to focus on maintaining low community transmission levels, as well as on planning and preparing for the next phase of the pandemic, while implementing measured policies to safely relax mask-wearing and vaccination requirements.⁹ The well-being of our health care workers, capacity of our hospital systems, and financial health of our city depend on our ability to prevent or minimize the rise of the next surge. We will not accomplish this if we relax too many layers of our protection too quickly. Policy decisions must follow the science, be responsive to the unique characteristics of New York City, and protect vulnerable New Yorkers. I strongly urge you to adopt the above-mentioned policy suggestions.

Thank you for your consideration of the policy considerations and requests detailed in this letter. I look forward to hearing your response. If you have any questions, please feel free to contact me, or contact Dawn Gresham in my office at 212-490-9535 or gresham@nysenate.gov.

Thank you,



Liz Krueger
New York State Senator

⁷ Veiga, Christina, Zimmerman, Alex, and Wilburn, Thomas (2022): *52% of NYC Public School Students Are Fully Vaccinated. Check Your School's Rate Here*, Chalkbeat New York, accessed online at:

<https://ny.chalkbeat.org/2022/2/25/22951526/nyc-vaccination-rate-lookup>

⁸ Blackstock, Uche, MD [@uche_blackstock]. There are wide inequities in vaccine uptake by schools and communities across NYC. There are schools with vaccine uptake only in the high 30s%. These are the same schools that are overcrowded and without adequate ventilation. Removing mask policies in these schools is dangerous. Twitter, February 27, 2022, https://twitter.com/uche_blackstock/status/1498072984409587714

⁹ See, for example: California State Government webpage, *SMARTER Plan*, accessed online at: <https://covid19.ca.gov/smarter/>

cc:

Dr. Dave A. Chokshi, Commissioner of Health, New York City Department of Health and Mental Hygiene

Anne Williams-Isom, Deputy Mayor for Health and Human Services

New York City Council Speaker Adrienne E. Adams

Council Member Lynn Schulman, Chair, New York City Council Committee on Health

Jumaane D. Williams, New York City Public Advocate