



United States-México Cross-Border Pilot Project

Many binational public-health programs and activities administered by local, state, or federal entities continue to experience problems related to the importation or exportation of medicines, specimens, materials, and equipment essential for the support of binational program activities. This delay significantly affects initiatives underway in the border region and raises the need to clarify the existing disparate procedures for transportation of medical products to or from the United States and México.

Each of the four border states support critical programs impacting binational tuberculosis cases and vital cross-border infectious disease activities that depend on efficient and rapid crossing of specimens and medicines. Support to these programs is absolutely critical, especially during infectious disease outbreaks, such as the H1N1 influenza crisis.

The Department of Health and Human Services (HHS) through the Office of Global Health Affairs and the United States-México Border Health Commission (BHC), in partnership with the Mexican Secretariat of Health, developed plans for a pilot project to determine the barriers to cross-border shipments, following discussions at the annual meeting of the BHC in March 2008.

With the cooperation of key agencies, in particular the Customs and Border Protection (CBP) of the Department of Homeland Security (DHS), new guidance has been proposed and recently approved by the CBP that will modify current operating procedures at U.S. ports-of-entry to allow for a more regular flow of samples and medications across the border. More importantly, these modified procedures will work to establish a uniform borderwide process (among all ports-of-entry).

Concurrent efforts have been ongoing on the Mexican side through the support of the México Section of the BHC to insure coordination on all north to south transport issues.

The BHC will work in concert with the U.S.-México border CBP Offices of Field Operations to coordinate the operational phase of this pilot project (proposed for 120-days), and after final review of the outcomes of the pilot by the CBP and HHS, work to insure effective implementation of the policy and procedures to be required of all users.