Annual Meeting of the United States-Mexico Border Health Commission
McAllen, Texas

Providing international leadership to optimize health and quality of life along the United States-México Border
SUMMARY

U.S. Secretary of Health and Human Services (HHS) Michael O. Leavitt and Mexican Secretary of Health José Ángel Córdova Villalobos, M.D., co-chaired the Annual Meeting of the U.S.-México Border Health Commission (BHC), held in McAllen, Texas, from March 3-4, 2008.

This was the first time both Secretary Leavitt and Secretary Córdova attended a formal Commission meeting. During the Commission meeting, the Secretaries renewed a Memorandum of Understanding between the United States and México on health, first established in 1996, and last renewed in 2001. The new version of the agreement includes reference(s) to the BHC for the first time.

Secretary Leavitt signed a Joint Statement that indicates HHS, the Mexican Secretariat of Health (SSA) and the Pan American Health Organization (PAHO) will work together towards positioning the PAHO Border Office strategically, and to ensure all binational resources are operating consistent with and in full support of the Commission.

Secretary Leavitt held a meeting with members of the U.S. Section of the BHC to discuss their views and priorities for the border region. Secretary Córdova met with members of the México Section and Outreach Office Coordinators to receive an update on the 2007 activity reports and 2008 work plans.

Finally, HHS and SSA sketched out a path for completing the necessary milestones to release the remaining funds for early-warning infectious-disease (EWIDS) activities on the Mexican side of the border.

Meeting of the BHC Border-Health Research (BHR) Work Group:

José Manuel de la Rosa, M.D. (U.S. Co-Chair), and Dora Elia Cortés Hernandez, M.D. (México Co-Chair), led the meeting.
The Work Group discussed the progress on the Border-Health Research Initiative and the work of the Border-Health Research Expert Panel. The Work Group received an update on the first meeting of the binational panel, in November 2007, which discussed the development of a research agenda. The Work Group also discussed its progress on drafting a background paper related to border-health research done in the past 20 years, still a work in progress.

The Work Group also received an update on the proposal by the Prevention Research Centers of the HHS Centers for Disease Control and Prevention (CDC). The “Partnership Opportunity of Research,” would include a $20,000 donation for research, as well as a full-time intern contracted for 2009 to conduct research for the BHR Work Group.

An update on the Border Occupational Safety and Health Research Partnership revealed the organization’s proposal to continue active involvement and funding for the Ventanillas de Salud program.

To provide an update on the U.S.-México Border Ovations Grant, Maria Teresa Cerqueira, M.D., Chief of the Pan American Health Organization (PAHO) Border Office, in El Paso, Texas, presented on the work of the Coalition Centers of Excellence to counter chronic disease. Four academic institutions are participating in the project. A current objective is to determine how each institution will conduct its research.

Rosaly Correa-de-Araujo, M.D., Delegate to Secretary Leavitt and Director of the Office of the Americas Region in the HHS Office of Global Health Affairs (OGHA), and Gudelia Rangel Gómez, M.D., Coordinator of the Baja California Outreach Office, presented an update on the Border Health Status Report. The presentations highlighted key findings on access to care, morbidity and mortality data for both sides of the border. Chapters of the Border Health Status report are still under revision, and the report is expected to be released to the public in the next few months.

Sam Notzon, Special Assistant for Global Statistics at the HHS/CDC, National Center for Health Statistics (NCHS) presented an update on the American Public Health Association (APHA) meeting and it’s Border Health Panel Session. Twelve abstracts were submitted to the APHA, all accepted, and they will be part of a panel session on border-health issues during the 2008 APHA meeting, in San Diego. The abstracts focus on topics of
relevance to the region, such as diabetes and other chronic conditions, maternal and child health, access to health care and workforce data. Dr. Correa-de-Araujo submitted an abstract on gender differences in access to care and in morbidity/mortality.

Meeting of the BHC Priority-Setting Standing Committee (PSC):

Larry Kline, M.D. (U.S. Co-Chair), and Abelardo García Cantú, M.D. (México Co-Chair), led the meeting.

The meeting included a presentation by Eddie Olivarez, President of the United States-México Border Health Association (USMBHA), on the issues of alignment between the BHC and USMBHA. Dr. Cerqueira presented on PAHO, including the approved work plan for 2008-2009, which contains plans for the sponsorship of the inaugural events of the National Infant Immunization Week/Vaccination Week of the Americas (NIIW/VWA), tentatively set to be a “Caravan for Health.”

Dr. Brian Smith, Regional Director for Public Health Region 11 of the Texas Department of State Health Services, presented a report on listeriosis prevention in the Texas-Tamaulipas region. Key findings of this report indicate the bacterial infection listeriosis is more prominent on the border because of the illegal importation of unpasteurized cheeses from México into the United States, for sale on the streets and in flea markets. In 2003, health authorities reported 41 cases and 15 deaths; in 2007, authorities reported significantly more cases (64) but fewer deaths (8). Future possibilities to minimize or eliminate the problem include changing the limitation of importing cheese into the United States from ten kilos to zero kilos, and/or banning importation completely, which would result in the confiscation of products at the border. Another suggestion presented during the meeting relates to the development of a campaign to educate the public and public-health organizations on the dangers of listeriosis, as well as working with the source of the problem directly by having plants improve their pasteurizing processes.

Dr. Luis Fernando Garza Frausto, Director of Health Protection and Prevention, at SSA, gave a presentation on the prevention of dengue fever in Tamaulipas state. Future plans for the fight against dengue deal with creating and implementing interventions with many organizations; finding ways to prevent the disease; and increasing public awareness. Meetings of the State General Council of Health and the State Health-Security Committee have
taken place, as well as a “Strengthen the Fight Against Dengue Week.”

Kassie Rogers, Coordinator of the Texas BHC Outreach Office/Office of Border Health at the Texas Department of State Health Services, presented a report on the Texas-México Strategic Planning Project. The purpose of this project is to produce a data-driven, three-to-four-year plan for eight or more Binational Health Councils, to improve health outcomes in certain areas, and fiscal capacity-building and system improvements for Binational Health Councils. Ms. Rogers explained that a key outcome of this project would be to bring additional help and assistance to the Commission’s Outreach Offices. The Commission was to sign a commitment sheet by March 5, 2008, and to recruit at least eight Binational Health Councils to commit to this project by March 15, 2008.

The committee’s co-chairs, Dr. Kline and Dr. García Cantú, presented an update on the BHC’s directions and priorities. The PSC welcomes and would appreciate more input from the México Section. The Committee would also like to see the Budget Committee become more involved with the PSC, to initiate plans together.

Meeting of the BHC Communications and Outreach Work Group:

Dr. Cecilia Rosales (U.S. Co-Chair) chaired the meeting; attending for the México Section were Ambassador Eleazar Ruiz y Ávila, México Section Executive Secretary, and Dra. Rosa Alicia Luna Vázquez (delegate for Dr. Bustamante Moreno), Deputy Director of Health at the Baja California Department of Health.

The Work Group discussed the actions on a proposed communication plan for the BHC. Both internal and external forms of communication are in the plan’s objectives, as well as a proposal to improve the BHC’s website. Discussions touched on the need for a better internal communication flow between the U.S. and México sections, as well as with the members. The Work Group suggested the plan include a list of priorities, such as an index of the different communication areas, both internal and external. The discussion also addressed plans to clean up the website to make it less busy and more user-friendly. Key suggestions included the need to form a technical work group to make the improvements, and to develop a protocol for updating the website, including presenting any changes to the Communications and Outreach Work Group. The Information Technology Officer and the Public Information Officer of the
U.S. Section Staff (Tessada) will be part of the Work Group from now on.

**BHC Business Session:**

Dr. Correa-de-Araujo, and Dr. María de los Ángeles Fromow, Secretary Córdova’s Special Coordinator and Liaison for Social Participation at SSA, co-chaired the meeting.

The session included numerous updates, including a presentation by Eddie Olivarez, Chief Administrative Officer of the Hidalgo County Health Department, on the 2007 National Infant Immunization Week in Hidalgo, Texas. Over 100 families attended the week’s events, which administered over 1,000 immunizations.

Robert Guerrero, Director of the Office of Border Health at the Arizona Department of Health Services, presented a report on the U.S. Tuberculosis (TB) Legal-Issues Forum, which had the objective of identifying legal considerations and barriers regarding TB control for patients who move across jurisdictional borders. Public-health staff and legal counsel from the U.S. border States attended the presentation. The purpose was for the States to gain a mutual understanding of each participating State’s laws to detect and control TB and to propose strategies and solutions to reduce obstacles to treatment. Recommendations included holding a binational forum on TB Control and the law.

The discussion continued with Dr. Diana Schneider, Senior Epidemiologist from U.S. Immigration and Customs Enforcement within the U.S. Department of Homeland Security, who presented on issues in infectious disease control. Recommendations included identifying ways to share information on patients on both sides of the border, and expanding epidemiologic surveillance initiatives to the 10 border States.

Dr. Martin Castellanos Joya, Director of the National Tuberculosis Program at SSA, gave an update on the proposed México Legal Issues Forum, which produced the plan of action “TB 2007-2012.” This plan unifies criteria, strategies and activities to control TB. It also includes the dissemination of a charter of patients’ rights and responsibilities, the development of a basic guide to TB adherence to treatment and brochures on the basics of TB. Twenty-five projects are underway for 2008.

Sam Notzon, Special Assistant for Global Statistics at the National Center for Health Statistics (NCHS) within HHS/CDC,
provided an update on the mid-term status on U.S. Healthy Border 2010.

Dr. Correa-de-Araujo and Dr. Gudelia Rangel Gómez presented an update on the Border Health Status Report. Using key findings on access to care, and morbidity and mortality data for both sides of the border, chapters of the report continue under review and revision.

The Co-Chairs of the BHC’s Border-Health Research Work Group, Drs. José Manuel de la Rosa and Dora Elia Cortés Hernandez, presented a report on the items discussed during the group’s meeting held earlier in the day. Drs. Larry Kline and Abelardo García Cantú, Co-Chairs of the BHC’s Priority-Setting Standing Committee, also discussed the outcomes of that Committee’s meeting.

Dr. Correa-de-Araujo and José Francisco Hernández Aguilar, Delegate to Secretary Córdova, and Director General for International Relations at SSA, discussed progress on the 2006-2007 Annual Report of the BHC, which remains under review.

The Business Session concluded with the proposal for hosting the 2009 Annual Meeting of the BHC in México. The exact location in México is still pending.

BHC Plenary Session:

Dr. Correa-de-Araujo opened the session by introducing both Secretaries and other authorities at the head table.

The Honorable Rodolfo Torre Cantú, M.D., Secretary of Health of the State of Tamaulipas, presented an update on the 2007 Border Binational Health Week in México. Ventanillas de Salud workshops took place, along with a Domestic Violence Health Fair and a Chronic-Disease Conference. In Tijuana, over 200 people received immunizations.

An update on the Binational Pandemic-Influenza Table Top exercise followed. Dr. John Kurata, Director of the California Office of Border Health within the California Department of Health Services, reported on the goal of the project, to develop an integrated public-health strategy in the border region to protect and facilitate the response to pandemic influenza. To date, three table top exercises have taken place. A key suggestion was for California to develop a strategy document out of the results from the table tops.
Secretary Leavitt led the rest of the plenary session. He and Secretary Córdova provided the Commission with an update on the most important accomplishments from their joint activities, as follows:

**Early-Warning Infectious-Disease Surveillance (EWIDS)** – Secretary Leavitt highlighted key outcomes of the $5.4 million award (2006) to support the EWIDS project along the Mexican side of the United States-México border. A total of seven projects are ongoing: one in México City, and one in each of the six Mexican Border States (with a total of 27 sub-projects). The main purpose of the grant was to link México into a continental health-security system in the following concrete ways: 1) Upgrading one laboratory in each of the six Mexican border States to Biosafety Level (BSL) Two, through equipment purchases and the training of staff; 2) Ensuring these State-level labs on the border can communicate and exchange data with each other, in real time; 3) Ensuring these State-level labs on the border can communicate and exchange data with the Secretarial Operations Centers in México City; 4) Completing protocols to ensure connectivity of the operations center in México City with the Secretary’s Operations Center in Washington, D.C.; 5) Upgrading the Mexican National Reference Laboratory (INDRE) so it can achieve full certification at BSL Three, through the purchasing of equipment and the training of staff; and 6) Qualifying INDRE as a member of the Laboratory Response Network, managed by HHS/CDC. The Secretary stated that, although the two sides have made some progress, and HHS continues to support the EWIDS project, HHS and Mexican experts need to engage more actively at the technical level through joint meetings and site visits to ensure we move the project forward and achieve the intended results.

**Closer Cooperation Between the BHC and PAHO** – Secretary Leavitt announced the outcomes of a meeting he and Secretary Córdova held with Dr. Mirta Roses, the Director of PAHO, prior to the meeting of the BHC in McAllen. As Member States of PAHO, both Secretaries indicated it was time to explore new ways to position the PAHO Border Office strategically, and to ensure all binational resources are operating consistent with and in full support of the framework of the Commission. The two Secretaries and the Director of the PAHO Office in El Paso signed a Joint Statement during the BHC plenary session to commit to the formation of a tripartite workgroup, which will present a detailed alignment plan in 60 days. The first meeting of the group was scheduled between staff from the U.S. and Mexican
Sections of the BHC and the PAHO Field Office for March 25-26, 2008, in El Paso.

**Binational Health Insurance**—Secretary Leavitt briefly discussed the findings of the HHS Working Group on Binational Health Insurance, and explained his desire to explore ways to promote private-sector health-care coverage for Mexican nationals who are working legally in the United States. The Secretary highlighted the HHS Working Group and identified a range of barriers to implementing a pilot study in the United States, including Texas legislation that does not allow health maintenance organizations (HMOs) to market, sell, or operate cross-border plans, and restrictions in the current U.S. Medicare law that clearly prohibit payment for items and care furnished outside the United States, except in certain, very limited circumstances. Nevertheless, the Secretary invited Mexican counterparts to join the Working Group, to identify potential alternatives to tackling the challenges of private-sector insurance coverage at the border. The binational working group is expected to meet in the next few weeks.

**Renewal of the Memorandum of Understanding (MOU) on Health between the United States and México**—To reflect the current realities of our bilateral cooperation, Secretary Leavitt and Secretary Córdova renewed a Memorandum of Understanding, first established in 1996, and last renewed in 2001. The new version includes reference(s) to the BHC for the first time, and pledges a continuous commitment to work together to address common issues of public health and science. The following are the key areas of cooperation covered by the MOU: (1) The BHC and other efforts in the United States-México border area; (2) Public-health emergency preparedness and response; (3) Health-related concerns of women and special populations, including migrants, older persons, persons with special needs, adolescents and children, other vulnerable groups, and border populations; (4) Delivery systems and priorities for primary health care; (5) Public policies oriented to disease prevention and health promotion; (6) The detection, surveillance, and reporting of infectious and chronic diseases, to enable better tracking and analyses of prevalence and trends, so as to improve the prevention and care of, and the response to, these diseases; (7) Other public-health areas, including, but not limited to, environmental health; occupational health; maternal and child health; aging; mental health; nutrition; and disease prevention and health promotion; as well as special issues, such as HIV/AIDS, cancer and the prevention and treatment of substance abuse; (8) The development and training of health manpower; (9)
The quality of the delivery of health care, and the safety of patients in hospitals; (10) The delivery of medical care with cultural and linguistic sensitivity; (11) Health-related regulated products, specifically foods, drugs (including biologics), medicines, cosmetics, medical devices, radiation-emitting electronic products and related products; (12) Health-information technology and health and human-information systems, including telecommunications, telemedicine, biomedical equipment, statistical methodologies, and the interoperability of information systems; and, (13) Biomedical (including biomedicine, biotechnology, genomic medicine, nanotechnology), behavioral, public-health and health-care research.

Import-Safety Forum – Secretary Leavitt successfully held an import-safety forum following the Annual Meeting of the BHC. The Secretary presented his vision behind the HHS/FDA Food-Protection Plan and the Cabinet-level Action Plan on Import Safety. The audience contained prominent private-sector guests from the border region who are involved in numerous industries, such as candy and food products, medical supplies and devices, water purification, citrus and food products, and retail food products. The purpose of the forum was to have a candid conversation on import safety with business people from the United States-México border region, and to discuss with Mexican officials potential joint actions to improve the safety of consumer products.

MEETING BETWEEN SECRETARY LEAVITT AND THE U.S. SECTION OF THE BHC

In the margins of the Plenary, Secretary Leavitt carried on a productive meeting with members of the U.S. Section of the BHC. Members raised the specific issue of difficulties with the cross-border transportation of medicines, specimens, materials and equipment between the United States and México. Many U.S. and Méxican binational public-health programs or activities administered by local, State or Federal entities continue to experience problems at varying levels related to the importation or exportation (to or from México) of medicines, specimens, materials and equipment. The members indicated there are a number of existing formal and informal avenues for facilitating the movement of items, in either direction, provided through U.S. or Mexican Federal Departments, or through local or State binational agreements, but none works consistently or smoothly. Members of the Commission pointed out that local negotiations and relationship-building on both sides of the border are often the only way to make sure a shipment gets across the border.
The Secretary charged the group to come up with a clear definition of the challenge, and to identify key players and proposals to help him convene a group of senior officials within the U.S. Government to propose a more durable solution to the problem, perhaps by designating one border crossing as the channel through which all public-health specimens and medicines for cross-border projects could flow.

MEETING BETWEEN SECRETARY CÓRDOVA VILLALOBOS AND THE MEXICO SECTION OF THE BHC

Secretary Córdova also held a meeting with the Mexican Section of the BHC, including the Delegate of the Commissioner, Dra. María de los Ángeles Fromow Rangel; Under Secretary for Innovation and Quality, Dra. Maki Esther Ortíz Domínguez; the 12 State members and the Coordinators of the Mexican Outreach Offices. Together they reviewed the Annual Plan for 2008 of the Mexican Section; the 2007 activity reports; the short-term publication of a research book, titled “Health Conditions at the Northern Border”; and the importance of dealing with dengue fever at the border.

Actions and Next Steps

1. Develop a cross-border pilot project to address the issues surrounding the transportation of specimens and medicines along the U.S.-México border.

2. Convene U.S. Federal and State partners, and thereafter join with Mexican partners, to address the improvement of educational efforts and materials related to queso fresco (unpasteurized cheese or artisanal white cheese from México).

3. The parties to the BHC-PAHO Joint Statement will establish a tripartite work group to begin the work to establish an integrated cooperation framework for future action.

4. The U.S.-México Border Health Association (USMBHA) committed to submitting its general work plan to the BHC’s Priority-Setting Committee, to move forward on the USMBHA’s proposal to align goals and priorities with the BHC and PAHO.