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Kat DeBurgh, MPH Executive Director

Dalia Navarro Office Manager

Brandon Roberts Legislative Assistant March 6, 2017

The Honorable Doctor Joaquin Arambula State Capitol, Room 5164 Sacramento, CA 95814

RE: HOAC Proudly Sponsors AB 511 (Arambula)

Dear Dr. Arambula,

The Health Officers Association of California (HOAC), which represents the physician health officers of California's sixty-one city and county jurisdictions, proudly sponsors AB 511 (Arambula), a bill that would protect workers and preserve valuable public health resources.

AB 511 builds on previous legislative success to replace mandated tuberculosis (TB) testing with risk assessment screening and targeted testing. This change is recommended by numerous expert bodies, including the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and the California Tuberculosis Controllers Association (CTCA). The best scientific guidance suggests we should not test low-risk populations, but should instead test only high-risk individuals. To implement this guidance, California should eliminate TB testing requirements, and instead require employees and other individuals to be screened for TB risk. Only those at high risk should be tested.

Individuals required to be tested under current law include certified nurse assistants and temporary licensed nursing staff at long-term care facilities, employees and volunteers at heritage schools, foster parents, employees of primary care clinics, volunteers in crisis nurseries in Community Care Facilities, home care aides, and parks employees. This bill would replace those testing requirements with a screening requirement, and require testing only if warranted. In addition, AB 511 eliminates mandatory testing for students at schools for the deaf and blind. These students are at no greater risk for TB than those at conventional K through 12 schools, who are not required to best tested. The local health officer can always order testing if necessary based on local conditions.

AB 511 will help combat the nation's reoccurring shortage of tuberculin, the TB testing antigen. Furthermore, this bill will protect employees and others from unnecessary treatment. Like any test, the TB test can result in a false positive result. Any person with a positive test result is treated for latent tuberculosis. A certain percentage of these (those with a false positive result) are treated unnecessarily, exposing them to avoidable x-rays and pharmaceutical regimens.

TB tests can be costly to employers and the medical system. In addition, TB skin tests require two visits to a health care provider – one for the test to be administered subcutaneously, and one for the test to be analyzed for a result. This places a burden on the health care system and those being tested.

Health care providers can effectively assess each person's risk for TB using a risk-assessment questionnaire developed by the CDPH and CTCA. The pre-testing questionnaire currently in use allows providers to personally and confidentially ask patients a series of three yes/no questions to assess their risk - a "yes" response to any of the three questions would indicate that the respondent should be tested for TB.

HOAC is dedicated to promoting practices that improve the health of California's residents and believes AB 511 would be a step forward for our state. We are proud to sponsor this bill, and we thank you for introducing it.

Sincerely,

Kat DeBurgh, MPH Executive Director

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