

# Wisconsin TB Program Evaluation, NTIP and ARPE: Trends and Goals

Wisconsin TB Program

Bureau of Communicable Diseases

Division of Public Health

### **Definitions of Abbreviations Used in This Presentation**

#### **NTIP**

National Tuberculosis Indicator Project

Indicators that apply to case management and treatment for PWTB.

#### **ARPE**

Aggregate Reports for Program Evaluation

Indicators that apply to contact elicitation activities including following up, testing, evaluation, and treatment, if needed, of contacts to PWTB.

#### **PWTB**

People or person with Tuberculosis



#### Resources

- More on the updated <u>National TB Program</u>
   <u>Objectives and Performance Targets 2030</u>.
- For local or Tribal health departments (LTHDs) interested in doing their own TB program evaluation, please contact us for questions or assistance.
- For more information on TB Program Evaluation, see <u>CDC Information for</u> <u>Tuberculosis Programs website</u>.



### Agenda

- Highlight key NTIP indicators (2015–2024)
  - Strengths
  - Areas of improvement
- Overview of ARPE trends
  - Rationale for state program activities
  - Review planned interventions and activities





### **NTIP Trends**

Case Management for PWTB





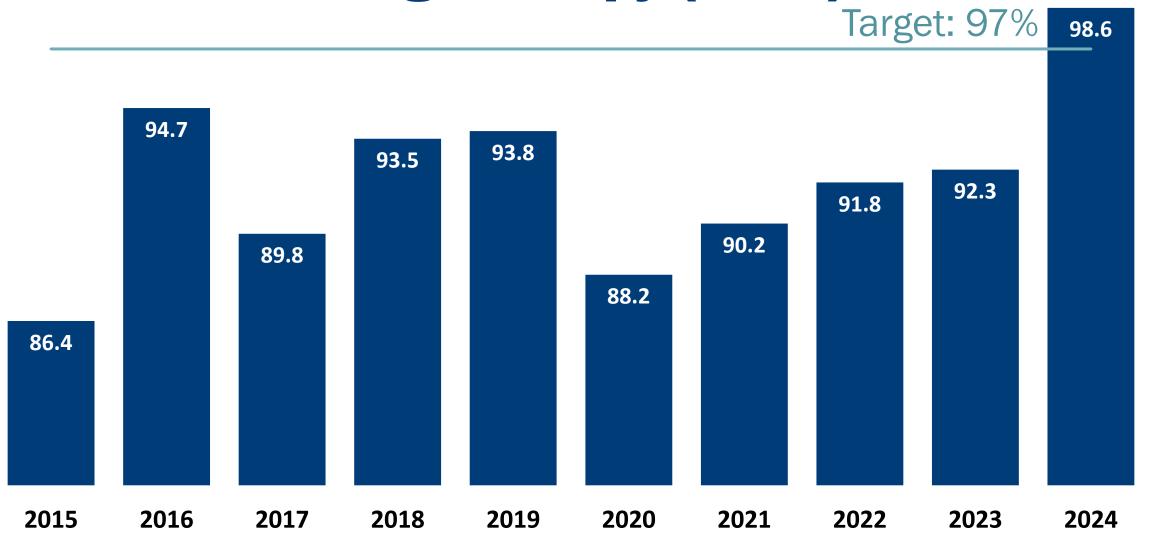


Indicates recent improvement

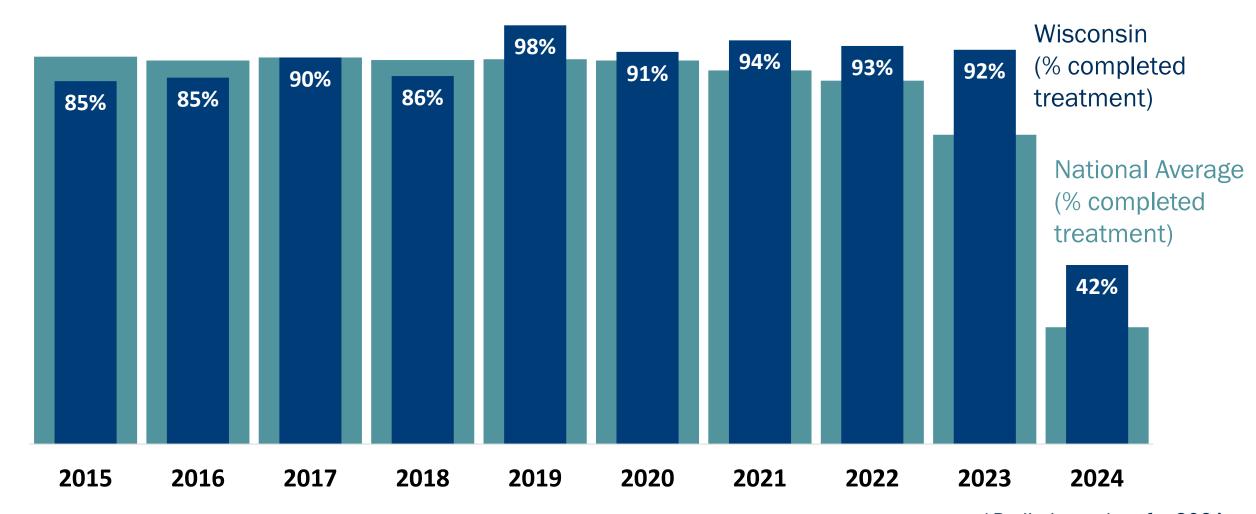


#### Percent of PWTB Who Started First-Line Four-Drug Therapy (RIPE)

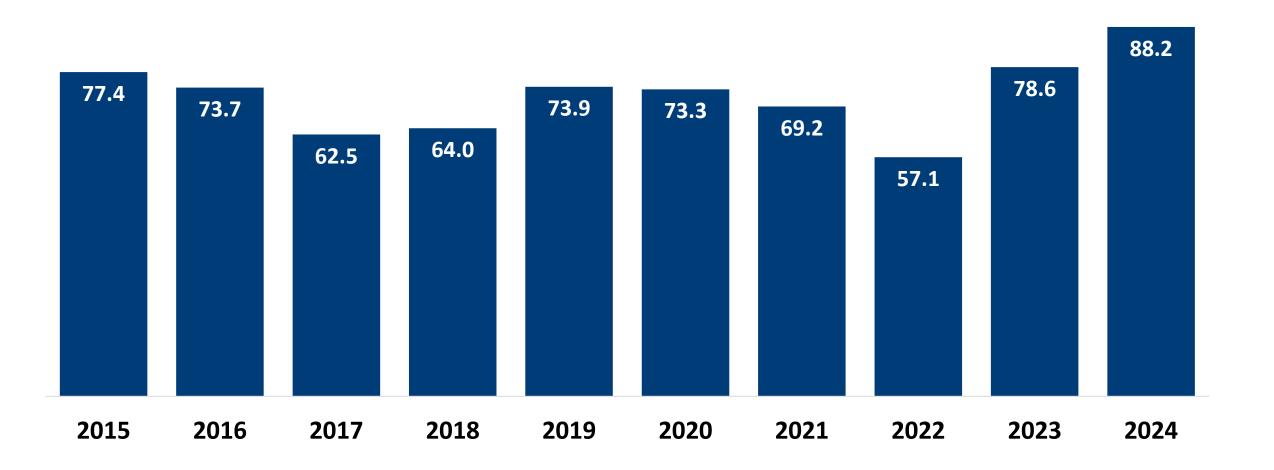




### Percent of PWTB Who Completed Treatment Within 12 Months

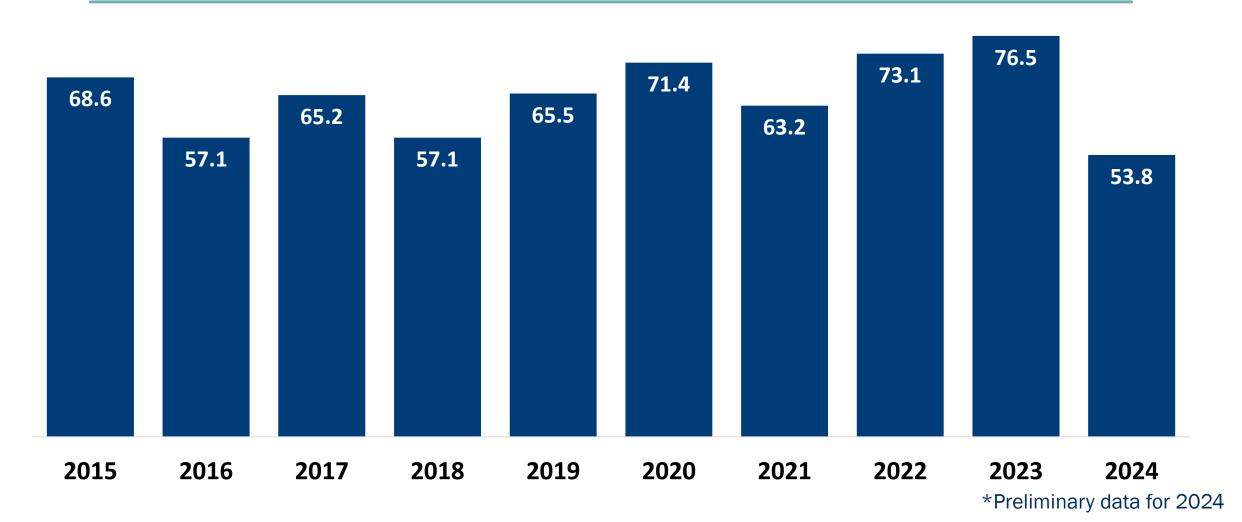


## Percent of PWTB With Positive Smear Result Who Initiated Treatment Within 7 Days of Specimen Collection Target: 97%



### Percent of PWTB Who "Culture Convert" Within 60 Days of Treatment Initiation

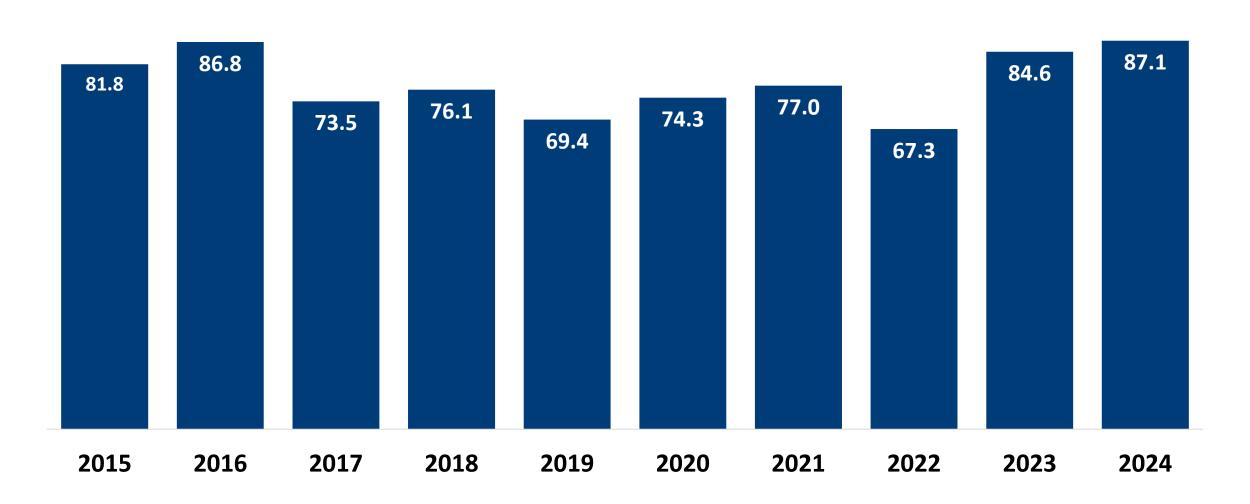
Target: 83%



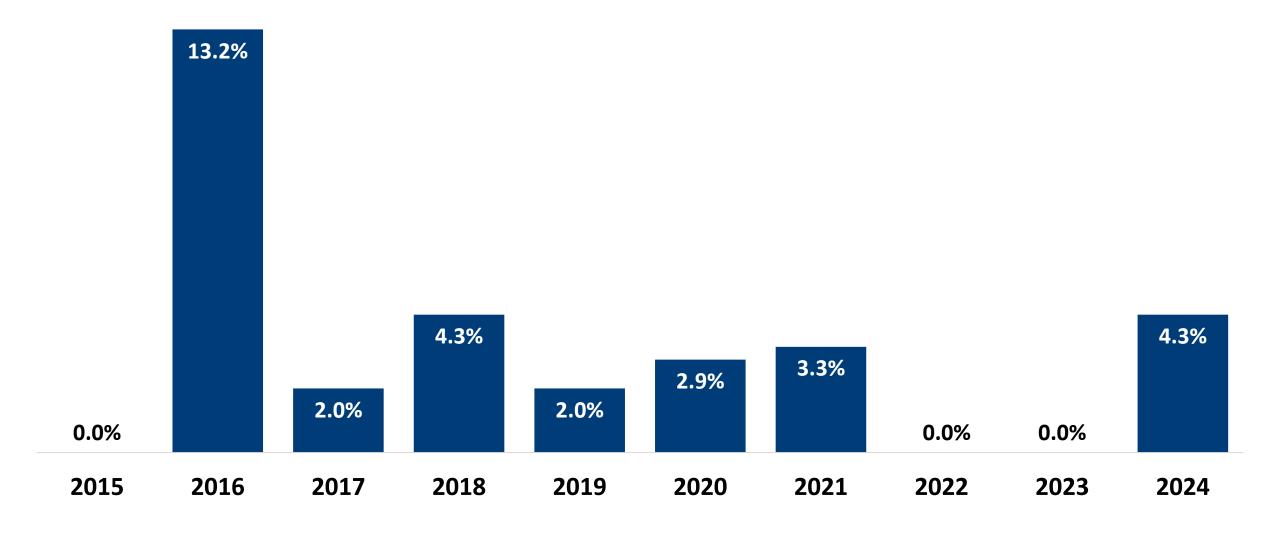
### Percent of PWTB With Known HIV Status



Target: 99%



### Percent of Coinfection of People With TB and HIV



### Agenda

- Highlight key NTIP indicators (2015-2024)
  - Strengths
  - Areas of improvement
- Overview of ARPE trends
  - Rationale for state program activities
  - Review planned interventions and activities



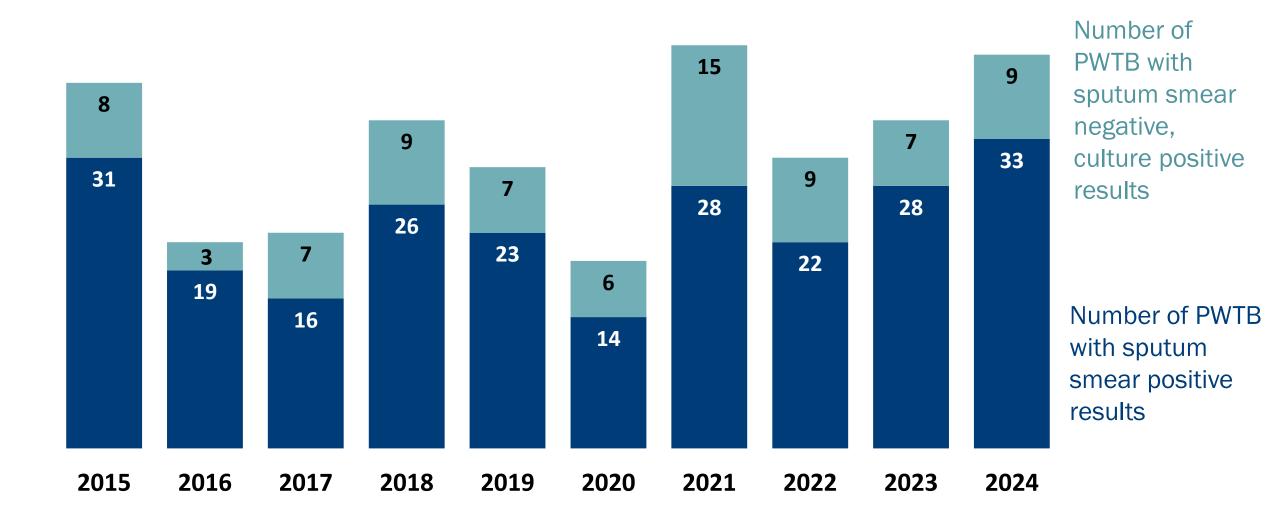


### **ARPE Trends**

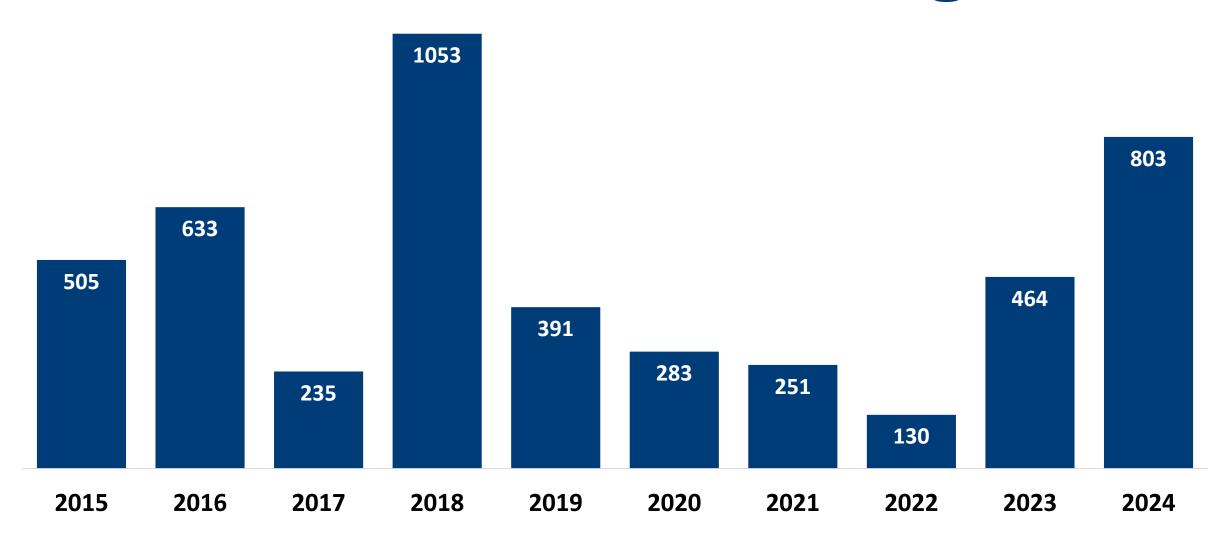
**Contact Investigation** 



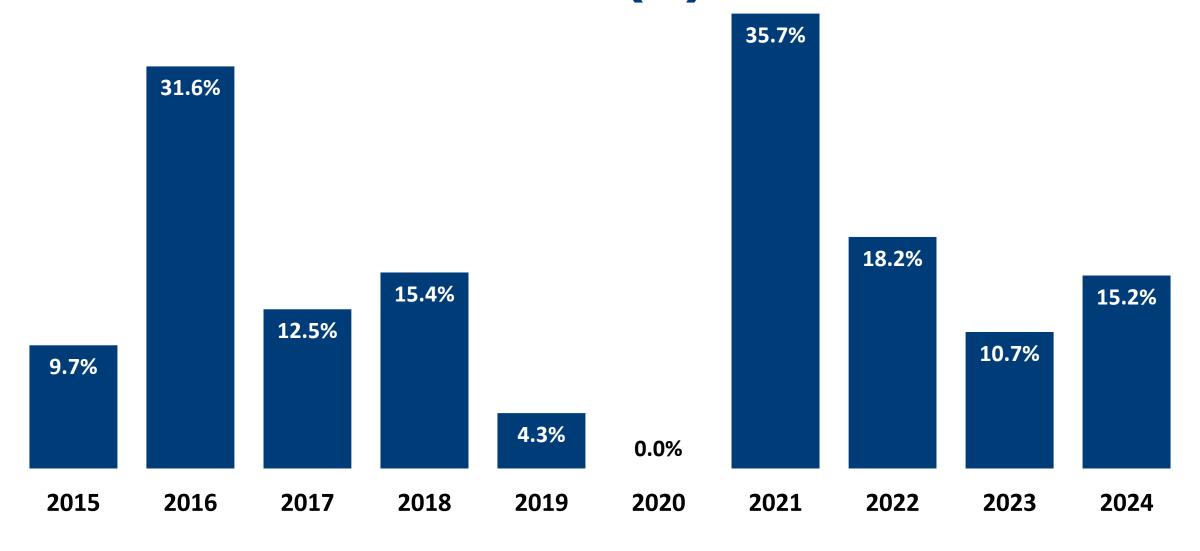
### Most People Needing Contacts Elicited Are Smear Positive



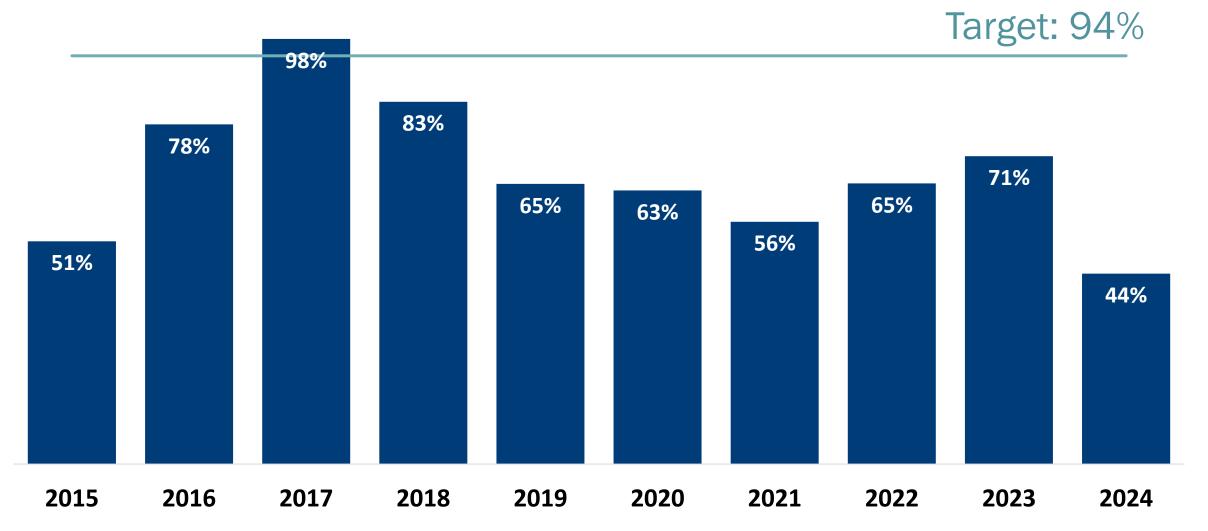
### Number of Contacts Elicited From PWTB Who Were Smear Positive at Diagnosis



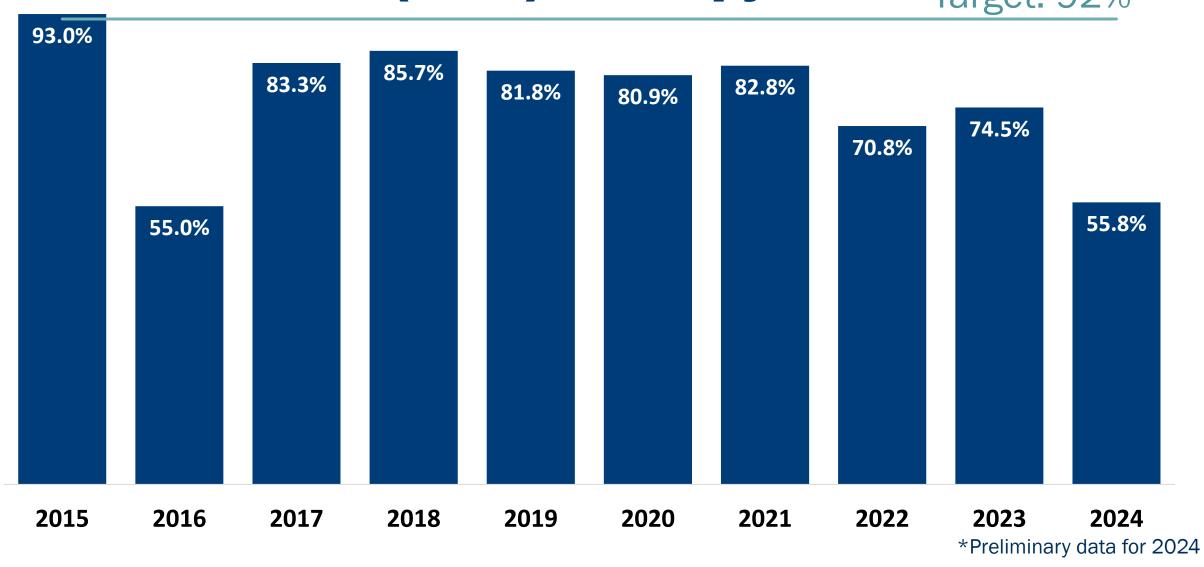
### Smear Positive PWTB With No Contacts Elicited or Disclosed (%)



### Percent of Contacts Who Were Fully Evaluated Post Exposure

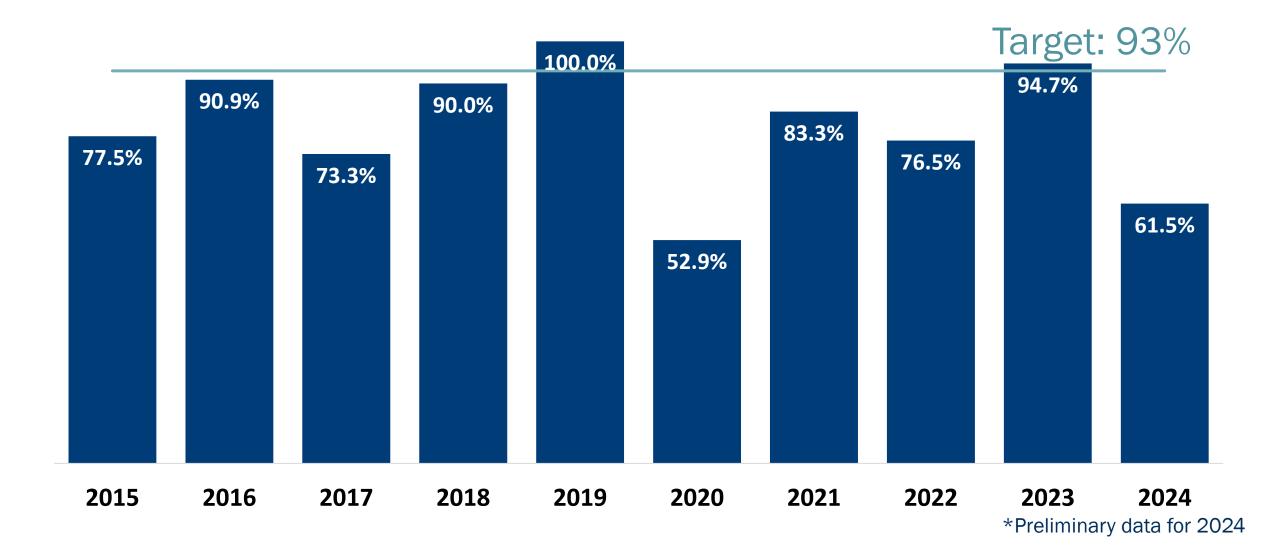


### Percent of Contacts Who Began Latent TB Infection (LTBI) Therapy Target: 92%

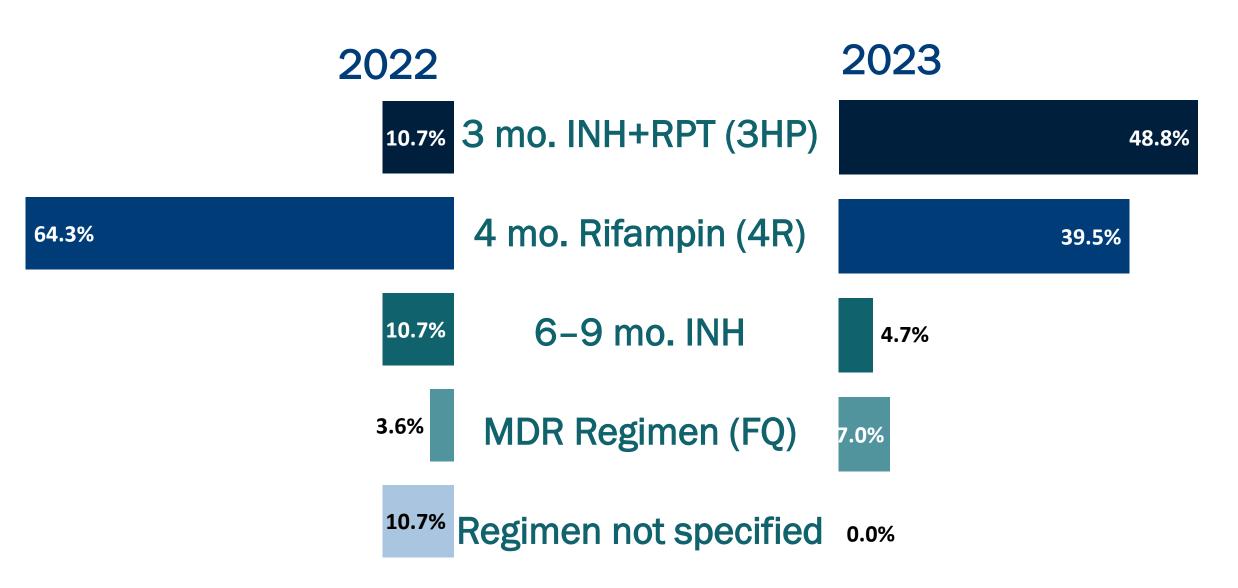


### Percent of Contacts With LTBI Who Completed Treatment





#### LTBI Treatment Regimens Initiated



### New WI TB Program ARPE Metrics, as of 2020



Origin of birth: U.S. born or non-U.S. born



Method of testing for contacts: tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA)



Treatment regimen: comparison between LTBI regimens



#### **New Program ARPE Metric Trend**

#### **Origin of Birth**

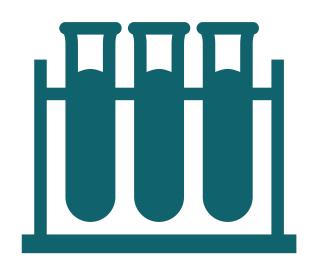


Need to increase documentation of country of birth for people identified as contacts. More education on complete documentation needed across health jurisdictions in Wisconsin.



#### **New Program ARPE Metric Trend**

#### **Testing Method**



In 2023, 83% of all contacts to someone with infectious TB were evaluated by IGRA blood test. This is a large increase in percentage compared to prior years. Previously, more people were tested with skin tests (TST/PPD).



#### **New Program ARPE Metric Trend**

#### **LTBI Treatment Regimen**



Three months of once weekly INH and RPT (3HP) was the most initiated regimen for contacts in 2023, compared to 2022. The only regimen with a completion rate less than 95% was four months of daily RIF (4R) at 80%.



### Themes and Improvement Strategies, 2023-2024



Quarterly NTIP/ARPE review: Resumed 2021, continued through 2025



HIV testing project: educational bundle, at home test kits



Increase knowledge of metrics, disseminate CDC and state program targets, encourage local interventions



### Interventions for 2023–2024 Improvements

- ✓ Formalize Wisconsin TB Program contact investigation recommendations
- ✓ Develop and host training for WEDSS documentation
- ✓ Target tools and educational outreach, utilize Wisconsin Treatment Advisory Group (WI-TAG) input
- Create mini-grant reimbursement programs, publications, and translated resources
- ✓ Host contact investigation (CI) course with Mayo Clinic Center for Tuberculosis (MCCT) in the SE region

### Outcome Goals for Wisconsin TB Program



Improve (stabilize)
ARPE annual and
quarterly data and
reviews



Increase contact
elicitation resource
development with
surveys, utilizing
Wisconsin
Treatment Advisory
Group (WI-TAG)



Increase participation and engagement in training sessions



#### **Contact Us**

#### **Wisconsin TB Program**



608-261-6319



dhswitbprogram@dhs.wisconsin.gov



https://www.dhs.wisconsin.gov/tb/index.htm





#### Thank you!

Protecting and promoting the health and safety of the people of Wisconsin

