



**ASSEMBLY STANDING COMMITTEE ON HEALTH
ASSEMBLY STANDING COMMITTEE ON HIGHER EDUCATION
ASSEMBLY STANDING COMMITTEE ON LABOR**

NOTICE OF PUBLIC HEARING

SUBJECT: The impact of COVID19 on the delivery of health care and the health care workforce.

PURPOSE: The purpose of this hearing is to examine how the COVID19 pandemic has changed the delivery of health care and its impact on the health care workforce.

New York City
250 Broadway, 19th Floor Hearing Room
November 17, 2021, 10:00 a.m.

ORAL TESTIMONY BY INVITATION ONLY

The COVID19 pandemic has changed the delivery of health care services and demonstrated the critical need for a workforce that is sufficiently sized and well-trained. According to the CDC, the utilization of telehealth visits increased at the peak of the pandemic, in order to facilitate access to care and reduce the risk of transmission of COVID19. Additionally, the New York Times, and many other media outlets, have reported that the pandemic has exacerbated existing shortages of nurses and other health care staff. The Committees would like to assess the lessons learned during the pandemic, including the appropriateness of Executive Orders issued by the Governor during the declared emergency period as it relates to access to health care and training requirements of health care workers. Furthermore, the Committees would like to examine the status of the health care workforce, including rates of attrition, worker wellness, training and development programs, and the effect of telehealth on access to care for patients and providers.

Persons invited to present pertinent testimony to the Committees at the above hearing should complete and return the enclosed reply form no later than November 12th, 2021. It is important that the reply form be fully completed and returned so that persons may be notified of means by which to testify and/or in the event of emergency postponement or cancellation.

Oral testimony will be limited to 5 minutes' duration. In preparing the order of witnesses, the Committees will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to Committee staff as early as possible.

Ten copies of prepared testimony should be submitted at the hearing registration desk and a copy of prepared statements should be emailed in advance of the hearing to Janice Nieves at nievesj@nyassembly.gov.

Attendees and participants at any legislative public hearing should be aware that these proceedings are video recorded. Their likenesses may be included in any video coverage shown on television or the internet.

In order to further publicize these hearings, please inform interested parties and organizations of the Committees' interest in hearing testimony from all sources.

In order to meet the needs of those who may have a disability, the Assembly, in accordance with its policy of non-discrimination on the basis of disability, as well as the 1990 Americans with Disabilities Act (ADA), has made its facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Assembly facilities and activities.

Richard N. Gottfried
Member of Assembly
Chair
Committee on Health

Deborah J. Glick
Member of Assembly
Chair
Committee on Higher Education

Latoya Joyner
Member of Assembly
Chair
Committee on Labor

PUBLIC HEARING REPLY FORM

Testimony will only be taken upon approval by the Committee Chairs. Individuals who have been invited to present testimony are requested to complete this reply form by November 12th, 2021 and email a copy of planned testimony. Individuals invited to participate will be notified within 48 hours of the hearing. All replies and testimony submissions must be emailed to:

Janice Nieves
Associate Counsel
Assembly Committee on Health
Email: nievesj@nyassembly.gov
Phone: (518) 455-4371

I have been invited to make a public statement at the hearing. My statement will be limited to 5 minutes, and I will answer any questions which may arise.

I will address my remarks to the following subjects:

I do not plan to attend the above hearing.

I would like to be added to the Committee mailing list for notices and reports.

I would like to be removed from the Committee mailing list.

I will require assistance and/or handicapped accessibility information. **Please specify the type of assistance required:** _____

ALL INFORMATION BELOW MUST BE COMPLETED:

NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

E-MAIL: _____

TELEPHONE: _____