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RMS End of Week Update 11/20/2026



NYS Senate Democratic Conference Reelects Majority Leader and Names New Deputy Majority Leader Senator José Serrano

Earlier this week the NYS Senate Democratic Conference voted to re-elect Senator Andrea Stewart-Cousins to serve as Senate Majority Leader and President Pro Tempore for the 2027-28 legislative session. Senator José M. Serrano was appointed to serve as Deputy Majority Leader. According to the press release for over two decades, Senator Serrano has fought for working families and to strengthen communities across New York State through his work on affordable housing, public education, arts and culture, and environmental justice.

"I am deeply honored and privileged to be re-elected as Majority Leader and President Pro Tempore by my Democratic Senate colleagues. I look forward to building on the

work of this conference entering the new legislative year," Senate Majority Leader Andrea Stewart-Cousins said. "I am also proud to announce that Senator José M. Serrano will serve as our next Deputy Majority Leader. Senator Serrano has been an exceptional Conference Chair, a trusted colleague, and a respected voice within our conference. He brings invaluable experience, sound judgment, and an unwavering commitment to public service. I have tremendous confidence in his leadership and know he will be an outstanding Deputy Leader."

"I am deeply honored to serve as Deputy Majority Leader of the New York State Senate. I want to thank Majority Leader Andrea Stewart-Cousins for her confidence in me and for the opportunity to help lead our historic Democratic supermajority," said Senate Deputy Majority Leader José M. Serrano. "I also want to recognize Senator Michael Gianaris for his years of dedicated service and leadership in this role. His contributions have been instrumental in building the Democratic Majority we have today. Since joining the State Senate in 2005, I have witnessed the growth and evolution of our conference.

As the first Puerto Rican to serve as Deputy Majority Leader, I recognize the significance of this moment and the responsibility that comes with it. I am proud of how far we have come and excited about what lies ahead. With this historic supermajority comes both an incredible opportunity and a tremendous responsibility to deliver for New Yorkers. We must continue working to make our state more affordable, expand opportunity, and fight for fairness and equality for all. I look forward to working alongside the Majority Leader and my colleagues to strengthen our conference, support our members, and deliver meaningful results for the communities we represent. There is much work ahead, and I look forward to returning to Albany in January to get started."

POLITICO Pro Q&A: New state Senate Deputy Majority Leader Jose Serrano

Senate Majority Leader Andrea Stewart-Cousins has picked José Serrano as her new deputy. It's the first of what could be several big shifts for a Democratic conference that has been remarkably stable since the party won a majority in 2019. The role of top lieutenant had been held by Sen. Mike Gianaris — who resigned in August — since 2012.

The majority's deputy has historically been the top adviser to the leader. They play a key role in setting the chamber's agenda, both by serving as the acting chair of the Rules Committee and the less formal Working Rules group. They then manage debate when bills get to the floor.

And the deputies have been the de facto town criers of the Senate, sharing details of conference decisions and the state of negotiations with the press. They've thus often been the most widely quoted and visible state legislator.

That will be a change for the 54-year-old Serrano. His highest-ranking job in recent years has been serving as chair of the majority conference, a more backroom position. Since coming to Albany from the New York City Council in 2005, he's also been the top Democrat on the Cultural Affairs, Tourism, Parks and Recreation Committee — not a body that regularly deals with bills that command front-page headlines.

Here's what Serrano — the son of former Rep. Jose Serrano — says about his plans for the new role:

We know that Gianaris' expansive portfolio has been split up — Sen. Shelley Mayer succeeded him as chair of the Democratic Senate Campaign Committee. Do you imagine playing a similar role to him on the government side of things?
Sen. Gianaris did an amazing job as our deputy and was extremely instrumental in getting us to this supermajority that we're enjoying today.

I envision a position as deputy where I remain a strong advocate for the policies of our conference and the issues that affect people across the state of New York, to help our leader manage this really broad coalition of members that we have now.

This is my second day. It's going to be something that I learn as I do it. But also leaning on my 25 years of experience as an elected official. But I feel so energized for this new role and looking forward to all the twists and turns that come with it.

But do you envision a similar portfolio — managing the floor debate, running the Rules Committee, and the like?
The leader will make those decisions. She's still formulating how everything will work. There are many changes coming into the upcoming session, so it's hard to know exactly what will happen.

What do you think the Senate will be focused on in 2027?
Affordability is across the board — it is one of the more universal issues that we are dealing with in every corner of New York state and it's on multiple different levels. That is going to be something that we're all keyed in on very closely, and trying to find ways to improve the lives of New Yorkers in that regard.

I represent the South Bronx and East Harlem. I and many of my colleagues across the state care deeply about environmental justice.

One of the things that I've been very passionate about over the years is the transformative nature of arts and culture across New York state. We've seen more of an emphasis in recent years of the arts as a viable economic engine in different parts of New York.

Historically New York City has been the focal point, but we're seeing it in other parts of the state.

As somebody who was in the Senate during the bad old days for Democrats — when the conference was stuck in a perpetual minority and repeatedly besieged with scandal — how different will it be to have a 48-15 majority?
It's amazing how far we've come and the evolution of our conference, particularly under the leadership of Andrea Stewart-Cousins. We have a more cohesive unified conference, and I'm grateful to be a part of that. She views me as a leader and as someone who can help bring this conference along, and she's always valued my approach, my temperament and my work ethic.

When you have a leader like Andrea Stewart-Cousins, it's easy to not be surprised at success because of her approach and her steady hand. Forty-eight [Democrats] is definitely not what I envisioned, but I'm so happy that it happened.

You're now only the second Latino to ever have one of the highest-ranking posts in the state Legislature [Former Sen. Pedro Espada briefly forced himself into the top job as a result of the 2009 coup]. Was that on your mind as you were told you got the position?
I think [Stewart-Cousins] understands the importance, and I feel so gratified and so honored to help that and Latino communities all across New York state. We are a very important and vibrant part of New York, and I take this role very seriously. I also think about my community in East Harlem and the Bronx, where we have historically been the center of the Puerto Rican diaspora.

To view the full article please click here.

New York Delays New Medicaid Work Requirements Until July
This week Governor Hochul took action to protect eligible Medicaid members from losing their health coverage as the federal government implements new Medicaid community engagement requirements under H.R.1 (also called "work requirements"). By electing to participate in the federal hold harmless period, New York will have an additional six months to ensure that nearly 2 million eligible New Yorkers will not lose Medicaid coverage due to the new, burdensome federal work requirements.

"President Trump and Washington Republicans created this crisis by pushing through devastating Medicaid cuts and imposing burdensome new requirements that threaten coverage of nearly 2 million eligible New Yorkers. Their actions put families, seniors and vulnerable New Yorkers at risk of losing access to the care they depend on," Governor Hochul said. "We won't let Washington's red tape stand in the way of people getting the health care they need and deserve. Today, we're taking action to protect coverage, give eligible New Yorkers more time and invest in the resources they need to stay insured. I

will continue using every tool available to fight these harmful federal cuts and protect New Yorkers' access to health care."
State Health Commissioner Dr. James McDonald said, "Medicaid provides essential health coverage to millions of New Yorkers. We are working to make sure our systems are ready and that members have access to the information and help they need during federal changes."

State Medicaid Director Amir Bassiri said, "Our primary mission is to ensure that administrative changes do not become barriers to health care. By utilizing this hold harmless period, we are giving our members, providers, and systems the critical time needed to adapt without risking coverage. We are fully committed to ensuring that every eligible New Yorker maintains access to the high-quality care they deserve."

New York will opt into a federal hold harmless period through June 30, 2027, in which Medicaid members will not lose coverage for failing to meet the new Medicaid work requirements that begin January 1, 2027. Under the Governor's leadership, New York State's decision to participate in the program will give the State additional time to test new systems; educate members, providers, and stakeholders; and refine processes and mitigation strategies to help avoid coverage disruptions when the hold harmless period ends.

The Governor has also directed the New York State Department of Health to submit a formal request to the Centers for Medicare and Medicaid Services (CMS) seeking a temporary exemption from the work requirements for all Bronx residents related to economic hardship. If approved, Bronx residents would not have to meet the new requirements while the exemption remains in place. Under H.R.1, Medicaid members are exempt from work and community engagement requirements if they reside in a county with a high unemployment rate. The Bronx is currently the only county in New York that meets that standard, but the State will continue to monitor all county rates and pursue additional exemptions as appropriate.

In addition, the State is releasing the first round of new 5-year contracts for the Navigator program, a key component of the State's overall H.R.1 mitigation strategy to ensure that all Medicaid members have access to free, comprehensive enrollment assistance from people in their communities. Total funding for this program is $213 million.

The first round of awards will include $32 million annually for 49 community-based organizations and 22 subcontractor navigators and trained enrollment assistors, who help residents sign up for coverage, complete paperwork, and understand their benefits. The Governor is also announcing an additional $10.6 million annual investment to provide a second round of Navigator awards in early 2027. This additional funding will enable awards for all successful applicants, supporting an additional 10 lead agencies and 28 subcontractors -- bringing the total navigator program investment to $42.6 million

annually. This expansion adds to New York's already robust statewide assistor program, which boasts more than 9,000 assistors, including navigators, certified application counselors, and brokers.

Navigators are trusted community resources who can help individuals apply for coverage through the NY State of Health marketplace. Their role is more important than ever with the implementation of federal H.R.1 community engagement requirements starting in January 2027. Investing additional funds at this time allows the State to demonstrate its commitment to ensuring eligible members have every tool at their disposal to remain enrolled in Medicaid.

In addition, the Department of Health has been investing heavily in infrastructure and other support to prepare for the complexities of implementing work requirements. This includes investments in IT system enhancements, a consumer-friendly income verification tool, awareness campaigns, and staffing to limit the impact of work requirements on New Yorkers.

The State has also launched multi-agency workgroups to ensure that perspectives across the health and behavioral health care delivery system are represented in planning for work requirements, alignment across State entities, and maximization of outreach efforts to protect our most vulnerable New Yorkers from losing coverage. The workgroups are comprised of representatives from the New York State Department of Health, the Office of Addiction Services and Supports (OASAS), the Office of Temporary and Disability Assistance (OTDA), the Office of Mental Health (OMH), and the Office for People with Developmental Disabilities (OPWDD). Additionally, the State has been engaging local governments, local social service districts, providers, community organizations, and Medicaid members across New York to support outreach and implementation.

New York State is committed to ensuring that residents remain covered and have access to the resources they need and deserve. Certified enrollment assistors are available throughout the state. Consumers can find free, personalized help from an assistor or certified broker in their area using the Find Local Help directory.

Consumers can also compare coverage options, apply or renew their coverage by visiting nystateofhealth.ny.gov or calling the Customer Service Center at 1-855-355-5777 (TTY: 1-800-662-1220). For more information on work requirements, consumers can visit New York's Stay Covered page, which has information on the H.R.1 changes to Medicaid coverage.

Consumers should keep their mailing address, phone number, and email address current and carefully review notices from NY State of Health, so they understand any changes affecting their coverage.

To view the full press release please click here.

NYS DOB Issues The FY 2028 Quick Start Budget Report

On October 30, 2026, the Division of the Budget (DOB) issued its Mid-Year Financial Plan, which updated the State's official financial projections for the current fiscal year, the upcoming budget year, and two subsequent outyears. The report linked below serves as the basis for discussions among the participants and the public.

In early November, the Senate Majority, Assembly Majority, Senate Minority, Assembly Minority, and the State Comptroller each submitted "Quick Start" reports. The Director of the Budget and fiscal staff from the Senate Majority, Assembly Majority, Senate Minority, Assembly Minority, and the Office of the State Comptroller met publicly on November 9, 2026, to review and discuss their individual forecasts. Although differences exist among the respective estimates, representatives of all parties agreed that the nation's economic situation has been better than originally forecast at the time of the Enacted Budget. Real GDP, wages, and personal income are growing above expectations.

However, employment growth for the U.S. and the State is slowing. Economic growth is expected to continue in CY 2027 at a rate slightly slower than that experienced in 2026. The labor market is projected to hold steady in CY 2027, and a recession is likely to be avoided.

To view the full report please click here.

Governor Hochul Announces New Rural Health Transformation Initiatives to Expand Primary Care and Strengthen Cybersecurity

This week Governor Hochul announced new investments under New York State's Rural Health Transformation Program to expand technology-enhanced primary care and strengthen technology and cybersecurity infrastructure for rural health care providers. The investments are part of more than $212 million New York received for the first year of the federal Rural Health Transformation Program, a $50 billion initiative administered by the Centers for Medicare & Medicaid Services and running from federal fiscal year 2026 through 2030.

"Every New Yorker deserves access to high-quality health care, no matter where they live," Governor Hochul said. "These investments will help rural providers deliver more coordinated care close to home, use technology to connect patients with specialists and services and strengthen critical health care systems against cyber threats."

State Health Commissioner Dr. James McDonald said, "Rural providers face unique challenges, including workforce shortages, geographic barriers and limited resources to make major investments in technology and infrastructure. By strengthening primary care,

expanding access to technology and improving cybersecurity resilience, we are helping rural health care providers build stronger, more sustainable systems of care."

Expanding Technology-Enhanced Primary Care
New York is investing $30 million through the Strengthening Rural Communities with Technology-Enhanced Primary Care initiative to improve rural patients' access to and utilization of high-quality primary care.

The initiative will help rural primary-care practices adopt and strengthen the Patient-Centered Medical Home model, incorporating artificial intelligence and other technology to support care delivery, quality and operational efficiency.

A primary-care practice designated as a New York State Patient-Centered Medical Home by the National Committee for Quality Assurance focuses on team-based care, patient-centered access and continuity of care, care management, coordination among providers and continuous quality improvement.

Under this model, a patient's primary-care team serves as a central hub for coordinating care across specialists, hospitals, behavioral health providers and other services. Technology can help rural providers identify patient needs, coordinate care and connect patients with services that may not be readily available locally.

Expanding Technology and Strengthening Cybersecurity
New York is also investing over $79 million through the Investments in Technology Innovation and Cybersecurity Enhancements for Rural New York initiative.

The initiative will:

- Expand access to health care through telehealth;
- Improve patient outcomes through eConsult partnerships that connect providers with specialty expertise;
- Increase usable health information alerts in rural counties; and
- Strengthen cybersecurity protections for rural health care facilities.

These investments will help rural providers use technology to overcome geographic barriers to care while strengthening the infrastructure needed to safely deliver health care. Specialized Partners will help put investments into practice; The New York State Department of Health is engaging three organizations with specialized expertise to support implementation of the Rural Health Transformation Program and work directly with participating rural health care providers.

Primary Care Development Corporation (PCDC) will support the Strengthening Rural Communities with Technology-Enhanced Primary Care initiative, working with rural primary-care practices to achieve the New York State Patient-Centered Medical Home

model recognition and support practices participating in the model. This work will include helping practices improve team-based care, patient access, care management and coordination, quality improvement and the use of technology and data to support more efficient and sustainable primary care. Funding is also available to help rural practices make site updates that will help members with disabilities access care.

Public Consulting Group (PCG) will provide program implementation, coordination and stakeholder engagement support, helping the Department work across rural health care providers, community organizations, program participants and other partners. PCG will support coordinated implementation of Rural Health Transformation activities, outreach and engagement, and efforts to ensure providers have the information and support needed to participate successfully in the program.

Accenture LLP will support efforts to strengthen cybersecurity resilience among eligible rural health facilities across New York's 47 rural counties. The cybersecurity resilience initiative will provide cybersecurity assessments, access to cybersecurity training, incident-response support, threat intelligence, shared regional services and targeted improvements to help protect sensitive information, reduce operational risks and maintain reliable health care services for rural communities.

Together, the implementation partners will provide technical expertise and hands-on assistance to help rural providers turn New York's Rural Health Transformation investments into sustainable improvements in care delivery, technology, coordination and access.

The initiatives are part of New York's broader first-year Rural Health Transformation strategy, supported by more than $212 million in federal funding.

Find more information about New York State's Rural Health Transformation Program please click here.

To view the full press release please click here.

The Centers For Medicare & Medicaid Services (CMS) Issued A Proposed Rule The Comprehensive Regulations to Uncover Suspicious Healthcare (CRUSH)

The Centers for Medicare & Medicaid Services (CMS) issued a proposed rule that according to their press release could save taxpayers nearly $90 billion over the next 10 years and would strengthen program integrity (PI) oversight and the agency's ability to prevent, identify, and address fraud, waste, and abuse across Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and the Health Insurance Marketplace. The details of the information in the press release are below.

The Comprehensive Regulations to Uncover Suspicious Healthcare (CRUSH) proposed rule is a standalone, discretionary rule that proposes changes to strengthen program integrity by enhancing provider screening and enrollment safeguards, requiring prompt self-reporting and return of identified fee-for-service overpayments, improving managed-care program-integrity reporting to better oversee potential fraud and improper payments, increasing provider-ownership transparency and data reporting for oversight agencies, and intensifying scrutiny of deductions from Medicaid payments.

"President Trump directed us to stop fraud, waste, and abuse, and HHS is taking action to protect taxpayer dollars," said HHS Secretary Robert F. Kennedy, Jr. "CRUSH would give CMS stronger tools to block fraudulent payments, remove dishonest providers, and protect Americans from schemes that exploit their healthcare coverage. This proposal could save taxpayers nearly $90 billion over 10 years and preserve resources for the care Americans depend on."

"When President Trump called upon the federal government to crush fraud, waste, and abuse, CMS got right to work, using every tool at its disposal to achieve historic savings," said CMS Administrator Dr. Mehmet Oz. "CRUSH would build on those results by giving us stronger tools to prevent fraud, remove bad actors, and protect the Americans who rely on these programs. Whether criminals are billing Medicare for nonexistent canes and wheelchairs, fraudulently enrolling healthy seniors in Medicare-funded hospice care, or signing people up for Marketplace plans without their consent, the CRUSH proposed rule would give CMS stronger authority to stop these schemes and hold those responsible accountable. Every taxpayer dollar lost to fraud is a dollar that cannot support the care these programs were created to provide."

"For too long, the system has paid first and asked questions later, leaving us to chase stolen dollars after they're gone. CRUSH changes that. By confirming who actually owns and operates the businesses billing our programs, and by closing the gaps bad actors exploit as they move between Medicare, Medicaid, and the Marketplace, we can stop fraud at the front door," said CMS Deputy Administrator and Chief Operating Officer Kim Brandt. "Behind every fraudulent claim is a real person: a senior whose identity was stolen, a family switched into a plan they never chose, a patient denied the care they were promised. That's who CRUSH is built to protect."

The CRUSH proposed rule builds on the Trump Administration's efforts to combat healthcare fraud that have already resulted in historic savings to Medicare and Medicaid.

Medicare: Targeting Billions in Overpayments

CMS' efforts to prevent, identify, and address Medicare fraud, waste, and abuse have produced record program integrity savings, which increased 59% from $26.3 billion in fiscal year (FY) 2024 to a record $41.9 billion in FY 2025. The FY 2025 Medicare program integrity return on investment (ROI) reached $22.30 for every dollar invested,

the highest ROI ever, a 53% increase from the previous ROI of $14.60. The CRUSH proposed rule would build on that progress by strengthening oversight across Medicare, including Medicare Advantage (MA) and Part D plan sponsors.

Major Medicare provisions in the proposed rule include:

- Strengthening MA Risk Adjustment Data Validation audits to identify and recover improper payments when beneficiary diagnosis data, submitted to CMS by MA organizations for the purpose of receiving risk adjusted payments, is not supported by medical record documentation and found to have improperly inflated beneficiary risk scores.
- Requiring MA organizations and Part D plan sponsors to report all suspicious or substantiated fraud, waste, and abuse to CMS to help the agency identify emerging schemes and act on potential threats.
- Giving CMS stronger authority to deny or revoke Medicare enrollment for providers and suppliers whose owners' identities or locations cannot be confirmed or who pose an undue risk of fraud, waste, or abuse.
- Requiring providers to report all changes to enrollment information within 30 calendar days.
- Requiring certain MA plan providers and suppliers to enroll in Original Medicare, allowing CMS to verify their credentials and screen for risks before granting access to Medicare payments.
- Strengthening protections for seniors against unsolicited texts, social media messages, emails without an opt-out, and door-to-door visits from medical supply companies and their agents.

Medicaid and CHIP: Strengthening State-Federal Fraud Fighting

CMS works closely with states to prevent and detect fraud, waste, and abuse in Medicaid and CHIP. The CRUSH proposed rule would strengthen those efforts and improve collaboration between state and federal authorities.

Key Medicaid/CHIP fraud prevention reforms in the proposed rule include:

- Allowing states to determine that a credible allegation of fraud exists based on a determination made by CMS or another federal agency to support coordinated action against suspected schemes.
- Expanding state fraud and abuse reporting to include additional data elements, such as a provider's National Provider Identifier (NPI) and address.
- Requiring states to collect and use NPIs for all eligible Medicaid and CHIP providers at the individual level to close gaps in provider oversight.
- Strengthening beneficiary eligibility oversight and the recovery of overpayments, including stronger state program integrity corrective action plan requirements to address identified weaknesses.
- Adding grounds to deny or terminate Medicaid/CHIP provider enrollment that align with those in Medicare, while expanding disclosure requirements for

owning and managing parties, and requiring more robust monthly state reporting of denials and terminations.

Marketplace: Holding Bad Actors Accountable

The CRUSH proposed rule would strengthen CMS' ability to protect consumers from unauthorized enrollments and coverage changes and restrict Marketplace access for agents, brokers, and web-brokers who put consumers and taxpayer dollars at risk. These reforms would reinforce accountability while supporting the legitimate work of agents and brokers who help Americans find coverage.

Provisions in the proposed rule targeting noncompliant or abusive agents, brokers, and web-brokers include:

- Restricting Marketplace access for agents, brokers, and web-brokers with certain felony convictions or current debarment or exclusion from any federally funded healthcare programs.
- Strengthening CMS' authority to suspend and terminate based on abusive conduct. Specifically, (1) allowing immediate suspension of an agent, broker, or web-broker's Exchange agreement(s) based on a credible allegation of abusive conduct likely to cause or causing harm to a consumer or the Exchange, and (2) authorizing termination on a preponderance of the evidence finding of abusive conduct.
- Clarifying CMS' authority to terminate an agent, broker, or web-broker's Exchange agreement(s) and impose other penalties if the agent, broker, or web-broker does not refute the identified noncompliance within 30 calendar days.
- Requiring agents, brokers, and web-brokers to implement and maintain reasonable safeguards to prevent access to Marketplace systems from locations outside the United States, including attempts to access Marketplace systems through virtual private networks that route traffic outside the United States.

CRUSH would advance the Trump Administration's commitment to making fraud prevention a core responsibility across federal healthcare programs. Building on stakeholder input and record program integrity results, the proposal would strengthen CMS' ability to intervene earlier, hold providers and plans accountable, and protect coverage and care for millions of Americans.

CMS encourages public comment on the proposed rule. Comments are due Jan. 19, 2027.

The proposed rule is available in the Federal Register at: https://public-inspection.federalregister.gov/2026-23461.pdf

View the proposed rule fact sheet at:

https://www.cms.gov/newsroom/fact-sheets/comprehensive-regulations-uncover-suspicious-healthcare-crush-proposed-rule-cms-6098-p.

Northeast Public Health Collaborative Response To The Loss Of U.S. Measles Elimination Status

The United States has lost its status as a nation that has eliminated measles following the Pan American Health Organization's (PAHO) Measles and Rubella Elimination Regional Monitoring and Re-Verification Commission announcement on November 17.

This represents a reversal of decades of public health work to eliminate measles in the United States.

- Measles is the most contagious infectious disease known to medical science.
- There is no specific treatment for measles.
- Measles is preventable by vaccination, and vaccination is the best means of protecting individuals and communities.
- Recent and ongoing measles outbreaks throughout the U.S. primarily affect areas with low vaccination coverage.
- Measles infection can result in serious acute illness, long-term health consequences or even death.
- Vaccination is important for the protection of individuals and for those around us who cannot receive vaccination, such as infants under six months of age and immunocompromised people.

In the decade before the first measles vaccine was introduced, measles sickened more than 500,000 and killed 400 to 500 people in the U.S. annually. Safe and effective vaccines enabled the U.S. to declare measles eliminated in 2000.

Widespread inaccurate information has contributed to declining vaccination rates and now a disease which should almost never occur is killing people once again.

The Northeast Public Health Collaborative (NEPHC) reaffirms its commitment to evidence-based immunization recommendations – which include vaccinations against measles (e.g. MMR, MMRV) – issued by the American Academy of Pediatrics and the American Academy of Family Physicians. We urge all who are eligible to be vaccinated according to these published schedules. The NEPHC will continue to coordinate regionally to ensure that public health is guided by science and that vaccines remain accessible and available. We also call upon all government and public health authorities to collaborate on a plan to once again achieve measles elimination status for the United States.

The Northeast Public Health Collaborative (NEPHC) is a voluntary coalition of 17 public health agencies working together to share expertise, improve coordination, enhance capacity, strengthen regional readiness and protect evidence-based public health in our

jurisdictions. The Collaborative does not necessarily speak on behalf of every member agency or state, and each member retains its own independent positions and authorities. More information on the Collaborative can be found at NortheastPublicHealth.org.

To view the full press release please click here.

Governor Hochul Announces Completion Of Comprehensive Advanced Nuclear Master Plan

Governor Kathy Hochul announced the completion of the Master Plan for Responsible Advanced Nuclear Development in New York (Advanced Nuclear Master Plan). Demonstrating New York's leadership role in the national effort to develop new nuclear energy, the Master Plan is a comprehensive statewide roadmap to achieve the Governor's Nuclear Reliability Backbone to create five gigawatts (GW) of new nuclear power. Co-authored by the New York State Energy Research Development Authority (NYSERDA) and the New York State Department of Public Service (DPS), and unveiled today at the State's third Nuclear Summit in Rochester, the master plan outlines coordinated state actions to support the safe and timely development and deployment of advanced nuclear power plants in upstate New York.

"Expanding emission-free, round-the-clock nuclear power is a cornerstone of my all-of-the-above approach to ensure we have enough energy to keep the lights on and costs down for New Yorkers," Governor Hochul said**.** "The completed Advanced Nuclear Master Plan can serve as a national model by pairing our ambitious target of five gigawatts of new nuclear generation with a comprehensive strategy to support thoughtful development and deployment of what will be the largest buildout the country has seen in more than three decades."

The master plan was developed in response to Governor Hochul's 2025 directive to establish a framework supporting advanced nuclear energy development in New York. Now, the master plan will help facilitate the development of the Nuclear Reliability Backbone, which Governor Hochul directed the creation of in her 2026 State of the State, that will add 5 gigawatts of new nuclear generation to the 3.4 gigawatts already in existence.

DPS also issued a White Paper with policy recommendations to help enable the commercial viability of advanced nuclear development, potential cost reductions and other considerations for advancing the Governor's Nuclear Reliability Backbone.

In addition, the New York Power Authority (NYPA) also continues to move forward to develop and construct at least one gigawatt of nuclear energy in Upstate New York. The 30-point Advanced Nuclear Master Plan supported by 12 studies and more than 1,000 pages of research and analysis identifies New York State actions to further assist with responsible advanced nuclear development. It provides detailed findings and

conclusions that address the interconnected requirements for deployment, including commercial viability, siting considerations, community partnerships, state regulatory processes, workforce readiness, and supply chain capacity.

The Master Plan identifies several areas of focus to support responsible advanced nuclear development, including:

- **Advance a policy framework to support deployment:** Enable State actions on cost reductions and project commercial viability.
- **Capitalize on investments:** Build on federal investments and opportunities such as Project Janus at Fort Drum.
- **Maximize New York's nuclear supply chain opportunities:** Establish a nuclear supplier readiness program, connect New York businesses with nuclear project opportunities, and develop a coordinated, longer-term state supply chain strategy.
- **Build the workforce for nuclear energy – starting with existing skills and resources:** Leverage existing workforce funding and programs, upskill experienced workers, and support transitions from adjacent sectors while aligning specialized training investments with deployment.
- **Identify potential sites and partner with communities to prepare for development:** Establish a process to identify interested host communities, evaluate suitable sites, including brownfields, and support early site characterization and evaluation.
- **Adapt state regulatory processes while maintaining uncompromising safety:** Review State regulatory processes, identify opportunities to better align requirements, and equip local governments with tools to prepare for potential development.

NYSERDA will host a public webinar on January 13, 2027 at 12:00 p.m. ET to provide an overview of the Advanced Nuclear Master Plan. Register for the webinar to join.

To view the full press release please click here.

Helpful Links and Resources
FY 2028 Quick Start Budget Report
NYS Assembly FY28 QuickStart
NYS Senate FY28 QuickStart
FY 2027 Enacted Budget Financial Plan
NYS Congressional Results
NYS Senate Results
NYS Assembly Results
Empire State Development Tariff Resource Guide
NYS COVID-19 Monitoring Dashboard

NYS COVID-19 Fatalities Tracker
Eliminating Distractions In Schools Resource
Center for Disease Control and Prevention
Department of Financial Services information and resources
New York COVID-19 Vaccine Information Page

Department of Health
https://coronavirus.health.ny.gov/home
COVID-19 Guidance for Medicaid Providers

Office of Mental Health
https://omh.ny.gov/omhweb/covid-19-resources.html

OPWDD
https://opwdd.ny.gov/coronavirus-guidance

State Education Department
http://www.op.nysed.gov/COVID-19.html

NYS Department of Labor
https://dol.ny.gov/