

NYS COVID-Related Executive Orders of Interest to Long-Term/Post-Acute Care and Senior Services Providers

The Governor has issued a series of executive orders waiving and modifying dozens of health care regulations and laws and imposing new requirements. The executive orders are available [here](#). This document highlights the scope of practice expansions, professional licensure and registration modifications, regulatory waivers, family notification requirements, and other provisions of the executive orders, that are most pertinent to long-term/post-acute care and senior services providers. In addition to the waivers and modifications implemented via State executive order, additional waivers and modifications have been adopted through State and federal regulatory guidance and federal waivers.

Cross Continuum/General Interest

- **Recordkeeping:** Health care providers are relieved of recordkeeping requirements to the extent necessary for health care providers to perform tasks as may be necessary to respond to the COVID-19 outbreak, including maintenance of medical records that accurately reflect the evaluation and treatment of patients, or requirements to assign diagnostic codes or to create or maintain other records for billing purposes. Any person acting reasonably and in good faith shall be afforded absolute immunity from liability for any failure to comply with any recordkeeping requirement. In order to protect from liability any person acting reasonably and in good faith under this provision, requirements to maintain medical records under Subdivision 32 of Section 6530 of the Education Law, Paragraph (3) of Subdivision (a) of Section 29.2 of Title 8 of the NYCRR, and Sections 58-1.11, 405.10, and 415.22 of Title 10 of the NYCRR, or any other such laws or regulations are suspended or modified to the extent necessary for health care providers to perform tasks as may be necessary to respond to the COVID-19 outbreak. (EO 202.10)
- **Fair Hearing Appearances:** Suspends sections 358-4.3, 358-5.12 and 358-5.13 of Title 18 of the NYCRR, to the extent necessary to allow or require appearance by any parties to a fair hearing by written, telephonic, video or other electronic means. (EO 202.5)
- **Non-Patient Specific Orders:** Modifies subdivision 4 of section 6909 of the Education Law, subdivision 6 of section 6527 of the Education Law, and section 64.7 of Title 8 of the NYCRR, to the extent necessary to permit physicians and certified nurse practitioners to issue a non-patient specific regimen to nurses or any such other persons authorized by law or by this executive order to collect throat or nasopharyngeal swab specimens from individuals suspected of suffering from a COVID-19 infection, for purposes of testing, or to perform such other tasks as may be necessary to provide care for individuals diagnosed or suspected of suffering from a COVID-19 infection. (EO 202.1)
- **Dispensing Hydroxychloroquine or Chloroquine:** No pharmacist shall dispense hydroxychloroquine or chloroquine except when written: as prescribed for an FDA-approved indication; for an indication supported by one or more citations included or approved for inclusion in the compendia specified in 42 U.S.C. 1396r-8(g)(1)(B)(i); for patients in inpatient settings and acute

settings; for residents in a subacute part of a skilled nursing facility; or as part of a study approved by an Institutional Review Board. Any person authorized to prescribe such medications shall denote on the prescription the condition for which the prescription has been issued. (EO 202.11)

- **DOH Infection Control Guidance Supersedes Local Guidance:** Any guidance issued by the New York State Department of Health related to prevention and infection control of COVID-19 shall be effective immediately and shall supersede any prior conflicting guidance issued by the New York State Department of Health and any guidance issued by any local board of health, any local department of health, or any other political subdivision of the State related to the same subject. (EO 202.11)
- **Medical Equipment:** Any medical equipment (personal protective equipment (PPE), ventilators, respirators, bi-pap, anesthesia, or other necessary equipment or supplies as determined by the Commissioner of Health) that is held in inventory by any entity in the state, or otherwise located in the state shall be reported to DOH. DOH may shift any such items not currently needed, or needed in the short term future by a health care facility, to be transferred to a facility in urgent need of such inventory, for purposes of ensuring New York hospitals, facilities and health care workers have the resources necessary to respond to the COVID-19 pandemic, and distribute them where there is an immediate need. (EO 202.14)
- **Witnesses to a Health Care Proxy:** The act of witnessing that is required for execution of a health care proxy and other specified legal documents is authorized to be performed utilizing audio-video technology provided that the following conditions are met:
 - The person requesting that their signature be witnessed, if not personally known to the witness(es), must present valid photo ID to the witness(es) during the video conference, not merely transmit it prior to or after;
 - The video conference must allow for direct interaction between the person and the witness(es), and the supervising attorney, if applicable (e.g. no pre-recorded videos of the person signing);
 - The witnesses must receive a legible copy of the signature page(s), which may be transmitted via fax or electronic means, on the same date that the pages are signed by the person;
 - The witness(es) may sign the transmitted copy of the signature page(s) and transmit the same back to the person; and
 - The witness(es) may repeat the witnessing of the original signature page(s) as of the date of execution provided the witness(es) receive such original signature pages together with the electronically witnessed copies within thirty days after the date of execution. (EO 202.14)
- **Out-of-State Pharmacies and Distributors:** Modify section 6808 of the Education Law, Article 137 of the NYCRR to allow that a New York-licensed pharmacy may receive drugs and medical supplies or devices from an unlicensed pharmacy, wholesaler, or third-party logistics provider located in another state to alleviate a temporary shortage of a drug or device that could result in the denial of health care under the following conditions:
 - The unlicensed location is appropriately licensed in its home state, and documentation of the license verification can be maintained by the New York pharmacy.

- The pharmacy maintains documentation of the temporary shortage of any drug or device received from any pharmacy, wholesaler, or third-party logistics provider not licensed in New York.
- The pharmacy complies with all record-keeping requirements for each drug and device received from any pharmacy, wholesaler, or third-party logistics provider not licensed in New York.
- All documentation and records required above shall be maintained and readily retrievable for three years following the end of the declared emergency.
- The drug or device was produced by an authorized FDA registered drug manufacturer. (EO 202.15)

- **Face Coverings:**

- Effective April 17, 2020 any individual who is over age two and able to medically tolerate a face-covering shall be required to cover their nose and mouth with a mask or cloth face-covering when in a public place and unable to maintain, or when not maintaining, social distance. (EO 202.17)
- Any person utilizing public or private transportation carriers or other for-hire vehicles, who is over age two and able to medically tolerate a face covering, shall wear a mask or face covering over the nose and mouth during any such trip; any person who is operating such public or private transport, shall likewise wear a face covering or mask which covers the nose and mouth while there are any passengers in such vehicle. (EO 202.18)

- **Not-for-Profit Corporations:** Permit annual meetings of members to be held remotely or by electronic means. (EO 202.18)
- **Pharmacy License Renewals:** Extend the triennial registrations of pharmacy establishments who are currently registered and whose registration is set to expire on or after March 31, 2020. An application for re-registration of such registrations shall be submitted no later than 30 days after expiration of Executive Order 202. (EO 202.18)
- **Special Education Schools and Early Intervention Programs:** Extend the waivers for certain special education schools and early intervention programs providing certain professional services whose waivers are set to expire on or after March 31, 2020. An application for renewal of such waivers shall be submitted no later than 30 days after expiration of Executive Order 202. (EO 202.18)
- **COVID Testing Prioritization Process:** The Department of Health shall hereby establish a single, statewide coordinated testing prioritization process that shall require all laboratories in the state, both public and private, that conduct COVID-19 diagnostic testing, to complete such COVID-19 diagnostic testing only in accordance with such process. (EO 202.19)

Professional Licensure and Scope of Practice

- **Physicians:**

- Allow physicians licensed and in current good standing in any state in the United States to practice medicine in New York State without civil or criminal penalty related to lack of licensure. (EO 202.5)
- Allow physicians licensed and in current good standing in New York State but not registered in New York State to practice in New York State without civil or criminal penalty related to lack of registration. (EO 202.5)
- Allow any physician who will graduate in 2020 from an academic medical program accredited by a medical education accrediting agency for medical education by the Liaison Committee on Medical Education or the American Osteopathic Association, and has been accepted by an Accreditation Council for Graduate Medical Education accredited residency program within or outside of New York State to practice at any institution under the supervision of a licensed physician. (EO 202.14)
- Allow physicians licensed and in current good standing in any province or territory of Canada, to practice medicine in New York State without civil or criminal penalty related to lack of licensure. (EO 202.18)
- Allow individuals, who graduated from registered or accredited medical programs located in New York State in 2020, to practice medicine in New York State, without the need to obtain a license and without civil or criminal penalty related to lack of licensure, provided that the practice of medicine by such graduates shall in all cases be supervised by a physician licensed and registered to practice medicine in the State of New York (EO 202.18)

- **Nurses and Nurse Practitioners:**

- Allow registered nurses, licensed practical nurses, and nurse practitioners licensed and in current good standing in any state in the United States to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.5)
- Permit a nurse practitioner to provide medical services appropriate to their education, training and experience, without a written practice agreement, or collaborative relationship with a physician, without civil or criminal penalty related to a lack of written practice agreement, or collaborative relationship, with a physician. (EO 202.10)
- Allow registered professional nurses, licensed practical nurses and nurse practitioners licensed and in current good standing in New York State but not registered in New York State to practice in New York State without civil or criminal penalty related to lack of registration. (EO 202.10)

- Permit registered nurses to order the collection of throat or nasopharyngeal swab specimens from individuals suspected of being infected by COVID-19, for purposes of testing. (EO 202.10)
- Allow registered nurses, licensed practical nurses, and nurse practitioners or a substantially similar title licensed and in current good standing in any province or territory of Canada, to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.18)
- Permit graduates of State Education Department registered, licensure qualifying nurse practitioner education programs to be employed to practice nursing in a hospital or nursing home for 180 days immediately following successful completion of a New York State Registered licensure qualifying education program, provided that the graduate files with the State Education Department an application for certification as a nurse practitioner. (EO 202.18)
- **Physician Assistants:**
 - Allow physician assistants licensed and in current good standing in any state in the United States to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.5)
 - Permit a physician assistant to provide medical services appropriate to their education, training and experience without oversight from a supervising physician without civil or criminal penalty related to a lack of oversight by a supervising physician. (EO 202.10)
 - Permit a specialist assistant to provide medical services appropriate to their education, training and experience without oversight from a supervising physician without civil or criminal penalty related to a lack of oversight by a supervising physician. (EO 202.10)
 - Allow physician assistants licensed and in current good standing in New York State but not registered in New York State to practice in New York State without civil or criminal penalty related to lack of registration. (EO 202.10)
 - Allow physician assistants or a substantially similar title licensed and in current good standing in any province or territory of Canada, to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.18)
 - Allow clinical nurse specialists, specialist assistants, and substantially similar titles certified and in current good standing in any state in the United States, or any province or territory of Canada, to practice in New York State without civil or criminal penalty related to lack of certification.
- **EMS:** Modify the definition of “emergency medical services” to include non-emergency and low acuity medical assistance; to eliminate any restrictions on an approved ambulance services or providers operating outside of the primary territory; to allow emergency medical services to

transport patients to locations other than healthcare facilities with prior approval by Department of Health. (EO 202.10)

- **Respiratory Therapists:**

- Allow respiratory therapists licensed and in current good standing in any state in the United States to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.10)
- Allow respiratory therapy technicians licensed and in current good standing in any state in the United States to practice in New York State without civil or criminal penalty related to lack of licensure (EO 202.15)

- **Radiologic Technologists:** Permit radiologic technologists or a substantially similar title licensed and in current good standing in any province or territory of Canada, to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.18)
- **Social Workers:** Allow licensed master social workers, licensed clinical social workers, and substantially similar titles licensed and in current good standing in any state in the United States, or in any province or territory of Canada, to practice in New York State without civil or criminal penalty related to lack of licensure. (EO 202.18)
- **Professionals Licensed but not Registered:** Allow specialist assistants, respiratory therapists, respiratory therapist technicians, pharmacists, clinical nurse specialists, dentists, dental hygienists, registered dental assistants, midwives, perfusionists, clinical laboratory technologists, cytotechnologists, certified clinical laboratory technicians, certified histological technicians, licensed clinical social workers, licensed master social workers, podiatrists, physical therapists, physical therapist assistants, mental health counselors, marriage and family therapists, creative arts therapists, psychoanalysts and psychologists who have an unencumbered license and are currently in good standing in New York State but not registered in New York State to practice in New York State without civil or criminal penalty related to lack of registration;
- **Clinical Lab Technology and Technicians:** Permit graduates of State Education Department registered, licensure qualifying clinical laboratory technology and clinical laboratory technician education programs to be employed to practice for 180 days immediately following successful completion of a New York State Registered licensure qualifying education program, in a clinical laboratory with a valid New York State permit, provided that the graduate files an application for a New York State clinical laboratory practitioner license and limited permit. (EO 202.18)
- **Pharmacists and Pharmacy Technicians:**
 - Permit a certified or registered pharmacy technician, under the direct personal supervision of a licensed pharmacist, to assist such licensed pharmacist, as directed, in compounding, preparing,

labeling, or dispensing of drugs used to fill valid prescriptions or medication orders for a home infusion provider licensed as a pharmacy in New York. (EO 202.10)

- Permit pharmacy technicians and pharmacists to practice at an alternative location, including their home, as long as there is adequate security to prevent any Personal Health Information from being compromised. (EO 202.18)
- **Healthcare Profession Students:** Any healthcare facility is authorized to allow students, in programs to become licensed in New York State to practice a healthcare professional, to volunteer at the healthcare facility for educational credit as if the student had secured a placement under a clinical affiliation agreement, without entering into any such clinical affiliation agreement. (EO 202.10)
- **Healthcare Interns:** Allow students, in programs to become licensed in New York State to practice as a healthcare professional, to volunteer at any healthcare facility for educational credit as if the student had secured a placement under a clinical affiliation agreement, without entering into any such clinical affiliation agreement. (EO 202.10)
- **Mental Health Counselors, Creative Arts Therapists:** Allow mental health counselors, marriage and family therapists, creative arts therapists and psychoanalysts licensed and in current good standing in any state in the United States to practice in New York State without civil or criminal penalty related to lack of licensure; (EO 202.15)
- **Immunity from Liability:** Provide that all physicians, physician assistants, specialist assistants, nurse practitioners, licensed registered professional nurses and licensed practical nurses shall be immune from civil liability for any injury or death alleged to have been sustained directly as a result of an act or omission by such medical professional in the course of providing medical services in support of the State's response to the COVID-19 outbreak, unless it is established that such injury or death was caused by the gross negligence of such medical professional. (EO 202.10)

Nursing Homes

- **PRI:** Modifies section 400.11 of Title 10 of the NYCRR, to the extent necessary to permit Article 28 facilities receiving patients as a result of the disaster emergency to complete patient review instruments as soon as practicable. (EO 202)
- **Changes in Beds and Physical Plant:** Modifies subdivisions (a) and (e) of section 401.3 and section 710.1 of Title 10 of the NYCRR, to the extent necessary to allow hospitals (including nursing homes) to make temporary changes to physical plant, bed capacities, and services provided, upon approval of the Commissioner of Health, in response to a surge in patient census. (EO 202.1)
- **Temporary Facilities:**
 - Modifies parts 709 and 710 of Title 10 of the NYCRR, to the extent necessary to allow construction applications for temporary hospital locations and extensions to be approved by the Commissioner of Health without considering the recommendation of the health systems agency

or the Public Health and Health Planning Council, and to take such further measures as may be necessary to expedite departmental reviews for such approval (EO 202.1)

- Modifies subdivision 3 of section 2801-a of the Public Health Law and section 600.1 of Title 10 of the NYCRR, to the extent necessary to permit the Commissioner of Health to approve the establishment of operators of temporary hospital locations and extensions without following the standard approval processes and to take such further measures as may be necessary to expedite departmental reviews for such approval. (EO 202.1)
- **Rapid Discharge and Transfer between Hospitals and Nursing Homes:** Modifies section 400.9 and paragraph 7 of subdivision h of section 405.9 of Title 10 of the NYCRR, to the extent necessary to permit general hospitals and nursing homes licensed pursuant to Article 28 of the Public Health Law ("Article 28 facilities") that are treating patients during the disaster emergency to rapidly discharge, transfer, or receive such patients, as authorized by the Commissioner of Health, provided such facilities take all reasonable measures to protect the health and safety of such patients and residents, including safe transfer and discharge practices, and to comply with the Emergency Medical Treatment and Active Labor Act (42 U.S.C. section 1395dd) and any associated regulations. (EO 202.1)
- **Helping Nursing Home Residents to Vote:** Modifies subdivision 8 of section 8-407 of the Election Law to allow individuals not employed by the Board of Elections to assist residents of nursing homes or adult care facilities in the completion of absentee ballot applications and voting. (EO 202.1)
- **Facilitate Transfers:** Modifies section 400.12 of Title 10 of the NYCRR, to the extent necessary to allow patients affected by the disaster emergency to be transferred to receiving Article 28 facilities as authorized by the Commissioner of Health. (EO 202.5)
- **Nursing Home Comprehensive Assessment Flexibility:** Modifies section 415.11 of Title 10 of the NYCRR, to the extent necessary to permit nursing homes receiving individuals affected by the disaster emergency to perform comprehensive assessments of those residents temporarily evacuated to such nursing homes as soon as practicable following admission or to forego such assessments for individuals returned to facilities from which they were evacuated. (EO 202.5)
- **Nursing Home Physician Admission Order Flexibility:** Modifies subdivision b of section 415.15 of Title 10 of the NYCRR, to the extent necessary to permit nursing homes receiving individuals affected by the disaster emergency to obtain physician approvals for admission as soon as practicable following admission or to forego such approval for individuals returned to facilities from which they were evacuated. (EO 202.5)
- **Nursing Home Admission Procedures:** Modifies subdivision i of section 415.26 of Title 10 of the NYCRR, to the extent necessary to permit nursing homes receiving individuals affected by the disaster emergency to comply with admission procedures as soon as practicable following admission

or to forego such procedures for individuals returned to facilities from which they were evacuated. (EO 202.5)

- **Building Code for Changes in Physical Plant:** Modifies any code related to construction, energy conservation, or other building code, and all state and local laws, ordinances, and regulations relating to administration and enforcement of the foregoing, to the extent necessary to allow, upon approval by the Commissioner of Health or the Commissioner of OPWDD, as applicable, the temporary changes to physical plant, bed capacities, and services provided; the construction of temporary hospital locations and extensions; the increase in and/or exceeding of certified capacity limits; and the establishment of temporary hospital locations and extensions (EO 202.5)
- **Transfer of Certain Ownership Interests in Hospital, Outpatient Facility, Nursing Home and Home Care Operators:** Modifies subparagraphs (ii) and (iii) of paragraph (b) and paragraph (c) of subdivision (4) of section 2801-a of the Public Health Law, and subparagraph (ii) of paragraph (c) of subdivision (1) and paragraph (c) of subdivision (2) of section 3611-a of the Public Health Law, to the extent necessary to limit the Department of Health's review functions to essential matters during the pendency of the COVID-19 health crisis, and to toll any statutory time limits for transfer notices pertaining to operators of Article 28 and Article 36 licensed entities for the duration of this declaration of disaster emergency, and any subsequent continuation thereof. (EO 202.18)
- **Family Notification:**
 - Any skilled nursing facility, nursing home, or adult care facility licensed and regulated by the Commissioner of Health shall notify family members or next of kin if any resident tests positive for COVID-19, or if any resident suffers a COVID-19 related death, within 24 hours of such positive test result or death. (EO 202.18)
 - Imposes a penalty for non-compliance of \$2,000 per violation per day, and any subsequent violation is to be punishable as if it were a violation of section 12-b of the Public Health Law, which punishes willful violations with imprisonment not exceeding one year, or a fine not exceeding \$10,000 or both. (EO 202.19)

Home Care

- **Nursing Supervision of Personal Care:** Modifies paragraph 3 of subdivision f of section 505.14 of Title 18 of the NYCRR, to the extent necessary to permit nursing supervision visits for personal care services provided to individuals affected by the disaster emergency be made as soon as practicable. (EO 202.2)
- **In-Home Supervision of Home Care:** Modifies paragraph 2 of subdivision g of section 763.4; paragraphs 7 and 8 of subdivision h of section 763.4; paragraph 2 of subdivision a of section 766.5; and paragraph 1 of subdivision d of section 766.5 of Title 10 of the NYCRR, to the extent necessary to permit certified home health agencies, long term home health care programs, AIDS home care programs, and licensed home care services agencies serving individuals affected by the disaster emergency to conduct in-home supervision of home health aides and personal care aides as soon as

practicable after the initial service visit, or to permit in-person and in-home supervision to be conducted through indirect means, including by telephone or video communication. (EO 202.5)

- **Initial Patient Visits for CHHAs:** Modifies subdivision a of section 763.5 of Title 10 of the NYCRR, to the extent necessary to permit initial patient visits for certified home health agencies, long term home health care programs and AIDS home care programs serving individuals affected by the disaster emergency to be made within 48 hours of receipt and acceptance of a community referral or return home from institutional placement. (EO 202.5)
- **Home Care Worker Registry Submissions:** Modifies sections 403.3 and 403.5 of Title 10 of the NYCRR, to extend the time in which home care services entities must submit information to the Home Care Worker Registry. (EO 202.5)
- **Transfer of Certain Ownership Interests in Hospital, Outpatient Facility, Nursing Home and Home Care Operators:** Modifies subparagraphs (ii) and (iii) of paragraph (b) and paragraph (c) of subdivision (4) of section 2801-a of the Public Health Law, and subparagraph (ii) of paragraph (c) of subdivision (1) and paragraph (c) of subdivision (2) of section 3611-a of the Public Health Law, to the extent necessary to limit the Department of Health's review functions to essential matters during the pendency of the COVID-19 health crisis, and to toll any statutory time limits for transfer notices pertaining to operators of Article 28 and Article 36 licensed entities for the duration of this declaration of disaster emergency, and any subsequent continuation thereof. (EO 202.18)

Adult Care Facilities/Assisted Living

- **Family Notification:**
 - Any skilled nursing facility, nursing home, or adult care facility licensed and regulated by the Commissioner of Health shall notify family members or next of kin if any resident tests positive for COVID-19, or if any resident suffers a COVID-19 related death, within 24 hours of such positive test result or death. (EO 202.18)
 - Imposes a penalty for non-compliance of \$2,000 per violation per day, and any subsequent violation is to be punishable as if it were a violation of section 12-b of the Public Health Law, which punishes willful violations with imprisonment not exceeding one year, or a fine not exceeding \$10,000 or both. (EO 202.19)

Senior Services

- **Expanded In-Home Services for the Elderly Program (EISEP) Home Delivered Meals Services:**
 - Modifies clause (d) of subparagraph (ii) of paragraph (3) of subdivision (a) of section 6654.10 of Title 9 of the NYCRR, insofar as it requires an assessment be conducted prior to or within 10 days of the initiation of home delivered meals. (Executive Order 202.1)

- Modifies subdivision (h) of section 6654.16 of Title 9 of the NYCRR, insofar as it requires an assessment be conducted within 10 working days after the completion of the screening intake and prior to the initiation of services under the Expanded In-Home Services for the Elderly Program (EISEP). (Executive Order 202.1)
- Modifies subdivision (n) of section 6654.16 of Title 9 of the NYCRR, to allow for a care plan to remain in effect for a period exceeding 12 months under the Expanded In-Home Services for the Elderly Program (EISEP) when such care plan would otherwise expire during the period in which a disaster emergency is declared. (Executive Order 202.1)
- Modifies subdivision (x) of section 6654.16 of Title 9 of the NYCRR, modifying requirements for reassessments to be conducted every 12 months or within 5 days of becoming aware of a change in circumstance under the Expanded In-Home Services for the Elderly Program (EISEP). (Executive Order 202.1)
- Modifies sub-clauses (1), (2), and (3) of clause (a) of subparagraph (ii) of paragraph (3) of subdivision (a) of section 6654.10 of Title 9 of the New York Code of Rules and Regulations, to the extent necessary to make home-delivered meals available to persons age 60 or older who do not meet these listed eligibility requirements. (EO 202.18)
- Modifies paragraph (4) of subdivision (a) and subparagraph (ii) of paragraph (14) of subdivision (b) of section 6654.10 of Title 9 of the New York Code of Rules and Regulations, insofar as it requires meals served to provide minimum percentages of the dietary reference intake. (EO 202.18)
- Modifies paragraph (6) of subdivision (a) of section 6654.10 of Title 9 of the New York Code of Rules and Regulations to the extent that it requires menus to be reviewed and approved by a registered dietitian. (EO 202.18)
- Modifies paragraph (5) of subdivision (a) and paragraph (6) of subdivision (b) of section 6654.10 of Title 9 of the New York Code of Rules and Regulations, insofar as it requires menus to follow a minimum of a four-week cycle. (EO 202.18)
- Modifies clause (a) of subparagraph (i) of paragraph (3) of subdivision (a) and subparagraph (ii) of paragraph (2) of subdivision (b) of section 6654.10 of Title 9 of the New York Code of Rules and Regulations, insofar as it requires that home-delivered meals be provided 5 or more days per week. (EO 202.18)
- Modifies paragraph (2) of subdivision (s) of section 6654.17 of Title 9 of the New York Code of Rules and Regulations to the extent that it requires an in-home supervisory visit within 5 days of the first time services are provided to a client. (EO 202.18)
- Modifies section 6654.6 of Title 9 of the New York Code of Rules and Regulations to the extent necessary to allow for all new clients to be provided services under the Expanded In-Home Services for the Elderly Program without the requirement that any such clients pay cost-sharing

until such time as an assessment is conducted and a cost share amount can be determined. (EO 202.18)

- Modifies subdivision (r) of section 6654.16 of Title 9 of the New York Code of Rules and Regulations to the extent that it requires client contacts be conducted in-home or in-person and to allow for all required client contacts to be conducted by telephone or otherwise remotely. (EO 202.18)

Hospice:

- **Hospice Residences:** Allow a hospice residence to designate any number of beds within such facility as dually certified inpatient beds. (EO 202.10)

Telehealth:

- **Telemental Health:** Modifies section 596 of Title 14 of the NYCRR to the extent necessary to allow for rapid approval of the use of the telemental health services, including the requirements for in-person initial assessment prior to the delivery of telemental health services, limitations on who can deliver telemental health services, requirements for who must be present while telemental health services are delivered, and a recipient's right to refuse telemental health services. (EO 202)

Retirement Communities

- **Restaurants:** Any restaurant or bar in the state of New York shall cease serving patrons food or beverage on-premises effective at 8 pm on March 16, 2020, and until further notice shall only serve food or beverage for off-premises consumption. A retail on-premises licensee shall be authorized for the duration of this Executive Order to sell alcohol for off-premises consumption, which shall include either take-out or delivery. (EO 202.3)
- **Fitness Centers:** Any gym, fitness centers or classes, and movie theaters shall also cease operation effective at 8 pm on March 16, 2020 until further notice.
- **Non-Essential Gatherings:** Non-essential gatherings of individuals of any size for any reason (e.g. parties, celebrations or other social events) are canceled or postponed at this time. (EO 202.10)