Update on the Binational Health Card for Tuberculosis

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The binational case management and referral system, also known as the Binational Card project for tuberculosis, is the product of a close collaboration between CDC, the Mexico Ministry of Health, the United States-Mexico Border Health Commission, U.S. and Mexican border state and migrant health partners.

The goals of this system are to:

1) Ensure continuity of care and completion of treatment
2) Reduce TB and prevent drug resistance in both countries
3) Coordinate referral of patients between health systems, drawing upon the referral/counter-referral experience of: CDC sponsored binational TB projects, San Diego County HHS (CureTB), Migrant Clinicians Network (TBNet, and to
4) Provide a model for other settings and diseases

The Project was launched on March 27, 2003 as part of a World TB Day celebration in El Paso, Texas. More than 150 federal, state, local key stakeholders in border health and TB control on both sides of the border were present.

Progress to date (as of June 3, 2004):

U.S. side pilot sites

Texas (El Paso, Cameron County, Webb County) / New Mexico
- 99 Cards distributed
  - 50 patients to Mexico
  - 0 patients from Mexico

San Diego, California
- 141 Cards distributed
  - 16 patients to Mexico
  - 6 patients from Mexico

Arizona
- 45 Cards distributed
  - 20 patients to Mexico
  - 0 patients from Mexico

Tennessee
- 4 Cards distributed
  - 0 patients to Mexico
  - 0 patients from Mexico
Chicago, Ill
- 1 Card distributed
  - 0 patients to Mexico
  - 0 patients from Mexico

Washington State
- 2 Cards distributed
  - 0 patients to Mexico
  - 0 patients from Mexico

MEXICO side

Ciudad Juarez, Chihuahua
- 100 Cards distributed
  - 0 patients to USA
  - 12 patients from USA

Matamoros, Tamaulipas
- 345 Cards distributed
  - 21 patients to USA
  - 4 patients from USA

Tijuana, Baja California
- 469 Cards distributed
  - 7 patients to USA
  - 16 patients from USA

Sonora
- 34 Cards distributed
  - 3 patients to USA
  - 5 patients from USA

Coahuila
- 29 Cards distributed
  - 1 patient to USA
  - 0 patients from USA

Nuevo Leon
- 7 Cards distributed
  - 0 patients to USA
  - 0 patients from USA

With respect to training activities, all sites have received training and have received all materials. Further, the Card project was included in 4 Curry Model Center trainings for health care providers conducted along the U.S.-Mexico border. New trainings will be incorporated in local and national trainings/meetings.
With respect to educational activities, Mexico has designed and distributed posters and brochures for patients describing the Project. Further, a flipbook ("rotofolio") for patients is currently being finalized for both U.S. and Mexico Pilot Sites—the goal is to distribute these rotofolios by September 2004.

There are plans to evaluate this project and a formal evaluation protocol has been finalized. The main purpose of the evaluation is to document the processes and procedures, improve and enhance operations, and assess if expansion would be beneficial. The formal evaluation will include interviews and focus groups with providers and patients. The evaluation will address the following questions: 1) Is the binational referral system facilitating completion of therapy for patients traveling across the U.S.-Mexico border?; 2) Can we improve project efficiency?; 3) How much does it cost?; and 4) Is the model sufficiently effective and feasible to warrant replication in other sites, and/or for other diseases?

The first, more informal, site visits done by the CDC evaluators were conducted in May and July 2003 to both the current U.S. pilot sites and to Mexico City to visit the National TB Program. Further, an all Partners evaluation/progress meeting occurred on January 22-23, 2004, to discuss project progress, site-specific performance, and address immediate problems. Formal evaluation indicators were designed as part of this progress meeting. The formal evaluation site visits will occur in August and September, 2004.

Although the CDC and the Mexican NTP are leading this effort, there are numerous U.S. and Mexican governmental organizations at the federal, state, and local levels, as well as NGO’s working on binational and U.S.-Mexico border health issues who have been involved in this project.

We feel that the considerable efforts have been necessary and successful in achieving a consensus on how to move forward on this somewhat complex binational project. Both countries’ public health systems see the establishment of the binational referral and information system for tuberculosis as a critical step to respond to identified TB needs in the region, represent the strong consensus for binational collaboration, as a way to improve treatment outcomes, and as providing a model for other similar settings or other diseases in this setting.

If this project proves successful in the pilot sites, as based on the evaluation results available by the end of the year, the goal will be to extend it to all of the U.S. and Mexico.