



December 23, 2021

**Test to Stay (TTS) Update**  
**Revised Updated Testing and Quarantine Supplemental Information**  
**to the “Interim NYSDOH Guidance for Classroom Instruction in P-12 Schools During the 2021-2022 Academic Year”**

The purpose of this document is to provide Local Health Departments (LHDs) with clarification on the new information regarding testing and quarantine, particularly Test to Stay (TTS).

Please note:

- LHDs are the entity responsible for deciding whether to adopt the practices in items I-III and they are under no obligation to do so.
- LHDs that choose to adopt listed practices **must**:
  - Ensure that schools remain current on their reporting of all COVID-19 test results—including all results of home testing (if permitted by the LHD, see Section VIII for more information)—to the New York State COVID-19 Report Card, in addition to their other reporting obligations under public health law;
  - Assess available local resources, especially related to testing availability and accessibility, prior to allowing the practice(s). Encourage schools to assess resources that can be used to support Test to Stay/Test Out of Quarantine. Resources provided by NYSDOH may be used to support “Test to Stay” and “Testing out of Quarantine” as described below. **Please note that testing related to the following practices is considered an allowable expense under the ELC School Reopening Funding counties previously received.**
  - Ensure the opportunity to participate is available to every school in the county. Adoption of the following practices I-III must be a county-level, not school/district-level, decision in order to guarantee consistency in local administration of quarantine and isolation review responsibilities under Public Health Law Article 21 and its related regulations. For example, LHDs may not permit a school that has access to independent funding for test kits to adopt “Test to Stay” while prohibiting another school with inadequate resources from doing so.
- Localities are encouraged to use existing Epidemiology and Laboratory Capacity (ELC) School Reopening funds to facilitate access to COVID-19 diagnostic testing, including antigen testing, to permit participation in school activities and prevent school absences after symptoms have resolved.
- The purpose of Items IV-VIII is to align the “Interim NYSDOH Guidance for Classroom Instruction in P-12 Schools During the 2021-2022 Academic Year” with updated CDC recommendations.
- Information on the type of tests that can be used to permit return to school after COVID-19 symptoms and additional information related to over-the-counter tests is provided below: see Section II and Section VIII.

NYSDOH will continue to provide updated information to LHDs throughout the school year.

## I. “Test to Stay” (TTS)

Under current [NYSDOH schools guidance](#), unvaccinated close contacts of people who test positive for COVID-19 should be excluded from school and quarantined. After careful review, CDC has released [two studies](#) showing the impact of TTS. With this new information, [NYSDOH supports TTS as a strategy that allows asymptomatic unvaccinated school-based close contacts \(e.g. students, teachers, school staff\) to avoid school exclusion \(but not other restrictions of quarantine\) by testing negative through serial testing using rapid NAAT or antigen tests during a seven-day period following exposure.](#)

Entities eligible to participate in TTS include all Pre-K through grade 12 schools (when the Pre-K is located in a school building that also serves older students: **not** Pre-Ks that only serve pre-kindergarten students). At this time CDC has not endorsed TTS for use in early childhood education (ECE) settings.

If LHDs choose to allow TTS, they must ensure schools/districts have a written policy that:

- a) The exposure must have occurred in the school setting and while both the person with COVID-19 (index patient) and exposed person were consistently and properly masked.
- b) The exposed person remains asymptomatic; if the exposed person who is allowed to remain in school through TTS develops symptoms, they must be immediately excluded from school per current school guidance.
- c) The exposed person is tested a minimum of three times during the seven-day period following exposure, **unless recognition of the exposure is delayed or weekends or school breaks intervene**. See possible testing regimens below.
- d) The seven-day period is measured in calendar days where the last date of exposure is considered day 0. The first test should be done as soon as possible after exposure is identified (i.e., the first day the student is in school after identified exposure). Therefore, possible testing regimens may include:

Minimum Testing Cadences		
Day of First Test	Day of Second Test	Day of Third Test
0	2 or 3	5, 6, or 7
1	3	5, 6, or 7
2	4	5, 6, or 7
3	5, 6, or 7	NA
4	5, 6, or 7	NA
5	6 or 7	NA
6	NA	NA
7	NA	NA

This table is intended to be a guide. Adjustments should be made to account for weekends and other non-school days, in which case a test should be conducted on the first school day back and continue thereafter according to the above. Schools/districts also have the option of conducting an additional test at their discretion (e.g. testing on day 7 if the previous test was conducted on day 5, or testing at days 0, 2, 4, and 6).

- e) Considers equity (i.e., families should not have to pay for testing, or if they do, then the inability to pay should not prevent a student from being eligible for TTS). NYS is making millions of tests available to counties at no charge.

- f) Includes actions to follow-up on transmission (e.g., contact tracing) in the event that an individual tests positive.
- g) The test must be conducted—and the results received—before the school day begins, and positive individuals excluded/isolated per existing procedures.
- h) If the test is done in an unmonitored setting (e.g. home using an over-the-counter, or OTC, rapid test), a mechanism must be in place to ensure the test is done correctly, on the correct person, and in accordance with the package insert (which may have an effect on the testing cadence). See Section VIII for more information on using OTC rapid tests.
- i) The exposed person who is allowed to remain in school through TTS must be quarantined outside of school instruction/academic periods (on weekends/holidays when the seven-day TTS period is still active, but no school test is required; after school/evenings; no community activities or extracurricular participation including clubs, sports, arts/performance activities, etc.). **Please note that people participating in TTS are allowed to continue to ride the school bus following all existing guidance, including required masking.**

LHDs can decide if TTS will be allowed in the county and the appropriate mode/process for notification of results to schools. Schools in a county in which the LHD has approved TTS can decide if they want to implement it in their school. However, it is the responsibility of both the LHD and the school district to ensure that this is not a resource-driven decision. All schools must have equal access to the resources needed to implement this.

## **II. COVID-19 Testing of Vaccinated and Unvaccinated Persons to Permit School Participation After COVID-like Symptoms**

Thus far during the 2021-2022 school year, NAAT tests were required to permit individuals to return to school after being excluded due to developing COVID-like symptoms. Understanding that the turnaround time for some laboratory-based NAATs has resulted in multiple-day exclusions from school for people with symptoms, NYSDOH has amended its guidance to allow all such persons (i.e., those who develop COVID-19 symptoms and have no known exposure to someone with COVID-19) to participate in school activities following a negative *NAAT or antigen* test result, regardless of vaccination status.

In addition to a negative NAAT or antigen test, symptomatic individuals must be well enough to participate in school, not have rhinorrhea (runny nose) or cough severe enough to make mask wear difficult or unhygienic, be fever-free for 24 hours without use of fever-reducing medication, and meet other school or district requirements to return to school after a non-COVID illness.

The following requirements remain in place:

1. There is no exemption to the antigen or NAAT testing requirement for symptomatic vaccinated people.
2. Individuals with symptoms that are attributable to pre-existing medical conditions (e.g., migraines, allergies) and are not new or worsening do not require school exclusion or testing.
3. If the healthcare provider makes a diagnosis of a confirmed non-COVID-19 acute illness (e.g., laboratory-confirmed influenza or strep-throat) AND COVID-19 is not suspected, then a note signed by the healthcare provider explaining the alternate diagnosis may be provided to allow a student, teacher, or staff member to participate in school without COVID-19 testing. Such individuals may participate in school according to the usual school and medical guidelines for the diagnosis.

LHDs are referred to the [recently-released algorithm](#) that addresses school attendance and requirements for children who have symptoms consistent with vaccine side effects shortly after receipt of the COVID vaccine. In many cases, those children may remain in school or return to school without testing. Please review the algorithm for details.

### **III. “Test Out of Quarantine”**

NYSDOH has received questions as to whether it is acceptable to allow people under quarantine to shorten their quarantine by receiving negative COVID-19 test results. If LHDs choose to allow this practice in their jurisdiction, it must align with [CDC recommendations](#), which are currently as follows (emphasis added): *When diagnostic testing resources are **sufficient and available**, then quarantine can end after Day 7 if a diagnostic specimen tests negative and if no symptoms were reported during daily monitoring. The specimen may be collected and tested within 48 hours before the time of planned quarantine discontinuation (e.g., in anticipation of testing delays), but quarantine cannot be discontinued earlier than after Day 7.*

### **IV. Exemption to weekly unvaccinated staff/teacher testing for recently recovered persons**

NYSDOH has received questions as to whether school staff/teachers who were diagnosed with and recovered from COVID-19 within the last 3 months were subject to the weekly testing requirement established in 10 NYCRR 2.62. They are not. Asymptomatic individuals exposed to COVID-19 who have been previously diagnosed with laboratory confirmed COVID-19, and have since recovered, are not required to retest and quarantine within 3 months after the date of symptom onset from the initial COVID-19 infection or date of first positive diagnostic test if asymptomatic during illness. Schools will have to keep track of when the three months is over, at which time the staff person should resume testing.

### **V. Mask Breaks in School**

The [emergency regulations under 10 NYCRR 2.60](#) and the [Commissioner's Determination on Indoor Face Masking Pursuant to 10 NYCRR 2.60](#) do not include the implementation of “mask breaks” in most indoor instructional settings. This is in accordance with CDC guidance recommending universal masking in schools to keep children in school and let them be closer together without risking close contact exposure and quarantines. We remind administrators that Section 4.c of the [INTERIM NYSDOH GUIDANCE FOR CLASSROOM INSTRUCTION IN P-12 SCHOOLS DURING THE 2021-2022 SCHOOL YEAR](#) contains straightforward situational exceptions to the general masking policy; members of the school community do not need to wear masks when eating, drinking, singing, or playing a wind instrument. When masks are removed for these purposes, individuals must be spaced six feet apart. This may mean that meals cannot be eaten in classrooms that have been arranged to accommodate shorter distances between students during instruction time, however students should not be excluded from in-person learning in order to meet a minimum distance requirement. Further, as guidance issued by the Department stated in September, “In general, people do not need to wear masks when they are outdoors (e.g., participating in outdoor play, recess, and physical education activities).” CDC recommends those who are not fully vaccinated wear a mask in crowded outdoor settings or during activities that involve sustained close contact with others.

Under these regulations, local health officials are given the duty and accompanying discretion as to how the requirements will be enforced.

## **VI. Quarantine for Vaccinated People**

Please note that, after the Department released the [INTERIM NYSDOH GUIDANCE FOR CLASSROOM INSTRUCTION IN P-12 SCHOOLS DURING THE 2021-2022 SCHOOL YEAR](#), the Centers for Disease Control and Prevention updated its recommendations for what vaccinated people should do after being exposed to someone with COVID-19. Accordingly, consistent with CDC guidance, all “close contacts” with someone with COVID-19 must quarantine unless they are fully vaccinated. People who are fully vaccinated do not need to quarantine after contact with someone who is suspected or confirmed to have COVID-19 unless they also present symptoms of possible infection; however, they should follow current CDC [recommendations](#) for what vaccinated people should do after exposure to COVID-19.

## **VII. Close Contact Exception Update**

Since the beginning of the school year, the Department has applied the “close contact exception” to indoor school settings as defined by CDC. Please note that, after the Department released the [INTERIM NYSDOH GUIDANCE FOR CLASSROOM INSTRUCTION IN P-12 SCHOOLS DURING THE 2021-2022 SCHOOLY YEAR](#), the CDC updated this exception to include both indoor classroom settings and certain outdoor settings. The Department continues to align with CDC’s updated exception. Specifically: in the P-12 indoor classroom setting or a structured outdoor setting where mask use can be observed (i.e., holding class outdoors with educator supervision), the CDC specifies that students who were within 3 to 6 feet of an infected student (laboratory-confirmed or a [clinically compatible illness](#)) where both students were engaged in consistent and correct use of well-fitting masks are not considered close contacts. This exception to the close contact definition does not apply to teachers, staff, or other adults in the indoor classroom or structured outdoor setting.

## **VIII. Use of Over-the-Counter Tests**

There are numerous [COVID-19 antigen tests that have received United States Food and Drug Administration \(FDA\) Emergency Use Authorization \(EUA\)](#), including over-the-counter (OTC) tests authorized for home or self-testing. The Department allows the use of such OTC tests for school purposes; however, schools or LHDs are empowered to impose prohibitions, restrictions, or conditions on their use based on a consideration of the benefits and drawbacks. Schools must follow [guidance issued by the Centers for Medicare & Medicaid Services](#) and guidance from LHDs with regard to use of OTC tests, including the possible imposition of stricter criteria for their use if allowed by the LHD.

The benefits of using OTC tests may include improved convenience, rapid turnaround times, and reduced barriers. Drawbacks may include lack of reporting to public health, inability to confirm the negative result was on a specimen collected from the symptomatic individual, and lack of an official test result (e.g., no printed result that can be provided as proof of eligibility to participate in school, no medical supervision, and no doctor’s note). If localities accept results from these OTC antigen tests for school purposes, they are responsible for determining what constitutes sufficient evidence of the result and advising the school community accordingly.

If OTC tests are used, schools/districts/LHDs must ensure that they are following instructions found on the package inserts for required serial testing (if applicable). Many brands of OTC tests include two tests, both of which should be used as instructed by the manufacturer for asymptomatic individuals. This information is important and may have an effect on the testing cadence selected by localities for TTS.