

TB Prevention among Persons with Medi-Cal

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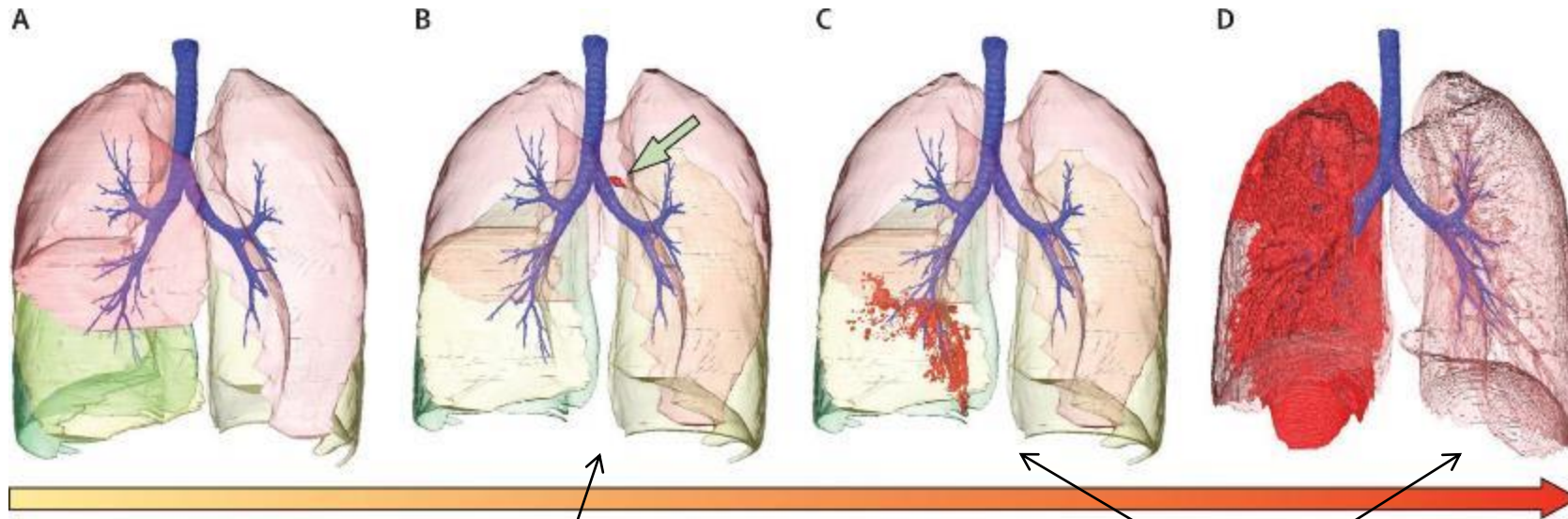
Tuberculosis Control Branch

California Department of Public Health

April 23, 2025



Spectrum of TB disease



- A – Clearance
- B – Latent infection
- C – Pulmonary infection (active)
- D – Disseminated infection (active)

Latent TB Infection

- Absence of TB symptoms
- Positive TST¹ or IGRA² result
- Chest radiograph normal
- Not infectious

¹TB skin test

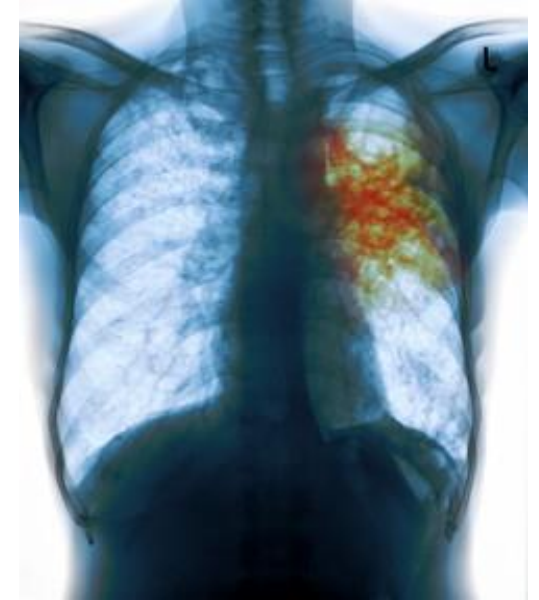
²Interferon gamma release assay

Active TB Disease

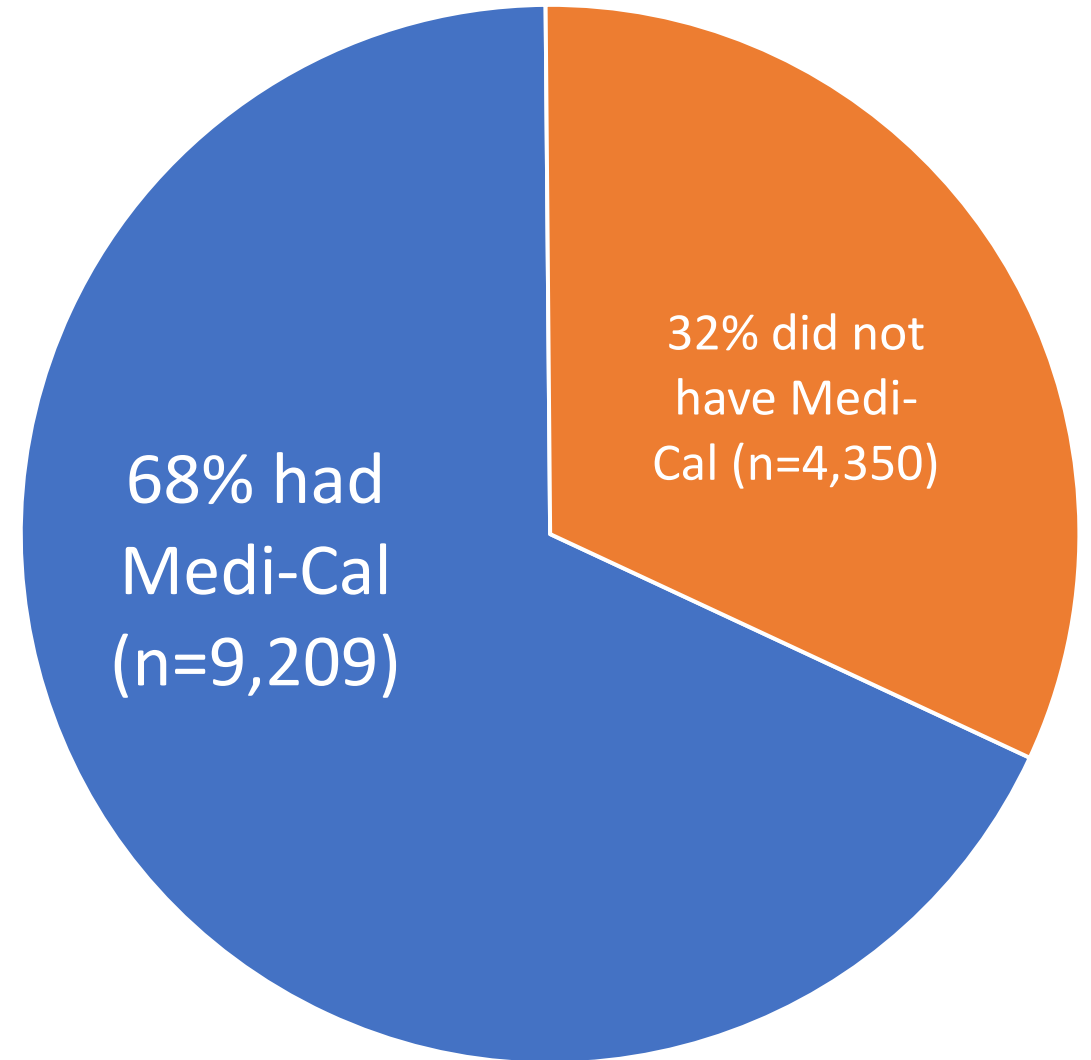
- Symptoms such as cough, fever
- TST or IGRA is usually positive
- Chest radiograph is usually abnormal
- Respiratory specimens usually culture positive (smear positive in about 50% of patients)
- Infectious and can be deadly

TB is a preventable disease that continues to cause harm

- Every 4 hours a Californian is diagnosed with TB disease with > 2000 cases /year
- 50% with TB disease are hospitalized
- 1 in 7 with TB die
- Costs are large for California communities: >\$200million/year



Two thirds of people
in California with
active TB disease
had Medi-Cal



Of people with TB during 2016-2022. Medi-Cal for at least one month anytime between 2015-2022.
Source: Data collaboration between CDPH TB Control Branch and Medi-Cal

How can more TB be
prevented?

**Most TB disease in California
arises from undetected and
untreated latent TB infection**

Screen

for risk

Millions of Medi-Cal enrollees are at risk for TB

Population at Risk	Medi-Cal Enrollees (2015-2022)
Born outside the U.S.	7.7 million
Homeless*	2.2 million
Immunosuppressed*	830,000
Incarcerated*	210,000

* Risk defined as **ever** having experienced homelessness, incarceration, or immunosuppression.

Test

those with
risk

Less than half of Medi-Cal enrollees at risk for TB got tested

	Born outside the U.S.	Homeless	Immuno- suppressed
LTBI Testing/Screening	21%	27%	40%
Positivity	25%	12%	19%

* Based on sample of 10,000 persons enrolled in Medi-Cal 2015-2022 with 12 months or more of coverage. May underestimate true value because it relies on diagnosis and test codes from paid claims as well as electronic laboratory reporting for part of period. Positivity defined as the fraction positive out of those tested.

Treat

latent TB
infection

Most Medi-Cal enrollees who had a positive test were not treated

	Born outside the U.S.	Homeless	Immuno- suppressed
Started Treatment	22%	19%	29%
Completed Treatment	45%	33%	45%

* Based on sample of 10,000 persons enrolled in Medi-Cal 2015-2022 with 12 months or more of coverage. May underestimate true value because it relies on drug codes from paid claims as well as electronic laboratory reporting for part of period. Started treatment defined as the fraction started treatment out of those who were TST or IGRA positive. Completed treatment defined as the fraction completed treatment out of those started.

Recent examples of missed opportunities to prevent TB

Pregnant patient tested positive on interferon gamma release assay(IGRA) TB test

- No treatment by clinicians following delivery
- Baby infected and developed TB meningitis

Young patient with diabetes who previously lived in Mexico and seen multiple times for diabetes care, vaccines and BP checks

- Not tested for TB infection
- Developed TB disease and died at age 36

Evidence-based TB prevention

Recommended by:
US Preventive Services
Task Force, CDC, CDPH.

Screen

*Screen for risk of TB infection

Test

Test **using an IGRA**, if risk is present

Treat

Treat with **3- to 4-month rifamycin-based regimens**

*non-U.S.-born or prolonged travel, immunocompromised, TB contact, history of homelessness or incarceration

Health and Safety Code H&S 121560

Assembly Bill 2132

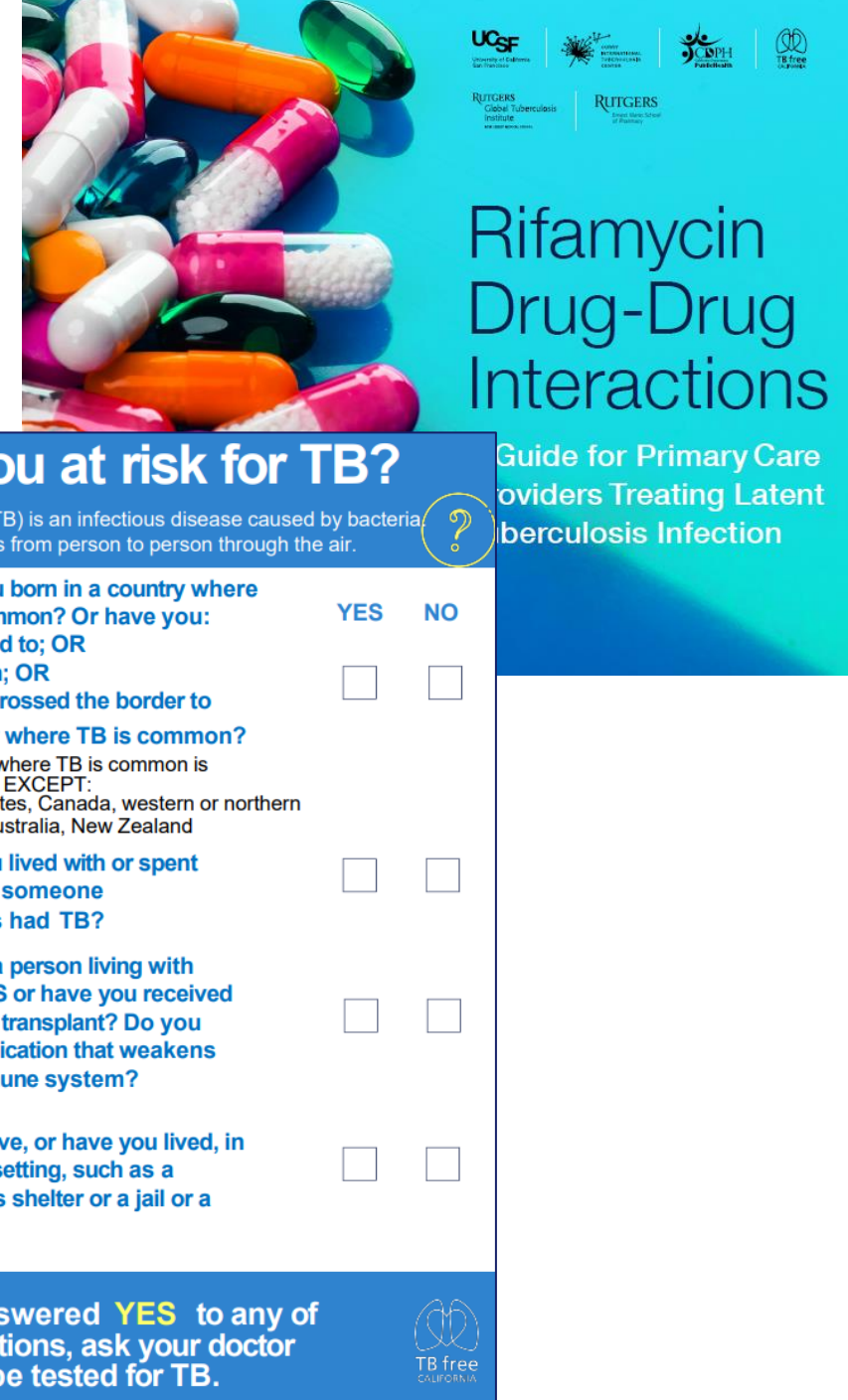
- Requires adult patients receiving primary care services to be offered a TB test if risk factors are identified, followed by provision or referral for appropriate follow-up care
-
- Took effect on January 1, 2025
- More information:
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/AB-2132.aspx>

TB Provider Resources

- **Who to test**
 - [Adult Risk Assessment](#)
 - [Pediatric Risk Assessment](#)
- **How to test and treat**
 - [Prevent TB in 4-steps](#)
 - [Rifamycin Drug-Drug Interaction Guide](#)
- **Benefits of TB prevention**
 - [Cost and Consequences of TB in California](#)
 - [AB2132 Resources](#)

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/TB_Provider_Resources.aspx

Confidential - Low







Rifamycin Drug-Drug Interactions

Guide for Primary Care Providers Treating Latent Tuberculosis Infection

Are you at risk for TB?

Tuberculosis (TB) is an infectious disease caused by bacteria. It spreads from person to person through the air.

	YES	NO
 Were you born in a country where TB is common? Or have you: <ul style="list-style-type: none">traveled to; ORlived in; ORoften crossed the border to a country where TB is common? A country where TB is common is anywhere, EXCEPT: United States, Canada, western or northern Europe, Australia, New Zealand	<input type="checkbox"/>	<input type="checkbox"/>
 Have you lived with or spent time with someone who has had TB?	<input type="checkbox"/>	<input type="checkbox"/>
 Are you a person living with HIV/ AIDS or have you received an organ transplant? Do you take medication that weakens your immune system?	<input type="checkbox"/>	<input type="checkbox"/>
 Do you live, or have you lived, in a group setting, such as a homeless shelter or a jail or a prison?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered **YES** to any of these questions, ask your doctor to be tested for TB.

TB free CALIFORNIA

Logos: UCSF, University of California, San Francisco; RUTGERS Global Tuberculosis Institute; RUTGERS Robert Wood Johnson Medical School; TB free CALIFORNIA

Consultation resources



Your local public health TB control program:

<https://ctca.org/wp-content/uploads/CTCA-Directory.pdf>



California Dept of Public Health TB Control Branch:

tbc@cdph.ca.gov / 510-620-3000



UCSF Curry International TB Center Warmline:

(877) 390-6682 <https://www.currytbcenter.ucsf.edu/>

Summary

The problem

TB disease is life-threatening

68% of TB disease occurs among Medi-Cal enrollees

TB disease and deaths are preventable by detecting and treating latent TB infection(LTBI)

LTBI testing and treatment rates are low for Medi-Cal enrollees at risk

Addressing the problem

LTBI testing and treatment is recommended by USPSTF and required by California Law

Action

Make TB prevention routine in your practice

Access resources to support TB prevention

Medi-Cal providers have a crucial role!

Thank you!

CDPH and CDHCS Medi-Cal collaboration

CDPH TBCB team (tbcb@cdph.ca.gov)
and Medi-Cal QI team

END



FOR PREGNANT
PEOPLE AND
NEW PARENTS


ANSWERING YOUR
QUESTIONS ABOUT
TUBERCULOSIS (TB)



Resources for patients

[Waiting room posters
and more available](#)





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TUBERCULOSIS CONTROL BRANCH

TB Free California

TB Testing

TB and Children

TB Community Resources


TB Provider Resources

Contact Us

TBCB homepage

Spanish (Español) | Simplified Chinese (简体中文) (PDF) | Vietnamese (tiếng việt) (PDF) | Traditional Chinese (繁體中文) (PDF)

Understanding Your Test Results



Positive (abnormal result)

If your blood test result is positive, it means you have TB germs in your body. A doctor or healthcare provider should examine you. Most people with positive TB tests feel just fine and have no signs of illness, because they have latent (or "hidden") TB infection. Latent TB infection means that your body is able to keep you from feeling sick, but TB germs in your body could make you sick in the future. When you are sick from TB germs, it

您知道嗎？

在加州, 每7名亞裔就有1名患有潛伏性肺結核感染 (LTBI).

如果沒有及時治療, 感染就可能發展成活動性肺結核疾病, 從而令患者變得十分虛弱, 或傳染病菌給他們的家人

請和您的醫生談談潛伏性肺結核的篩檢, 這樣您就可以照顧好您自己, 以及保護您的家人。



LEARN MORE ABOUT 潛伏性肺結核

bit.ly/CDPHTB

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