

Wisconsin Tuberculosis (TB) Program Updates

Claire Leback, RN BSN MPH
Wisconsin Tuberculosis (TB) Program
Wisconsin Virtual TB Summit

April 2, 2024

Agenda

Brief overview of the Wisconsin TB Program function and programs Statewide concerns

- Medication shortage updates
- New immigration pathways—Uniting 4 Ukraine, Welcome Corps, and others

Wisconsin new resources

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Wisconsin new resources

Functions of the Wisconsin State TB Program

Ensure patients with suspected or confirmed TB disease or latent TB infection (LTBI) have ready access to diagnostic and treatment services that meet national standards

Provide consultation, technical assistance, education, and training in the clinical and public health aspects of TB

Plan and develop statewide TB control policies and procedures

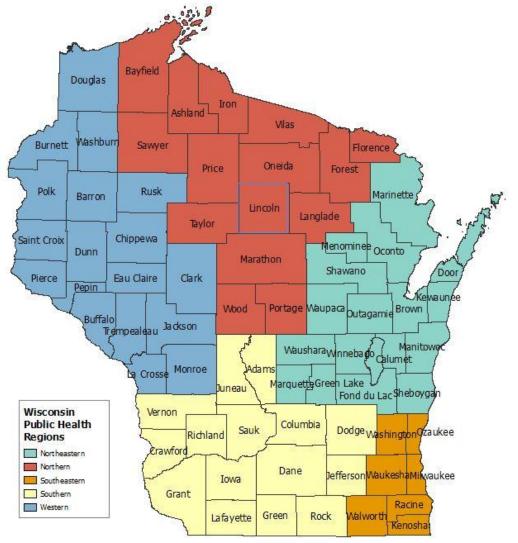
Assure statewide TB surveillance

Functions of the Local and Tribal Health

Departments (LTHDs)

Locally controlled public health

- 97 LTHDs—a mix of Tribal Health and local health departments at the city or county level
- Collaborate with health care providers





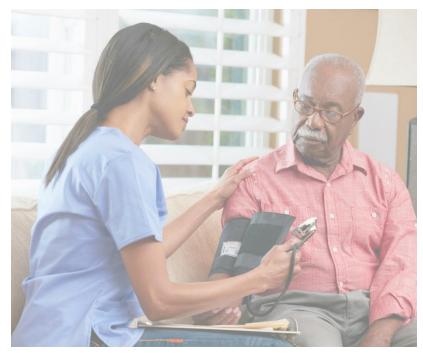
- Patient assessment
- Case management
- Patient education



- Directly observed therapy (DOT)
- Toxicity and therapy monitoring



- Initiating and discontinuing isolation
- Assessment of isolation options



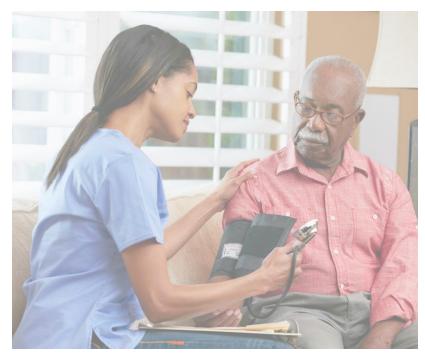
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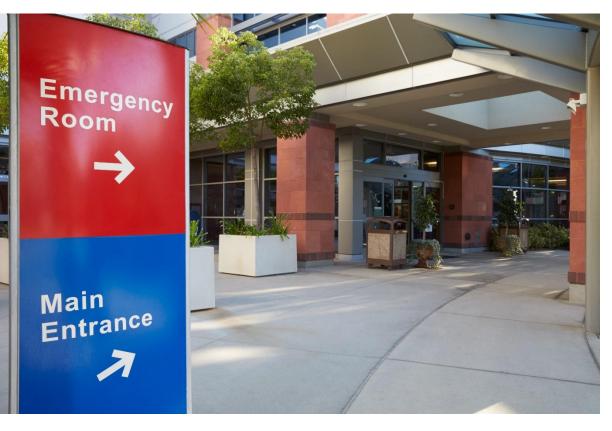
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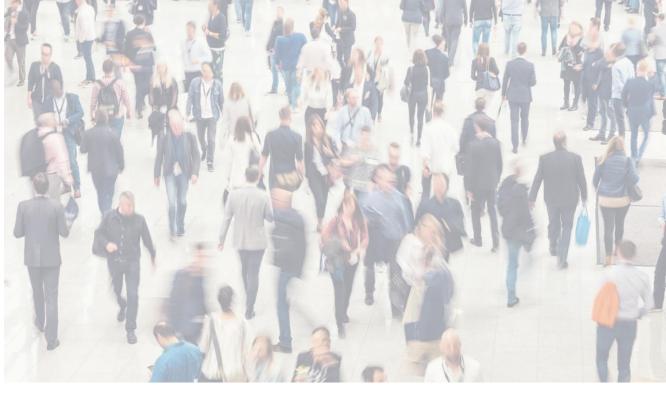


- Directly observed therapy (DOT)
- Toxicity and therapy monitoring



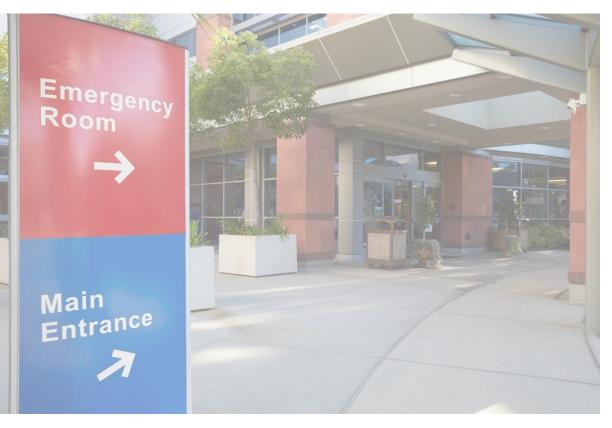
- Initiating and discontinuing isolation
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Facilitation of safe discharges from the hospital

Identification and assessment of contacts





Facilitation of safe discharges from the hospital

Identification and assessment of contacts

How Does the Wisconsin TB Program Support LTHD Functions?



Wisconsin TB Programs Supporting LTHD Functions

Wisconsin TB Dispensary

Uses state tax revenue funds to reimburse LTHDs for medical management of patients.

Wisconsin TB Treatment Assistance Program

Uses CDC Cooperative
Agreement funding to provide
incentives and enablers for
those being treated for TB/LTBI.

Wisconsin TB Dispensary Program (WTBDP): Purpose Statement

To ensure that all persons in Wisconsin with suspected or confirmed active TB disease or latent TB infection (LTBI) can receive appropriate evaluation, treatment, and monitoring, regardless of insurance availability.



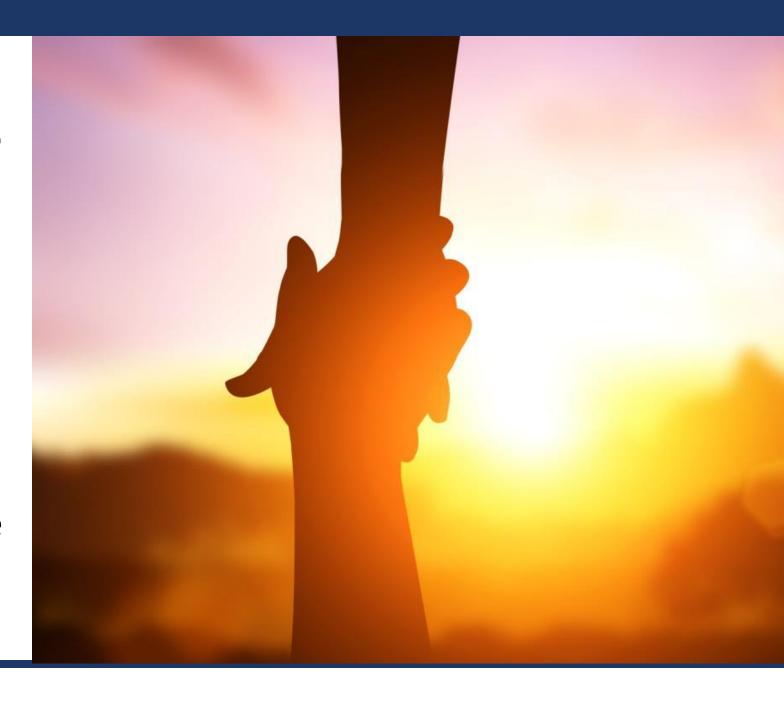
The WTBDP reimburses services for the uninsured and underinsured.



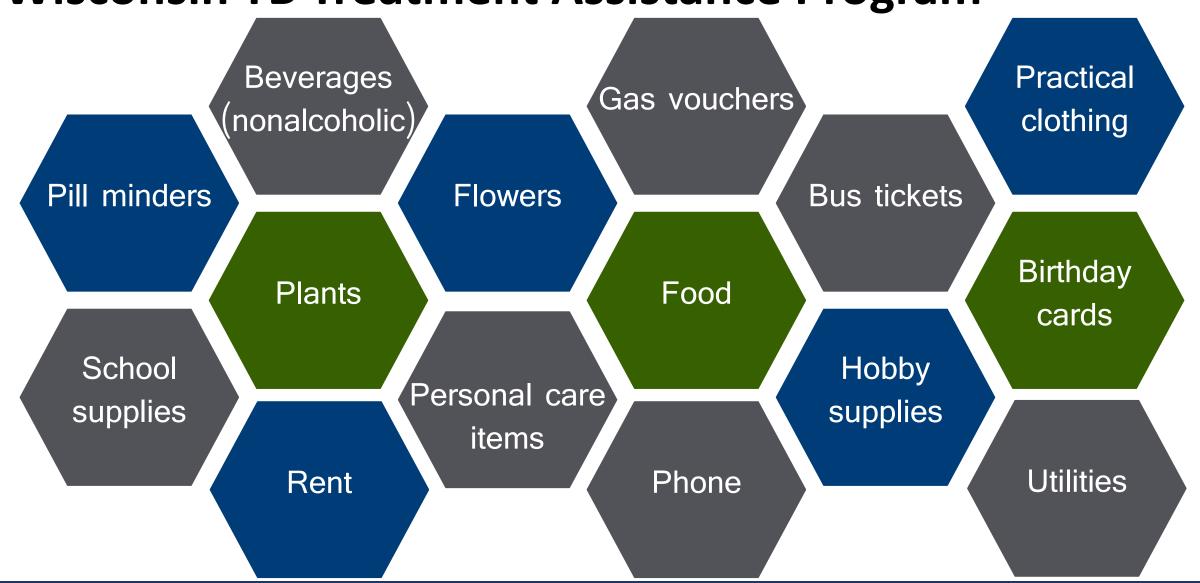
Wisconsin TB Treatment Assistance Program

Encourages and supports clients through the completion of TB treatment

Provides funding to purchase treatment assistance aids



Wisconsin TB Treatment Assistance Program



TB Treatment Assistance Program

With pre-approval from the Wisconsin TB Program, TB treatment assistance aids may be provided above the capped rate if:

- A client has infectious TB and will need to remain in isolation for an extended period of time.
- A client has a particular need.
- A client has reached an important milestone in treatment (for example, completed one year of therapy for multidrugresistant TB).

TB Treatment Assistance Program

Examples of TB treatment assistance above the capped rate include:



Payments for housing (rent or mortgage)



Payments for utilities



Payments for cell phone

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Wisconsin new resources

Medication Shortages

- Priftin® (Rifapentine)
- Rifampin
- Isoniazid
- Moxifloxacin



Two Types of Shortages

Manufacturer: a period of time when the demand or projected demand for the drug within the United States exceeds the supply of the drug. (FDA definition)

Challenges of Allocation: distribution of medication supply in such a way that local supply cannot meet local demand.

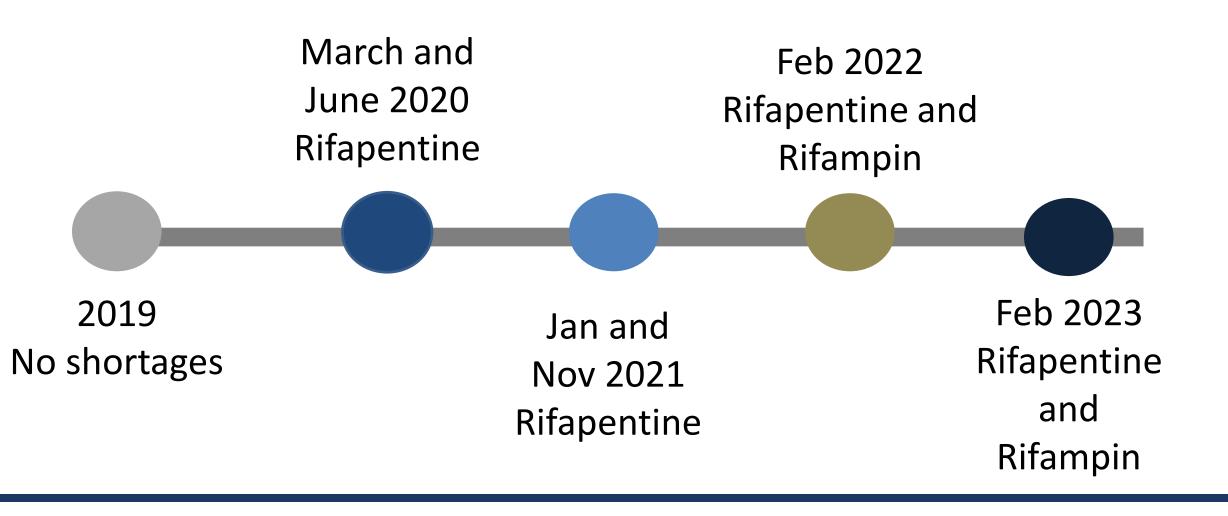


Shortages Listed on FDA Website:

- Rifapentine since March 2020
- Rifampin since December 2021
- Isoniazid 100mg since May 2021

Local **Moxifloxacin** shortages have been reported since 2023.

Timeline of Wisconsin Shortages



Strategies to Maintain Access to Critical Medications



Working closely with Aurora pharmacy to monitor supply and ordering availability



Intermittently pausing new rifampin-containing LTBI orders (4R, 3HR) to preserve supply for active patients when supplies are low



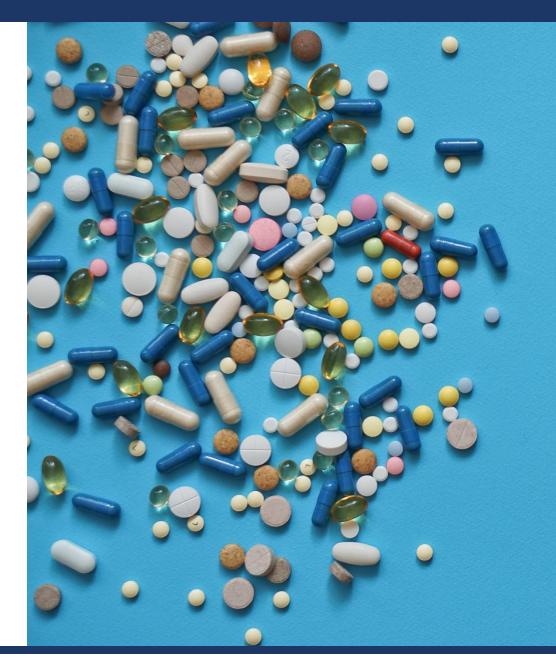
Making requests from the National Strategic Stockpile when shortages occur and supplies allow



Establishing secondary contracts with additional pharmaceutical suppliers

Shortage Impact: 4-month HPMZ

- High-dose rifapentine, isoniazid, pyrazinamide, and moxifloxacin for 17 weeks
- For drug-susceptible TB
- Not available through the Wisconsin TB Dispensary at this time



How Have the Shortages Impacted LTBI Prescribing Patterns in Wisconsin?

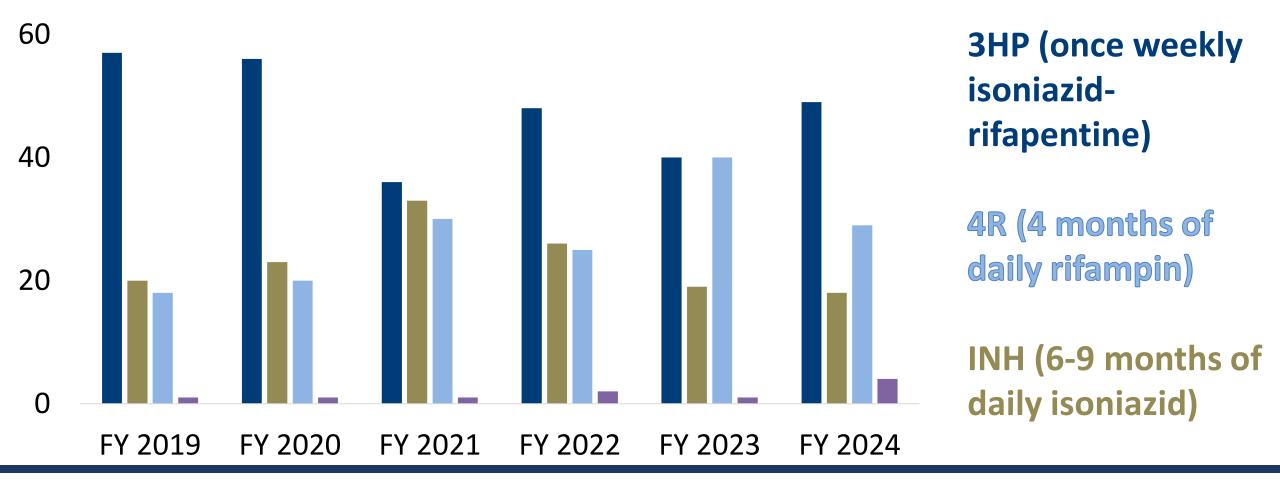


We looked at invoices for the Wisconsin TB Dispensary Program over time.

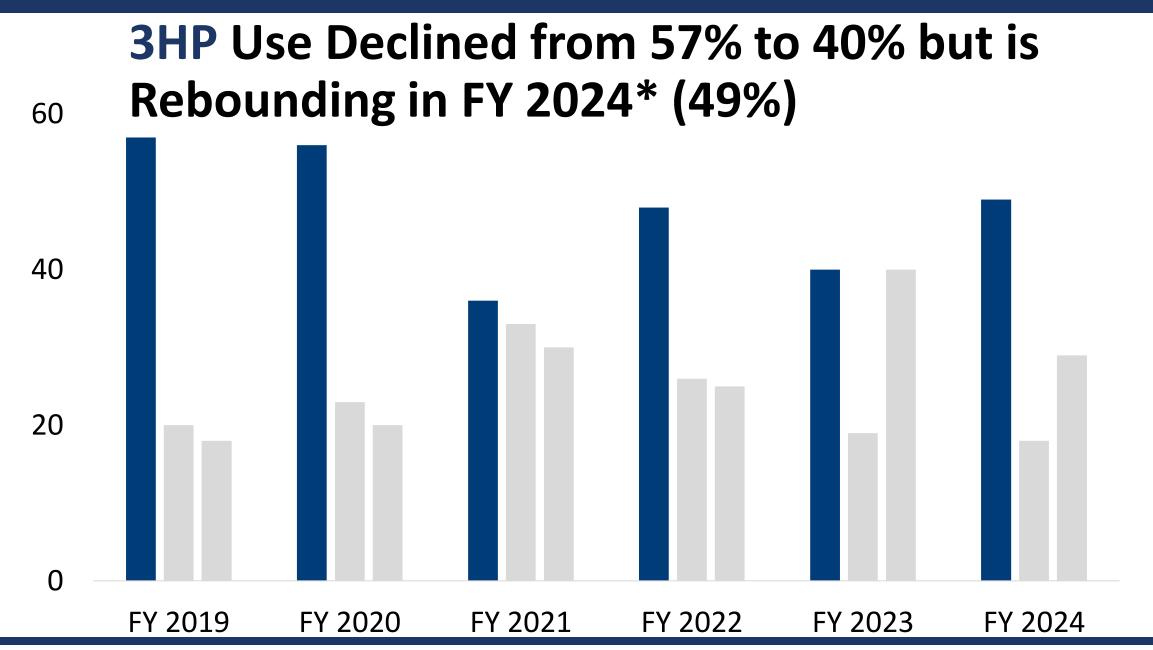
This data does not include LTBI treatment that was not reimbursed by our program.

Partial data (Q1 and Q2) included for FY 2024.

Percent of Wisconsin TB Dispensary Program Reimbursement by LTBI regimen for FY 2019-2024*

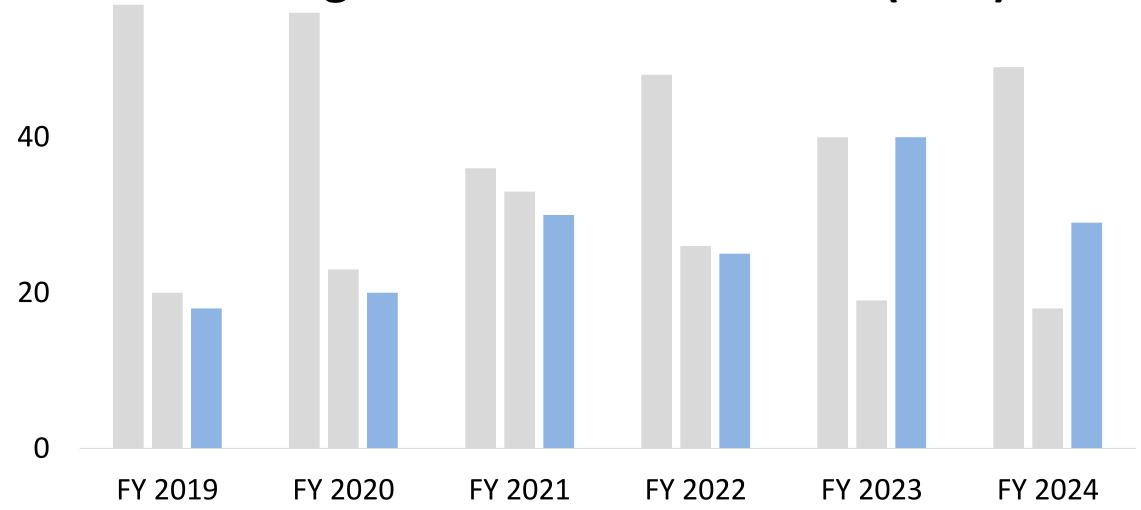


^{*}Q1 and Q2 of FY2024



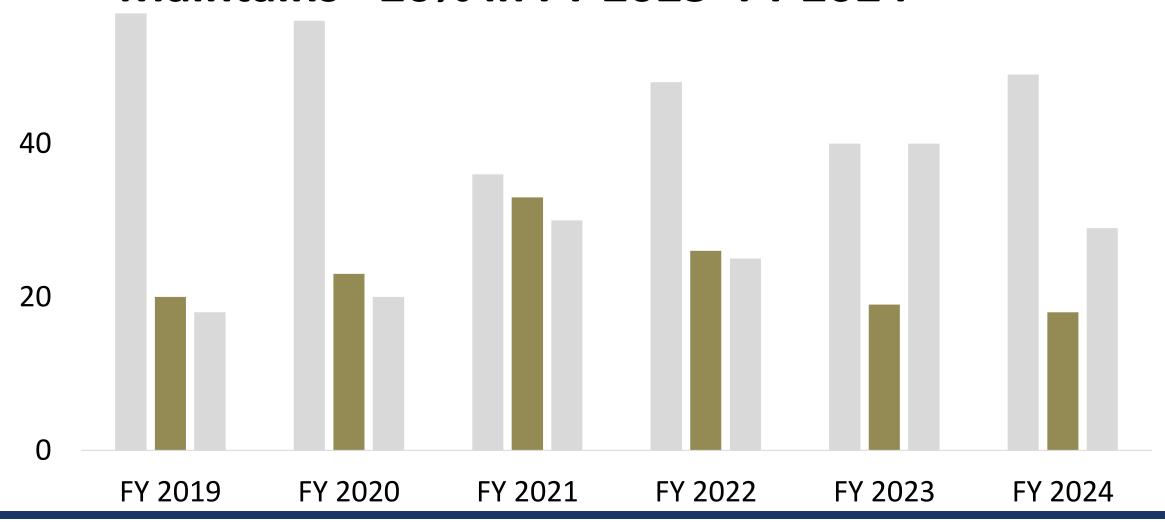
60

4R Use Increased from <20% to 40% Decreasing to Baseline in FY 2024* (29%)



60

INH Use Peaked to 33% in FY2021 and Maintains <20% in FY 2023-FY 2024*



Medication Shortages Have...

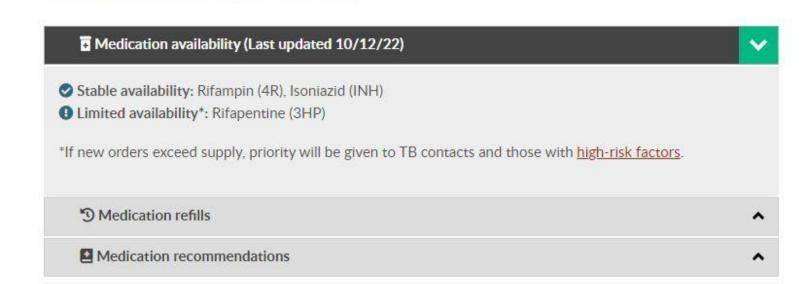
- Occurred intermittently since 2020.
- Not affected the ability of WTBP to fulfill orders for RIPE but have affected utilization of preferred LTBI regimens.
- Prevented full implementation of the 4-month HPMZ regimen.
- Changed how WTBP manages medication procurement.



Medication Shortages

WTBP website

GovD messages



Latent TB infection medication

www.dhs.wisconsin.gov/tb/health-pros.htm

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Uniting for Ukraine (U4U) Launched April 2022



Since the fall of 2022, other programs modeled after U4U have started to assist with immigration from Cuba, Haiti, Nicaragua, and Venezuela (CHNV).

TB Screening for Humanitarian Parolees

Required attestation for all programs: IGRA blood test (2 years and older)

Additionally **recommended** by WTBP:

- Symptom screen
- •Health history asking specifically about TB/LTBI treatment or exposure
- •2 VW CXR (if U4U)



All Have Varying Risks for Tuberculosis (WHO, 2022)



Haiti: 154 per 100,000 with 3.5% of new cases being MDR



Venezuela: 46 per 100,000 with 3.2% of new cases being MDR



Nicaragua: 43 per 100,000 with 1.2% of new cases being MDR

All Have Varying Risks for Tuberculosis (WHO, 2022)



Ukraine: 90 per 100,000 with 29% of new cases being MDR and 43% of cases retreated



Cuba: 6.8 per 100,000 with 3.5% of new cases being MDR and 15-28% of cases retreated

Challenges to TB Screening

Public health receives limited information where humanitarian parolees resettle.

No B class status process for notifications exists.

Many do not have access to Wisconsin Medicaid.

- U4U parolees who arrived after September 30, 2023, are not eligible.
- Cuban and Haitian parolees may be eligible.
- Nicaraguan and Venezuelan parolees are not eligible.

How Many Humanitarian Parolees Have Arrived?

Over 170,000 U4U applications were approved as of December 2023; Wisconsin received 2,829 sponsor applications across 59 counties

Over 350,000 CHNV parolees entered the U.S. since as of January 2024; National cap of 30,000 parolees per month

Are We Tracking How Many Receive TB and LTBI screening?

I-134 sponsor zip code data (U4U only)

Wisconsin Electronic Disease Surveillance System (WEDSS) data

- Short-term U4U LTE performed surveillance in 2023, tracked 102
 U4U individuals total (as of 9/18/2023)
- CHNV and U4U surveillance after September 30, 2023, to be absorbed by WTBP



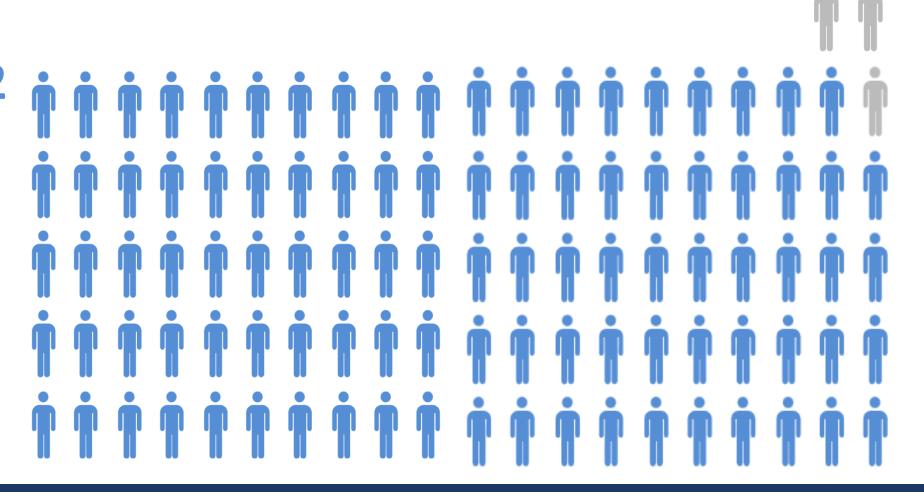
U4U prior to 9/30/23 97% were screened with IGRA

99 out of 102

received an IGRA

3 out of 102

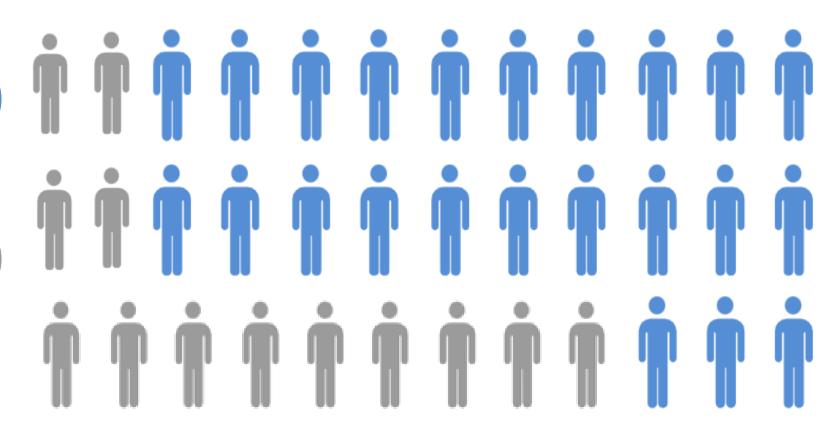
declined or received a **TST**



Of those fully screened (CXR and IGRA)

23 out of 36 (64%) were confirmed LTBI

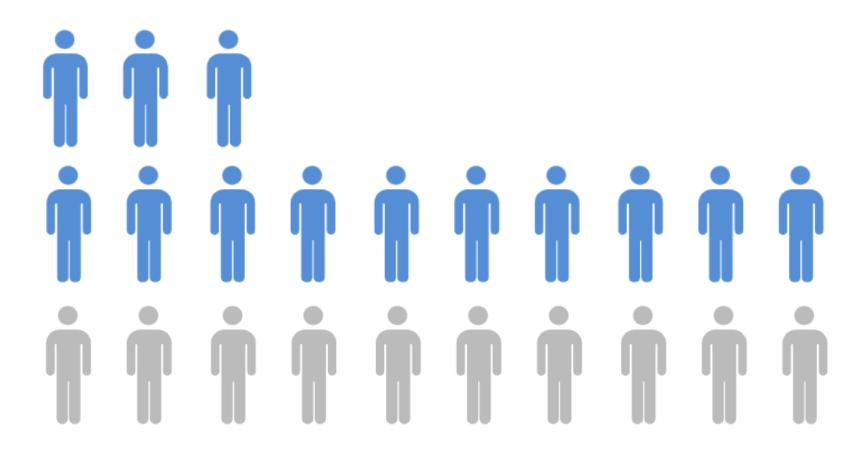
13 out of 36 (36%) were not a case of LTBI



Of those with LTBI, only 57% were treated

13 out of 23 confirmed LTBI referred to treatment

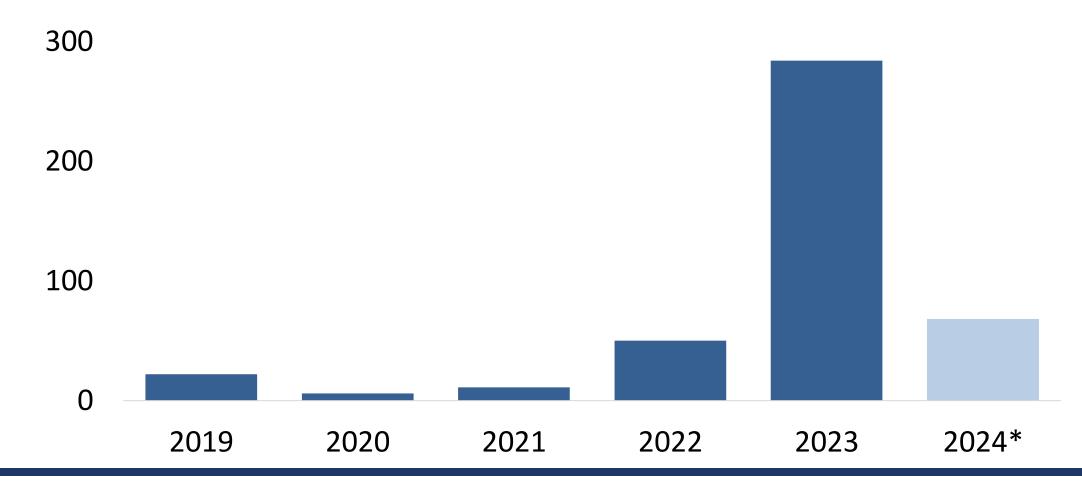
10 out of 23 were LTFU, moved, or declined





Total WEDSS TB Records from CHNV Countries **Have Quadrupled from 2022 to 2023**

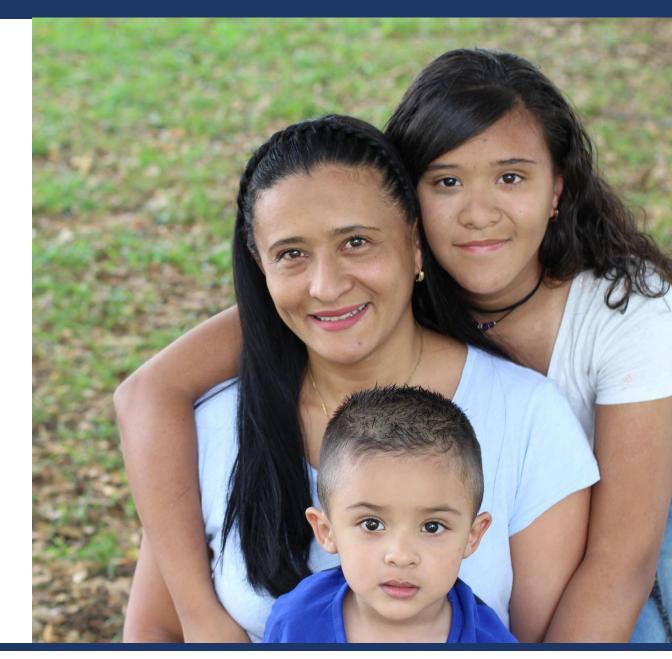




*First six weeks of 2024

Welcome Corps

- A private sponsorship program started in April 2023.
- Immigrants arrive under refugee status, not as humanitarian parolees.
- Sponsors take responsibility for core services normally offered in the first 90 days by resettlement agencies.



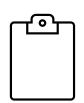
Core Services



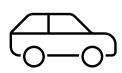




Necessities



Apply for benefits



Transportation support



Employment assistance



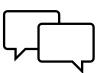
Education



Airport pick up



Community orientation



Interpretation



Access to health services

Welcome Corps

Wisconsin has sponsorship groups but have not been matched with refugees at this time.

WTBP is working with the refugee health coordinator in the event Wisconsin receives participants through this avenue.



Messaging from WTBP to LTHDs

Be aware of new immigration pathways and the potential to see new immigrants in Wisconsin communities.

Recognize not all will have access to Medicaid and refugee resettlement agency support.

Be knowledgeable where different immigrants may be referred for TB attestation and screening or the full RMS exam.

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TB Handout for U4U Parolees and Sponsors

https://www.dhs.wisconsin.gov/library/collection/p-03430

Tuberculosis (TB) Testing Information

For Ukrainian arrivals and sponsors





Who should be tested?

People arriving in the U.S. as part of the Uniting for Ukraine (U4U) program must be tested for TB within 90 days after their arrival.

- Everyone two years and older needs to be tested for TB by getting an interferon-gamma release assay (IGRA).
- An IGRA is a blood test that tells if a person has been infected with the bacteria that causes TB.



How can you get tested?

- Contact your local or Tribal health department (LTHD) for testing information.
 - Find your LTHD at dhs.wi.gov/lh-depts/counties/index.htm.
 - Your LTHD may be able to provide you with a TB blood test or refer you to another testing location, like a health care provider's office or local laboratory.
- A resettlement agency may also be able to connect you with a testing location. Find a resettlement agency at dhs.wi.gov/international/volunteer-resettlementagencies.htm.



How much does testing cost?

- You may qualify for insurance and are encouraged to apply for Wisconsin Medicaid by contacting the Income Maintenance Consortium or by applying through the online ACCESS application portal.
 - Income Maintenance Consortium: dhs.wi.gov/forwardhealth/imagency/
 - Online ACCESS Application Portal: dhs.wi.gov/forwardhealth/index.htm or https://access.wisconsin.gov/access/
- Your LTHD or a resettlement agency may also be able to assist with the application or testing costs.

Інформація про тестування на туберкульоз (ТВ)

Для українських прибуваючих та спонсорів (Tuberculosis (TB) Testing Information For Ukrainian arrivals and sponsors)





Хто має пройти тестування?

Люди, які прибувають у США в рамках програми Uniting for Ukraine («Єдність для України») (U4U), повинні пройти тестування на туберкульоз протягом 90 днів після прибуття.

- Кожен віком від двох років і старше повинен бути протестований на ТВ за допомогою аналізу interferon-gamma release assay (вивільнення гамма-інтерферону) (IGRA).
- IGRA це аналіз крові, який показує, чи була людина інфікована бактеріями. що викликають ТВ.



Як ви можете отримати тестування?

- Зв'яжіться з вашим local or Tribal health department (місцевим або племінним відділом охорони здоров'я) (LTHD) за інформацією про тестування.
 - Знайдіть ваш LTHD на сайті dhs.wi.gov/lh-depts/counties/index.htm.
 - Ваш LTHD може надати вам аналіз крові на ТВ або направити вас в інше місце для тестування, наприклад, до кабінету постачальника медичних послуг або до
- Агентство з переселення також може зв'язати вас з місцем тестування. Знайдіть агентство з переселення на сайті dhs.wi.gov/international/volunteer-resettlement-agencies.htm.



Скільки коштує тестування?

- Ви можете мати право на отримання страховки, і вам пропонується подати заявку на Wisconsin Medicaid, зв'язавшись із Income Maintenance Consortium (Консорціумом підтримки доходів) або подавши заявку через онлайн-портал додатків ACCESS.
 - Income Maintenance Consortium (Консорціумом підтримки доходів): dhs.wi.gov/ forwardhealth/imagency/index.htm
 - Онлайн-портал додатків ACCESS: dhs.wi.gov/forwardhealth/index.htm aбо https:// access.wisconsin.gov/access/
- Ваш LTHD або агентство з переселення може допомогти з поданням заяви або витратами на тестування







SIMPLE

HEALTHKIT

- At-home HIV testing is now available.
- Cost is covered by the Wisconsin TB Dispensary Program.
- Contact the WTBP to order a test kit.

Clinician HIV Education

P-03576a

https://www.dhs.wisconsin.gov/publications/p03576a.pdf



DO YOU KNOW YOUR TB PATIENT'S HIV STATUS?



If your patient has active TB disease, here are a few reasons you should order them an HIV test:

- We recommend testing every patient with TB for HIV regardless of other risk factors.
- Active TB is a known risk factor for HIV.
- HIV increases the risk of acquiring M. tuberculosis.¹
- TB accelerates HIV progression to stage 3 (AIDS), and HIV accelerates LTBI progression to active TB disease.^{2,3}
- Globally, 6.7% of people newly diagnosed with TB in 2021 were also living with HIV.⁴
- In an 8-year study, 20.9% of patients diagnosed with TB and HIV did not survive.⁵

Patient HIV Education

P-03576

https://www.dhs.wisconsin.gov/publications/p03576.pdf

DOYOU KNOW YOUR HIV STATUS?

If you have active Tuberculosis (TB) disease, you should be tested for HIV.

- Active TB disease can cause HIV to progress faster.
- Untreated HIV can progress to AIDS. AIDS impacts your body's ability to fight off illnesses, including TB.





The CDC estimates that approximately 1 in 5 people who have HIV don't know they have it.

How can you get an HIV test?

Contact your doctor and ask them about getting an HIV test. This testing is covered by most insurance plans or through public health.

Need access to an HIV test?

DHS is partnering with Simple Health Kit to provide free at-home HIV tests that get sent to your door step. Ask your provider about the special access code for people with TB to order your kit.



Need additional support?

Receiving a TB or HIV diagnosis can be scary, but you are not alone. We are TB is a resource for you to participate in online support groups to get additional social support.



Financial Assistance Poster

Need Financial Assistance for Tuberculosis (TB) or Latent Tuberculosis Infection (LTBI) Treatment? P-03549
https://www.dhs.wisconsin.gov/publications/p03549.pdf



Need Financial Assistance for Tuberculosis (TB) or Latent Tuberculosis Infection (LTBI) Treatment?

Your local or Tribal health department may be able to provide:



Reduced or no cost medications for TB disease or LTBI.



Financial assistance for TB testing, doctor visits, and chest radiography.



Assistance with transportation and needed services to complete treatment.



Help applying to Wisconsin Medicaid or TB-only Medicaid if eligible.

Name of local or Tribal health department:



Wisconsin Tuberculosis Program https://www.dhs.wisconsin.gov/tb/index.htm 608-261-6319 | dhswitbprogram@dhs.wisconsin.gov

Wisconsin Tuberculosis Record

https://www.dhs.wisconsin.gov/library/coll ection/p-03429

Carry this record with you

- Keep this record up-to-date. It will serve as a permanent record of your TB (tuberculosis) status.
- * Check with your physician or public health nurse if you have any signs of active TB such as prolonged cough, weakness, tiredness, fever, weight loss, or coughing up blood.
- * Make sure all immunizations are up-to-date when visiting your health care provider.

Name of local or Tribal health department (LTHD):

Phone number:

State law requires all confirmed and suspected cases of TB to be reported to the LTHD and the Wisconsin TB Program. This wallet card is for those being evaluated for TB and Latent TB Infection (LTBI) who need to retain records of the evaluation.

Contact Information

608-261-6319 DHSWITBProgram@dhs.wisconsin.gov P-03429 (04/2023)



Wisconsin Tuberculosis Record









Wisconsin Department of Health Services I TB Program dhs.wisconsin.gov/TB

Name:	
TB status:	Active Infected Not infect
	us established:
	Date:
QFT T	spot
TST #1 result:	: mm Induration: Positive Negat
Date placed:	Date read:
TST #2 result	: mm Induration: Positive Negat
	Date read:
	ocation and date:
Results:	
Treatment Regimen:	3HP4R6-9INH3HR
	IPE Other:
Date started:	: Date completed:
Prescriber:	
	ddress of public health nurse for additional informati
radile did de	duress of public fleatin florse for additional informati
Public health	nurse signature:

Latent TB Publication: Ukrainian, Russian, Kirundi, Dari, and Burmese

https://www.dhs.wisconsin.gov/library/collection/p-42099b

LATENT TUBERCULOSIS INFECTION (LTBI)



Tuberculosis, or "TB," is a disease caused by germs called Mycobacterium tuberculosis bacteria. There are two conditions caused by TB bacteria: latent TB infection (LTBI) and TB disease. Tuberculosis, or TB disease, is when TB germs are actively growing in your body because your immune system cannot stop them from growing. They make you sick.

LTBI means you have TB germs in your body without making you sick. If you have LTBI, you do not feel sick and cannot spread TB germs to others. However, TB germs may become active in your body and start to grow. If this happens you will go from having LTBI to being sick with TB disease. If you have TB disease, you can get very sick and spread TB to other people.

*

How did I get LTBI?

- TB germs are spread through the air from one person to another. TB germs are put into the air when someone with TB disease coughs, laughs, sings or sneezes. If you breathe air that has TB germs, you may get LTBI.
- You cannot get TB from shaking hands, sitting on toilet seats, or sharing food and drinks.
- You will not know that you have LTBI unless you have a TB skin or blood test.
- If left untreated, LTBI can turn into TB disease.



What tests are available for LTBI?

- The TB skin test (Mantoux test) or TB blood test will show if you are likely to have TB germs in your body.
- If your TB skin test or TB blood test is positive, your doctor may also do a chest x-ray to look for signs of TB disease.
- If your chest x-ray does not show signs of TB disease and you are not sick, you will be diagnosed with LTBI.



How will I know if I have LTBI?

- Usually have a positive TB skin test or TB blood test
- Usually have a normal chest x-ray
- No TB germs found in sputum (phlegm) tests
- Cannot pass the TB germs to other people
- Do not feel sick

ЛАТЕНТНА ТУБЕРКУЛЬОЗНА ІНФЕКЦІЯ (LTBI)



(LATENT TUBERCULOSIS INFECTION (LTBI)

Туберкульоз, або ТВ, — це хвороба, спричинена мікробами, які називаються *Mycobacterium tuberculosis* бактерія. Існує два стани, спричинені бактеріями ТВ: latent ТВ infection (датентна ТВ інфекція) (LTBI) і <u>ТВ захворювання</u>. Туберкульоз, або ТВ, — це коли мікроби ТВ активно ростуть у вашому організмі, оскільки ваша імунна система не може зупинити їх зростання. Вони роблять вас хворими.

LTBI означає, що у вашому тілі є мікроби ТВ, але ви не захворіли. Якщо у вас LTBI, ви не відчуваєте себе хворим і не можете поширювати мікроби ТВ іншим. Проте мікроби ТВ можуть активізуватися у вашому тілі та почати рости. Якщо це станеться, ви перейдете з LTBI на ТВ захворювання. Якщо у вас ТВ, ви можете сильно захворіти та поширити ТВ на інших людей.

Як я захворів LTBI?

- ТВ мікроби поширюються по повітрю від однієї людини до іншої. ТВ мікроби потрапляють у повітря, коли хворий на ТВ кашляє, сміється, співає або чхає. Якщо ви вдихаєте повітря, яке містить мікроби ТВ, ви можете запазниться LTB.
- Ви не можете захворіти на ТВ через рукостискання, сидіння на сидіннях унітазу або спільну їжу та напої.
- Ви не дізнаєтеся, що у вас LTBI, якщо не зробитешкірну пробу на ТВ або аналіз крові.
- Якщо не лікувати, LTBI може перерости в ТВ захворювання.



Які тести доступні для LTBI?

- ▶ Шкірна проба на ТВ (проба Манту) або аналіз крові на ТВ покажуть, чи є у вашому організмі збульники ТВ
- Якщо ваш шкірний тест на ТВ або аналіз крові на ТВ позитивний, ваш лікар також може зробити рентген грудної клітки, щоб виявити ознаки ТВ.
- Якщо рентген грудної клітки не показує ознак захворювання на ТВ і ви не хворі, вам буде поставлено діагноз LTBI.

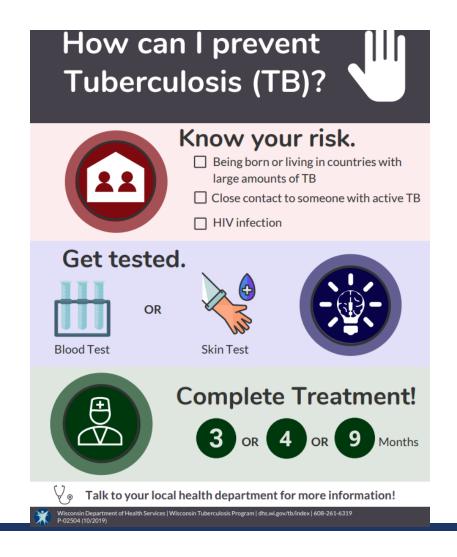


Як я дізнаюся, чи є в мене LTBI?

- Зазвичай буде позитивний шкірний тест на ТВ або аналіз крові на ТВ
- Зазвичай рентген грудної клітки нормальний
- У дослідженні мокротиння (флегми) мікроби ТВ не виявлені
- Не може передавати мікроби ТВ іншим людям.
- Не відчувайте себе хворим

How Can I Prevent TB

https://www.dhs.wisconsin.gov/library/collection/p-02504

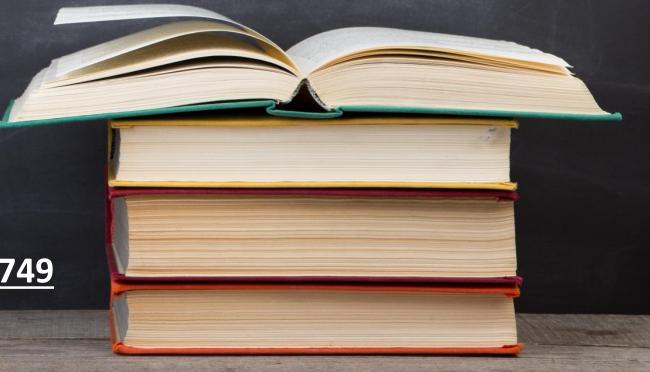




Recorded DHS Training

- TB 101
- Evaluation for TB Disease and Case Management
- TB Dispensary and Treatment Assistance Programs
- The TB Laboratory

https://vimeo.com/showcase/8771749



Wisconsin TB and Refugee Health Program Staff at DHS



Claire Leback



Yzejma Jashari



Pat Heger



Julie Tans Kersten



Mary Pulchinski



Duha Alhamidi



Andrea Liptack



Dr. E. Ann Misch



Questions?

TB Program Contact Information

• Phone: 608-261-6319

• Fax: 608-266-0049

Email:

DHSWITBProgram@dhs.wisconsin.gov

WTBP Website:

www.dhs.wi.gov/tb/index.htm

