



DOH 343-071 January 2015

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# Interjurisdictional Transfer Notifications

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## CONTENTS

<b>Forms Used in This Section .....</b>	<b>13.2</b>
<b>Introduction.....</b>	<b>13.3</b>
Purpose.....	13.3
Policy .....	13.4
<b>When to Initiate a Notification .....</b>	<b>13.5</b>
<b>How to Issue a Interjurisdictional Notification .....</b>	<b>13.6</b>
<b>Binational TB Card (Cure TB).....</b>	<b>13.7</b>
What Does CureTB Do? .....	13.7
What Does CureTB Not Do?.....	13.7
Types of Referrals.....	13.8
Issuing a Binational Card .....	13.8
<b>Resources and References .....</b>	<b>13.11</b>

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## Forms Used in This Section

[Forms](#) can be submitted to the Washington State TB Program by:

- Fax: 360-236-3405
  - Secure File Transfer (SFT – contact the [TB Program](#) for more information)
  - Mailing address: P.O. Box 47837 Olympia, WA 98504
  - Physical address: 310 Israel Rd SE Tumwater, WA 98501
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- [Interjurisdictional Transfer Notification](#)
  - [Interjurisdictional Transfer Notification Follow-Up](#)
  - [Binational Card Sample](#) (Spanish)
  - [CureTB Brochure](#)
  - [Binational Notification Form \(CureTB\)](#)

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# Introduction

## Purpose

Use this section to do the following:

- Notify public health agency staff in another jurisdiction that a person is moving (or has moved) to their jurisdiction who is a:
  - Verified or suspected case of TB disease;
  - [High-priority contact](#) to a smear-positive Class 3 or Class 5 pulmonary case, contact to a smear-negative Class 3 pulmonary case, or contact to a highly suspect Class 5 pulmonary case;
  - Documented convertor who has initiated treatment for LTBI;
  - Class 2 or Class 4 patient who has initiated treatment for LTBI; or
  - Close associate to a Class 3 index case with clinical presentation consistent with recently acquired disease in a source-case investigation or close associate to a child with LTBI in a source-case investigation.
- Follow up on notifications.
- Set up a Binational TB Card for persons traveling between Washington State and Mexico while receiving treatment for tuberculosis.
- Make CURE-TB referrals for TB patients and contacts who move between the United States and Mexico.

Some patients receiving treatment for TB disease in the United States move from one jurisdiction to another before completing treatment. Notifying the receiving local and/or state jurisdiction of a patient's impending arrival will prevent care from being interrupted and improve treatment outcomes.

The term interjurisdictional transfer notification refers to a referral or follow-up report. Before the patient moves, or as soon as it becomes apparent that a patient has moved, the referring jurisdiction provides a referral to the receiving jurisdiction. After the patient has moved, the receiving jurisdiction then provides the referring jurisdiction with a follow-up report.

## Policy

The Washington State Department of Health TB Program is responsible for coordination of transfer notifications between states and other local jurisdictions within the state. The LHJ should notify the Washington State Department of Health when a patient plans or requests to transfer to another jurisdiction. The receiving and referring jurisdictions should stay in communication until final dispensation of the patient is known.

# When to Initiate a Notification



For a definition of TB patient classifications, see the “Tuberculosis Classification System” topic in the Surveillance Section ([2.6](#))

**Table 1: Interjurisdictional Transfer Notifications and Follow-ups<sup>1</sup>**

Referral Type	When to Initiate	Notes
Verified and suspected cases of TB disease	When notified that a Class 3 or 5 patient is moving or has moved from the area for 30 days or more	May also initiate to coordinate DOT/eDOT while patient is visiting another area.
Contacts	After identifying a: <ul style="list-style-type: none"> <li>• High-priority contact to a smear-positive Class 3 or Class 5 pulmonary case</li> <li>• Contact to a smear-negative Class 3 pulmonary case</li> <li>• Contact to a highly suspect Class 5 pulmonary case</li> </ul>	Send individual referrals for each contact.
LTBI converters	When notified that a documented convertor who has initiated treatment is moving or has moved from the area for 30 days or more	
LTBI reactors	When notified that a Class 2 or 4 patient who has initiated treatment is moving or has moved from the area for 30 days or more	
Source case investigation for TB disease	After identifying a close associate to a Class 3 index case with clinical presentation consistent with recently acquired disease	Use primarily for associates to children under 5 years of age with TB disease. A younger age cut-off may be advisable because the focus would be on more recent transmission. <sup>2</sup>
Source case investigation for LTBI	After identifying a close associate to a child with LTBI	Use primarily for associates to children under 2 years of age with LTBI. <sup>2</sup>
Follow-Up Type	When to Initiate	Notes
Final disposition	When final status and/or outcome is known	

# How to Issue an Interjurisdictional Notification

- **Outside the United States:** Contact the [Washington State Department of Health TB Program](#).

The CDC has a process for international notification, available at <http://cdc.gov/tb/programs/international/default.htm>.

- **Inside the United States (within the state or between states):** See Table 2. An interjurisdictional TB notification system has been set up by the National Tuberculosis Controllers Association (NTCA) to facilitate and standardize communication between states. This system will enhance continuity and completeness of care, and improve outcome evaluation of verified cases.<sup>1</sup>

**Table 2: Referrals in the United States<sup>1</sup>**

Action	Transfers Within Washington	Transfers Between States
Make a referral	<p>The LHJ from which the patient is transferring should do the following as soon as possible:</p> <ul style="list-style-type: none"> <li>• Complete an Interjurisdictional Tuberculosis Notification form * and submit to WA State TB Program</li> <li>• Print a copy of the RVCT form from PHIMS TB for your records</li> <li>• In PHIMS TB, transfer patient to available LHJ</li> <li>• Call the patient's medical provider and arrange for transfer of the patient's records to the receiving physician (or to the jurisdiction receiving the patient if no receiving physician is designated)</li> </ul>	<p>The State and LHJ from which the patient is transferring should do the following as soon as possible:</p> <ul style="list-style-type: none"> <li>• Complete an Interjurisdictional Tuberculosis Notification form and submit to WA State TB Program</li> <li>• Print a copy of the RVCT form from PHIMS TB for your records</li> </ul>
Give the patient records	The LHJ from which the patient is transferring should provide the patient a copy of the treatment records	The LHJ from which the patient is transferring should provide the patient a copy of the referral and treatment records
Follow up on referrals	Complete Interjurisdictional TB Notification Follow-Up †	Complete Interjurisdictional TB Notification Follow-Up †
<p>* The NTCA's <a href="#">"Interjurisdictional Tuberculosis Notification"</a>            † The NTCA's <a href="#">"Interjurisdictional TB Notification Follow-Up"</a></p>		

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## Binational TB Card (CureTB)

The Washington State Department of Health TB Program is responsible for coordinating the process of referring patients traveling between Washington and Mexico to the CureTB: Binational TB Referral Program.

- TB patients who start care in Washington State will be given a card. If they leave for Mexico during the course of therapy, they will be referred to a provider in Mexico or, if leaving without notification of the LHJ, are advised to call the 1-800 number on the card to find a health clinic to continue their treatment in Mexico. The card includes toll-free numbers in the United States and Mexico, a unique card number, the site where the patient first received TB care, treatment start date, treatment regimen, and whether the patient received directly observed therapy.
- Patients who start TB therapy in Mexico will have a card issued to them in Mexico. If they leave for the United States, Washington State will be notified of this patient by CureTB to assure that the patient continues to receive and complete therapy.

Persons eligible for this card include anyone who:

- Has active TB;
- Is a TB suspect at risk of being deported;
- Is Mexico-born;
- Is expected to travel to Mexico while on TB therapy (such as a migrant worker);
- Has recently arrived from Mexico with drug therapy started in Mexico;
- Works in the United States and lives in Mexico.

### What Does CureTB Do?

- Referral and follow-up of suspected and verified tuberculosis cases.
- Referral/notification of contacts.
- Referrals for source case finding.
- Past history requests.

### What Does CureTB Not Do?

- Does not provide medications.
- Does not provide direct services to patients (medical consultation, laboratory, transportation).
- Does not ship materials or medications to patients.

## Types of Referrals

- **TB Cases and Suspects** - Patients with verified tuberculosis are referred to local health jurisdictions in the US or Mexico for initiation or continuation of treatment and follow-up. Patients suspected of active tuberculosis are referred for additional evaluation and/or for initiation/continuation of treatment.
- **Notification of Contacts** - Contacts to verified, infectious cases and to patients in whom there is high suspicion of infectiousness are notified to the local health jurisdictions where they reside in the US or Mexico.
- **Source Case Finding** - Requests for the search of an active case who may have infected patients currently under investigation for tuberculosis are submitted to local health jurisdictions in the US or Mexico.
- **Past History Requests** - Requests for patients' past medical histories pertaining to tuberculosis are submitted to the local health jurisdictions where they resided in the US or Mexico.
- **LTBI Treatment** - Treatment for Latent TB Infection.

## Issuing a Binational Card

A Binational card is issued to:

- TB cases (both suspect and counted) in all LHJs that have started TB medications and might return to or travel from Mexico during their treatment.

### LHJ Responsibilities

LHJs with TB cases who were born in Mexico and travel to/from Mexico:

- Provide information for Binational Card to [Washington State TB Nurse Consultant](#).
- Mail/deliver Binational Card to patient when received.
- Notify the department via the Binational TB Notification form when patient leaves the country.
- The department will fax Binational TB Notification form to CureTB.

## Role of the TB Nurse Consultant

- Discuss with LHJ TB Case Manager the potential need for Binational Card on each newly reported case born in Mexico with history of travel to/from Mexico
- If need for Binational Card identified, obtain the following information from LHJ TB Case Manager:
  - Full name of patient and date of birth.
  - Local home/cell phone number.
  - Contact name, address (town, county), phone number in Mexico for someone who knows where the patient will likely stay or visit. Completed CureTB form needs to include address and phone number (if possible) in Mexico. If no address or phone number, then do NOT send Binational form to CureTB, as they cannot provide assistance on any case if this data is missing.
  - Enter Binational Card unique number onto Binational log database and note criteria for providing the card.
  - Enter into PHIMS TB database Comment Section: Binational card number, date of issue, and Alien number, if applicable.
  - Date when patient moves to Mexico.
  - If time allows, provide CureTB with Binational information PRIOR to patient's move, and include potential departure/arrival dates. FAX Binational Notification Referral Form to (619) 692-8020.
  - For all TB cases that have moved to Mexico contact CureTB to see if patient has been located 30 days after TB case has left the U.S and at anticipated date of treatment completion.
  - If CureTB report patient was never found in Mexico, leave case closed as "moved", but make a note in the PHIMS TB comment section that "patient unable to be located in Mexico."
  - When (if) CureTB provides a report that patient has completed medications in Mexico, update PHIMS TB that medications have been completed and change the reason for closure from "moved" to "completed" and note the number of weeks of DOT and weeks of self-administered medications.
  - When (if) CureTB provides a report that patient had several months of medications but did not complete the treatment, place updated notes in the comments section, as well as, the amount of time (weeks) the patient had of treatment.

- CureTB often sends an updated/final report letter to the Washington State Department of Health TB Program.
- Notify LHJ that patient has completed medications.

### **TB patients originating in Mexico and traveling to Washington State**

- Cure TB will call the [Washington State Department of Health TB Program](#).
- The Nurse Consultant will contact the LHJ to share patient information and verify card number.
- When the patient completes therapy, the LHJ will enter the information into PHIMS TB to notify the TB Nurse Consultant and close the patient's case in Washington. The Nurse Consultant will send updated RVCT to CureTB.

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## Resources and References

### Resources

- [Binational Card Sample](#) (Spanish)
- [CureTB Brochure](#)
- [Binational Notification Form](#)
- [Migrant Clinician's Network](#)
- [CureTB](#)
- [Interjurisdictional Transfers \(NTCA\)](#)

### References

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<sup>1</sup> NTCA, "*Interjurisdictional Tuberculosis (TB) Notification—National Tuberculosis Controllers Association Recommendations*," March 2002, < <http://www.nyc.gov/html/doh/downloads/pdf/tb/tb-sp-protocol-3.1.3a.pdf> >, accessed on November 7, 2014.

<sup>2</sup> CDC and NTCA, Guidelines for the Investigation of Contacts of Persons with Infectious Tuberculosis; Recommendations from the National Tuberculosis Controllers Association and CDC, and Guidelines for using the QuantiFERON®-TB Gold Test for

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Detecting *Mycobacterium tuberculosis* Infection, United States," *MMWR*, Vol. 54, No. RR-15, 2005, <  
<http://www.cdc.gov/mmwr/pdf/rr/rr5415.pdf> >, accessed on November 7, 2014.