Pursuant to 10 NYCRR 2.62, I hereby issue the following determination, which includes findings of necessity, to support the testing requirements set forth below:

Findings of necessity:

The Centers for Disease Control and Prevention (CDC) has identified a concerning national trend of increasing circulation of the Delta COVID-19 variant, which is approximately twice as transmissible as the early SARS-CoV-2 strain. Since early July, cases have risen 10-fold, and 95 percent of sequenced recent positives in New York State were the Delta variant. There is now a new variant, Omicron, which is predicted to be at least as transmissible; the outlook with Omicron is unknown but concerning.

Certain settings and areas (i.e., healthcare, schools, and public places located in CDC-identified areas of substantial or high community transmission) pose increased challenges and urgency for controlling the spread of this disease because of the vulnerable populations served, the disproportionate percentage of individuals (i.e., young children) who are not yet eligible for the COVID-19 vaccination, and/or the substantial to high levels of community transmission. Regular COVID-19 testing enables the immediate identification of COVID-19-positive individuals, even if they are not symptomatic, so that they can isolate and prevent further transmission. Additionally, the reporting of positive COVID-19 test results to public health authorities facilitates the rapid initiation of contact tracing to ensure close contacts are quarantined, tested, and isolated as needed.

The CDC’s recommendation for testing, including its associated scientific justification, is available at: https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html#in-person.

Based on the foregoing findings of necessity, I hereby issue the following testing requirements:

Testing Requirement:

After careful review and consideration of the above referenced CDC recommendations for COVID-19 testing, effective immediately and for as long as this determination remains in effect, all P-12 schools are hereby required to implement testing consistent with the following:

1. Definitions and Application:
a. **Teachers and Staff.** This determination applies to all P-12 (public or non-public) school district faculty or staff, including all teachers, substitute teachers, student teachers, school administrators, paraprofessional staff, and support staff, including bus drivers. This determination also applies to contractors working in a P-12 school (public or non-public) or school district setting, including contracted bus drivers.

b. **P-12 schools.** This determination applies to P-12 elementary and secondary, public, charter, private, and state-operated schools, including residential schools and programs serving students with disabilities, as regulated by the NYS Education Department. It does not apply to institutions of higher education. It does not apply to “standalone” pre-kindergarten schools (that is, schools that only serve pre-kindergarten students and are not located in a building that also serves older students).

2. **Screening**

a. **Testing Requirement for teachers and staff:** P-12 schools are required to ensure teachers and staff, as outlined above, have testing performed for COVID-19 at least once per week when a school is in a geographic area identified by the CDC as having low, moderate, substantial, or high transmission rates. Teachers and staff may be permitted to opt-out of mandatory weekly screening testing if they provide documentation of being fully vaccinated against COVID-19, as set forth in 10 NYCRR 2.62. Teachers and staff who work at multiple schools do not need to receive multiple tests; they may use one weekly test result to demonstrate to any number of schools where they work that they have fulfilled this requirement.

b. **Offer screening testing for students (obtain parent or guardian consent for minors, and where otherwise required pursuant to school policy):** P-12 schools are required to offer screening testing to unvaccinated students on a weekly basis in geographic areas identified by the CDC as having moderate, substantial, or high transmission rates.

3. **Diagnostic testing**

a. Schools must have the capacity (either directly on-site or via referral) to provide diagnostic testing, for any students, teachers or staff, who regardless of vaccination status and community level of transmission per the CDC, are:
   i. Symptomatic; or
   ii. Asymptomatic following exposure to someone with COVID-19.

4. **Special Requirements for Testing People with New/Worsening COVID Symptoms**

a. All school students, teachers, and staff with new or worsening symptoms of COVID-19, regardless of vaccination status, must either (a) provide a negative COVID test result (antigen or nucleic acid amplification test), or (b) be excluded from school for a minimum of 10 calendar days from symptom onset, in order to participate in school activities. If student, teacher, or staff symptoms are improving AND they are fever-free for at least 24 hours without the use of fever reducing medicines, they may return to school with either a note from the healthcare provider indicating the test was negative OR a copy of the negative test result. Given the growing prevalence of breakthrough infections among vaccinated populations nationwide, there is no
recommended exemption for symptomatic vaccinated people.
b. Exceptions to the testing requirement set forth above include:
   i. Individuals with symptoms that are attributable to pre-existing medical conditions
      (e.g., migraines, allergies) and are not new or worsening do not require COVID
      testing; or
   ii. If the HCP provides a diagnosis of a known chronic condition with unchanged
       symptoms, or a confirmed acute illness (examples: laboratory-confirmed influenza,
       strep-throat) AND COVID-19 is not suspected, then a note signed by their HCP
       explaining the alternate diagnosis is required before a student, teacher or staff
       member is exempted from the testing requirement. Such individuals may
       participate in school activities according to the usual guidelines for that diagnosis.
   iii. 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 three (3) months from the recorded
       date of initial COVID19 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.

5. **Authorized tests**: Any testing—screening, diagnostic, and/or pooled testing—must be
   FDA or DOH authorized and be performed by a NYS approved laboratory to ensure all
   NYS regulatory and reporting requirements are met. Schools using a laboratory to
   perform screening or diagnostic testing need to ensure that the laboratory holds the
   appropriate NYS approvals to perform testing. Laboratories that perform high complexity
   NAAT are required to hold a clinical laboratory permit; to determine if a laboratory has a
   clinical laboratory permit, a search can be performed [here](#). Laboratories that perform
   waived, point of care testing are required to be registered as an LSL; to determine if a
   laboratory has an LSL, a search can be performed [here](#). Some laboratories that held
   temporary approval to perform COVID-19 testing will be allowed to continue testing; to
   determine if a temporarily approved laboratory can perform COVID-19 testing, contact
   Covid19rapidtest@health.ny.gov. If you cannot determine if the laboratory is approved,
   contact Covid19rapidtest@health.ny.gov.

   [Signature]

   Mary T. Bassett, M.D., M.P.H.
   Acting Commissioner of Health