



WISCONSIN DEPARTMENT
of HEALTH SERVICES

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 [National TB Program Objectives and Performance Targets 2030](#).
- 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 [CDC Information for Tuberculosis Programs website](#).



Agenda

- **Highlight key NTIP indicators (2015–2025)**
 - Strengths
 - Areas of improvement
- Overview of ARPE trends
 - Rationale for state program activities
 - Review planned interventions and activities





NTIP Trends

Case Management for PWTB





Program Strengths and Areas of Improvement



Indicates recent improvement

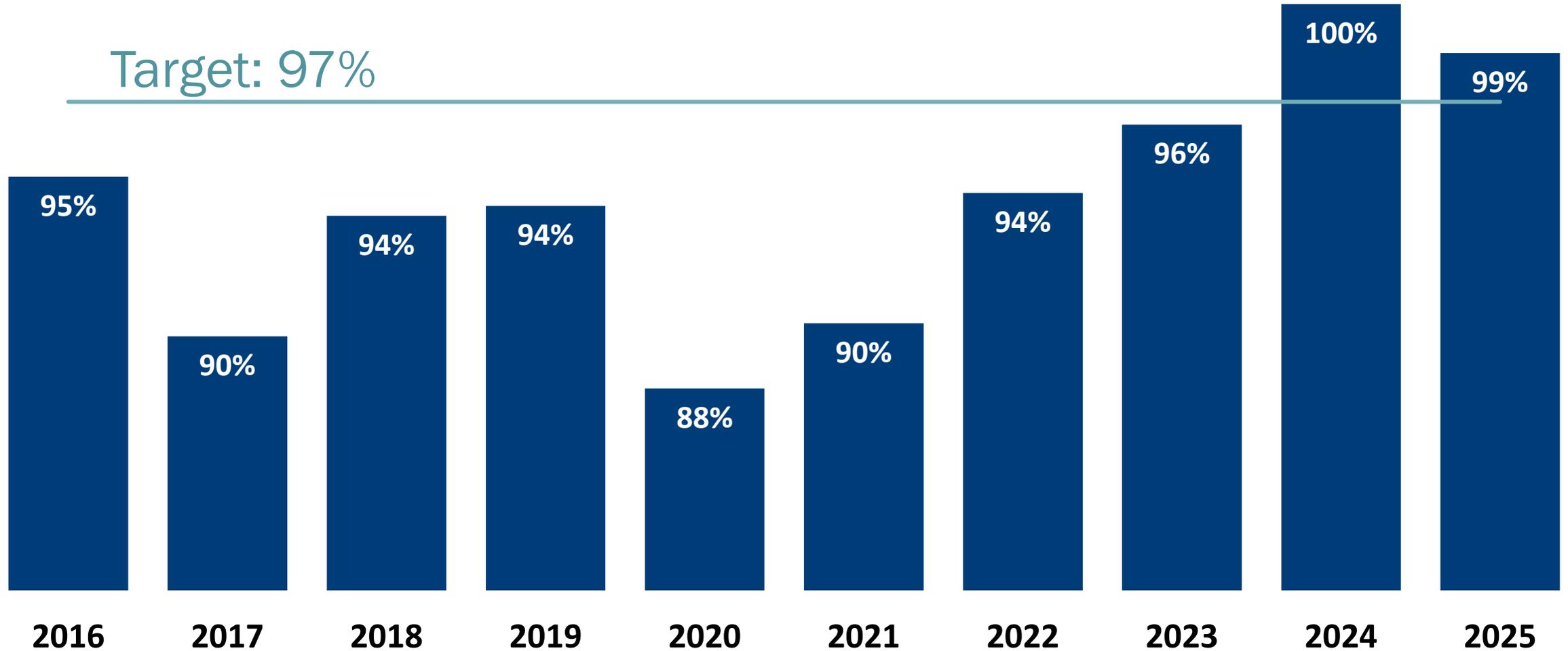


Percent of PWTB Who Started First-Line Four-Drug Therapy (RIPE)



Target 2030: 96%

Target: 97%

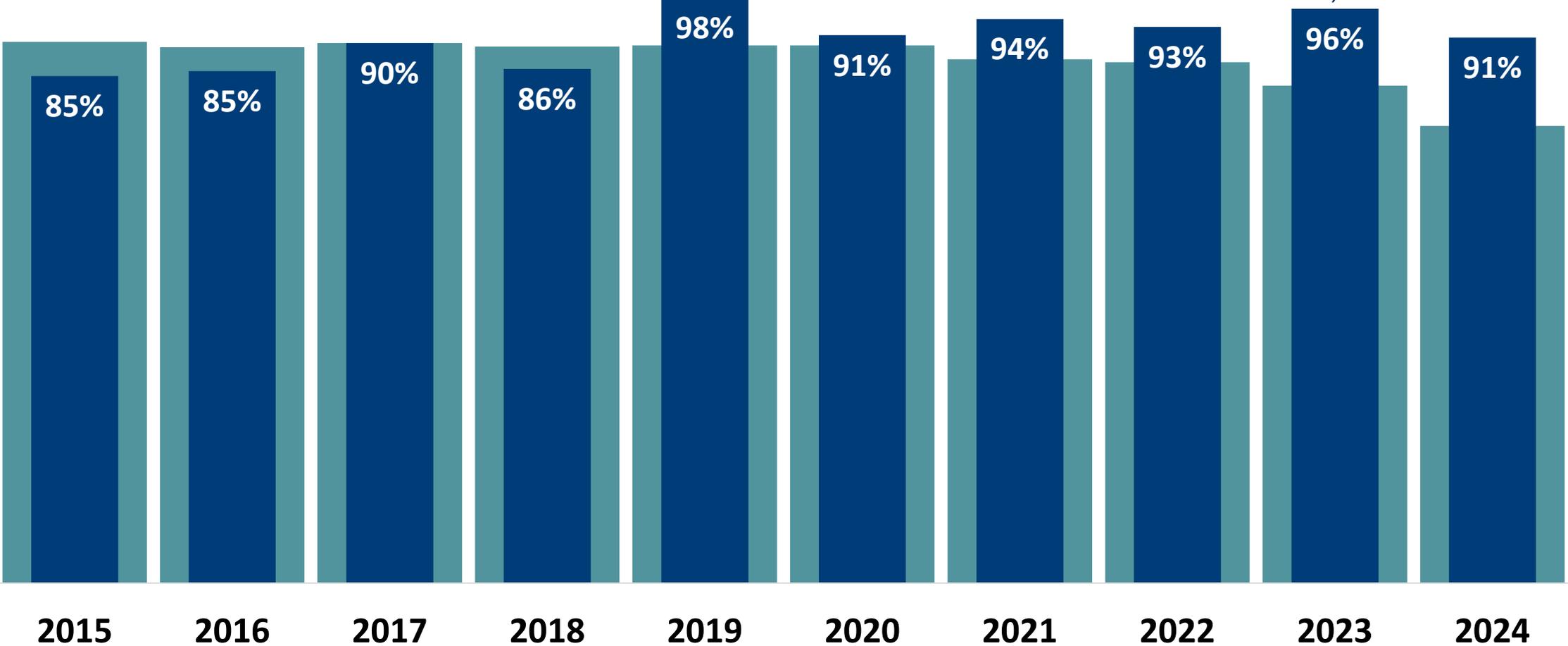


*2022- 2025 include HPMZ and BPaL as appropriate regimens

Percent of PWTB Who Completed Treatment Within 12 Months

Wisconsin
(% completed
treatment)

National Average
(% completed
treatment)



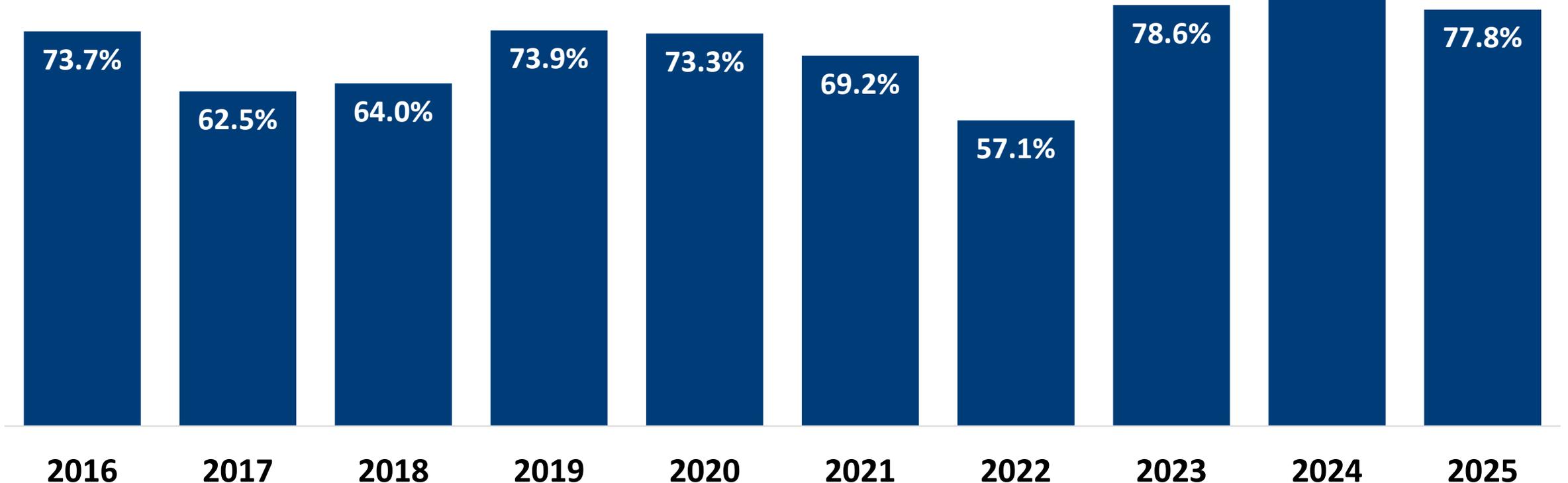
*Preliminary data for 2024

Percent of PWTB With Positive Smear Result Who Initiated Treatment Within 7 Days of Specimen Collection



Target 2030: 93%

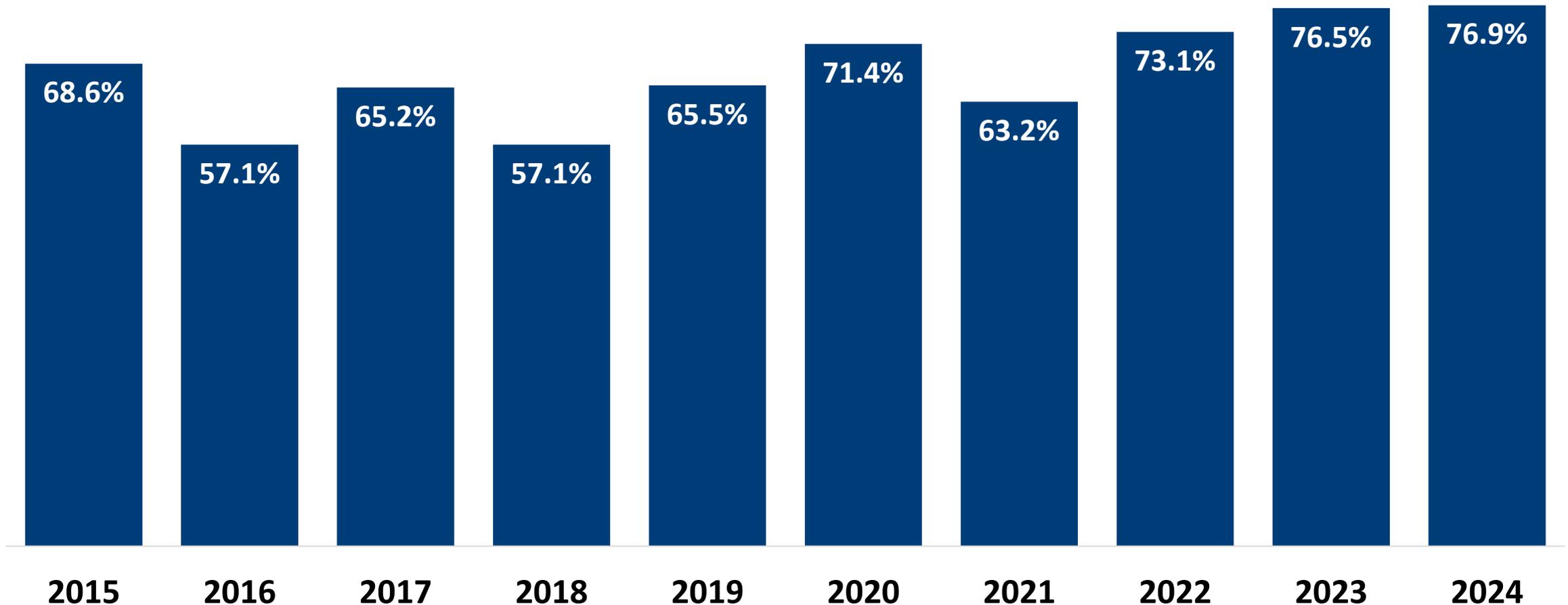
Target: 96%



Percent of PWTB Who “Culture Convert” Within 60 Days of Treatment Initiation



Target: 83%

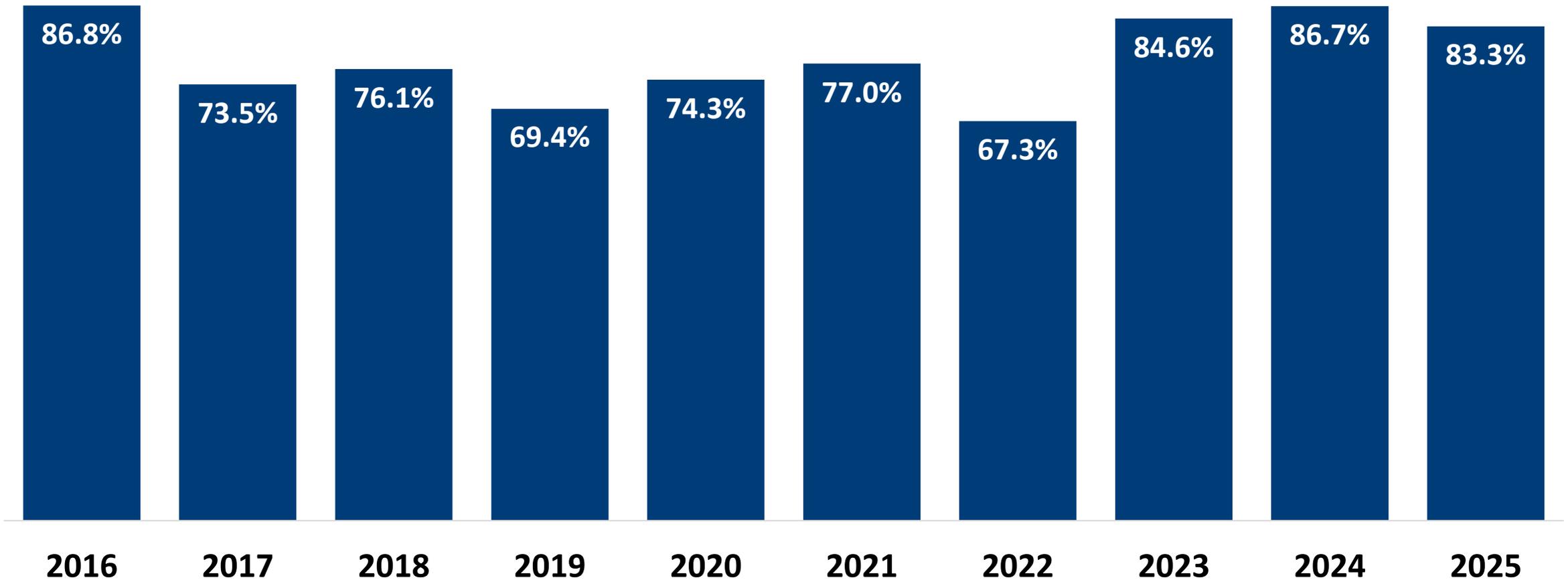


Percent of PWTB With Known HIV Status

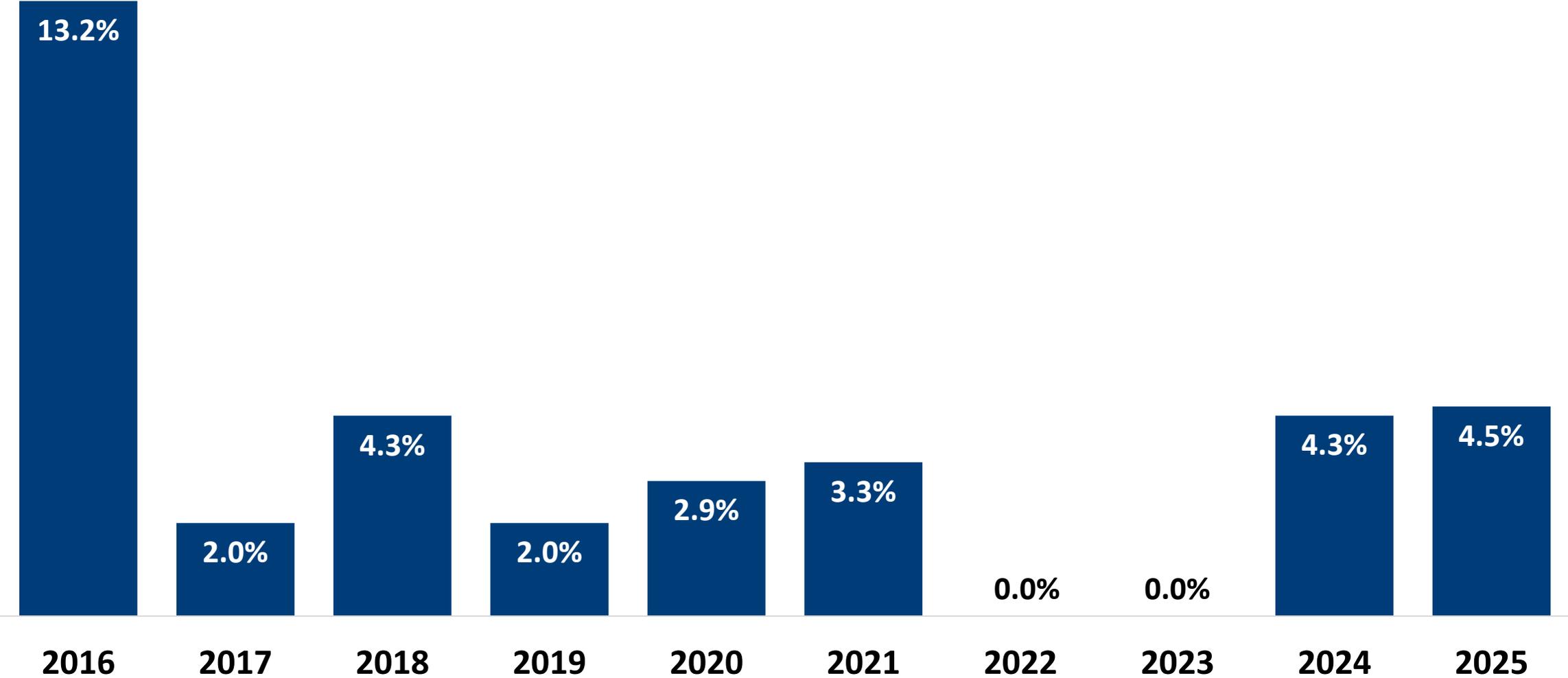


Target: 99%

Target 2030:
98%



Percent of Coinfection of People With TB and HIV



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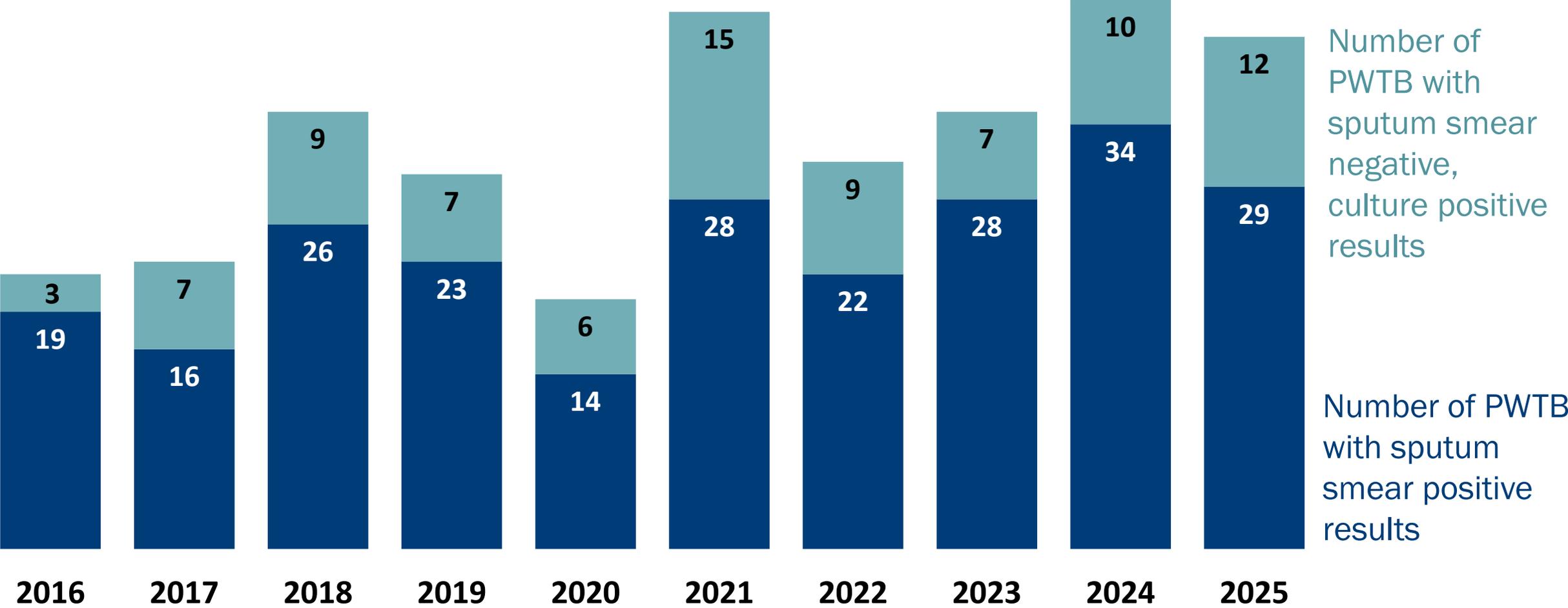


ARPE Trends

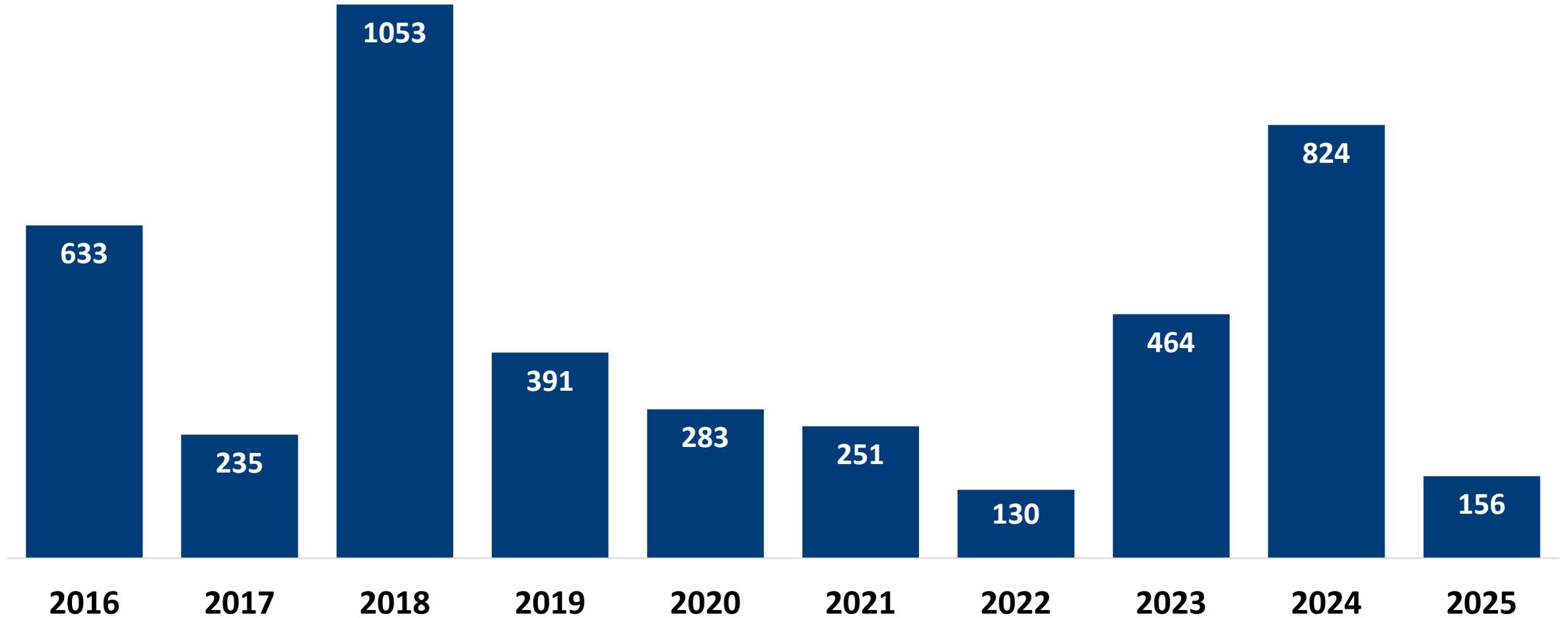
Contact Investigation



Most People Needing Contacts Elicited Are Smear Positive

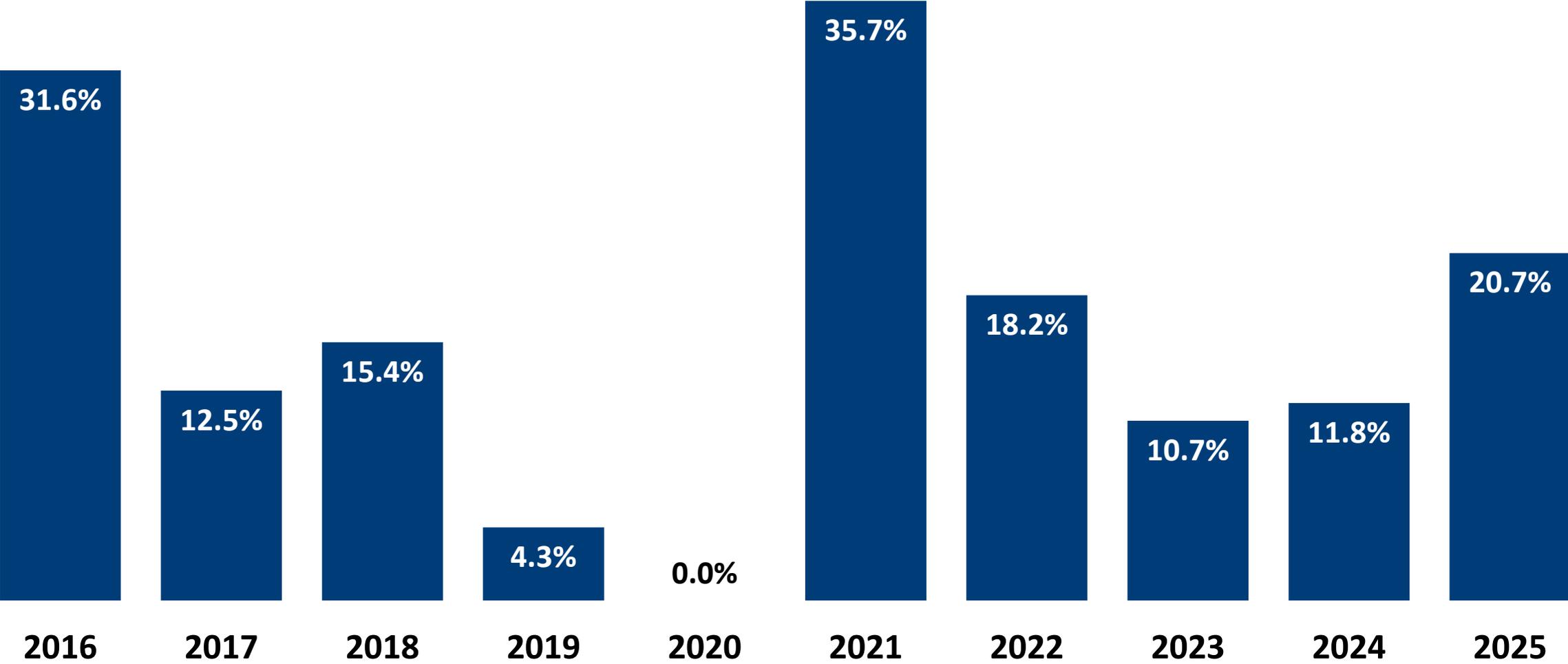


Number of Contacts Elicited From PWTB Who Were Smear Positive at Diagnosis



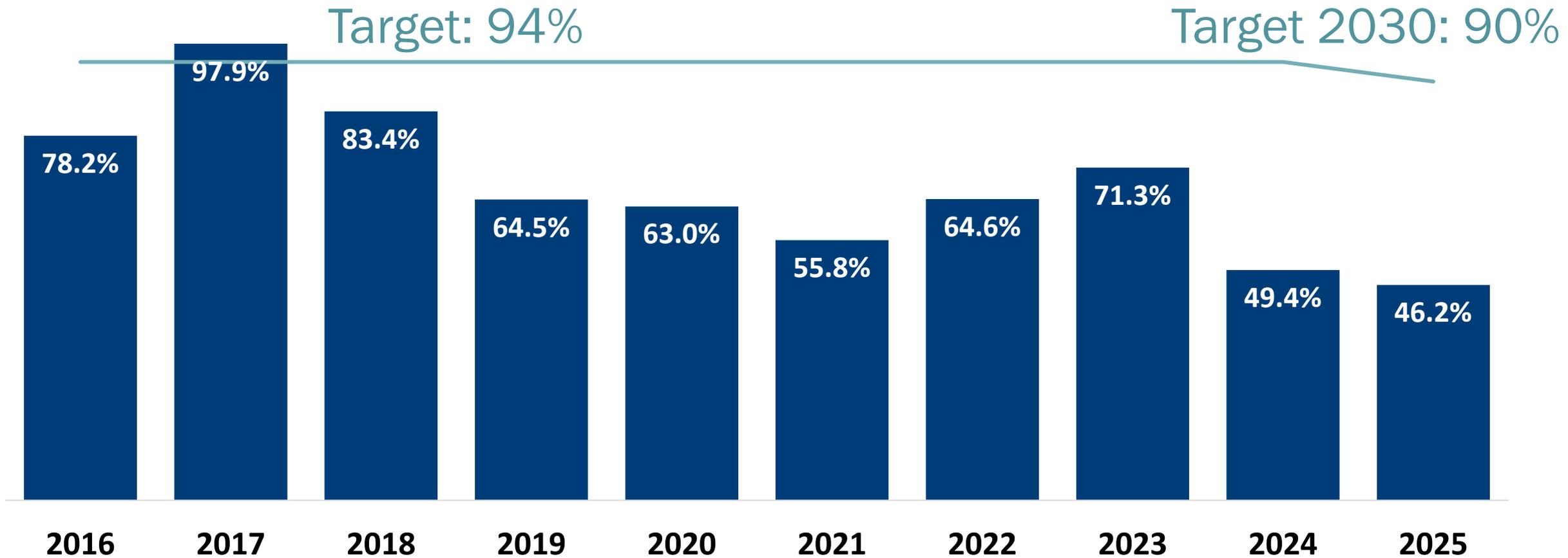
*Preliminary data for 2025

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



*Preliminary data for 2025

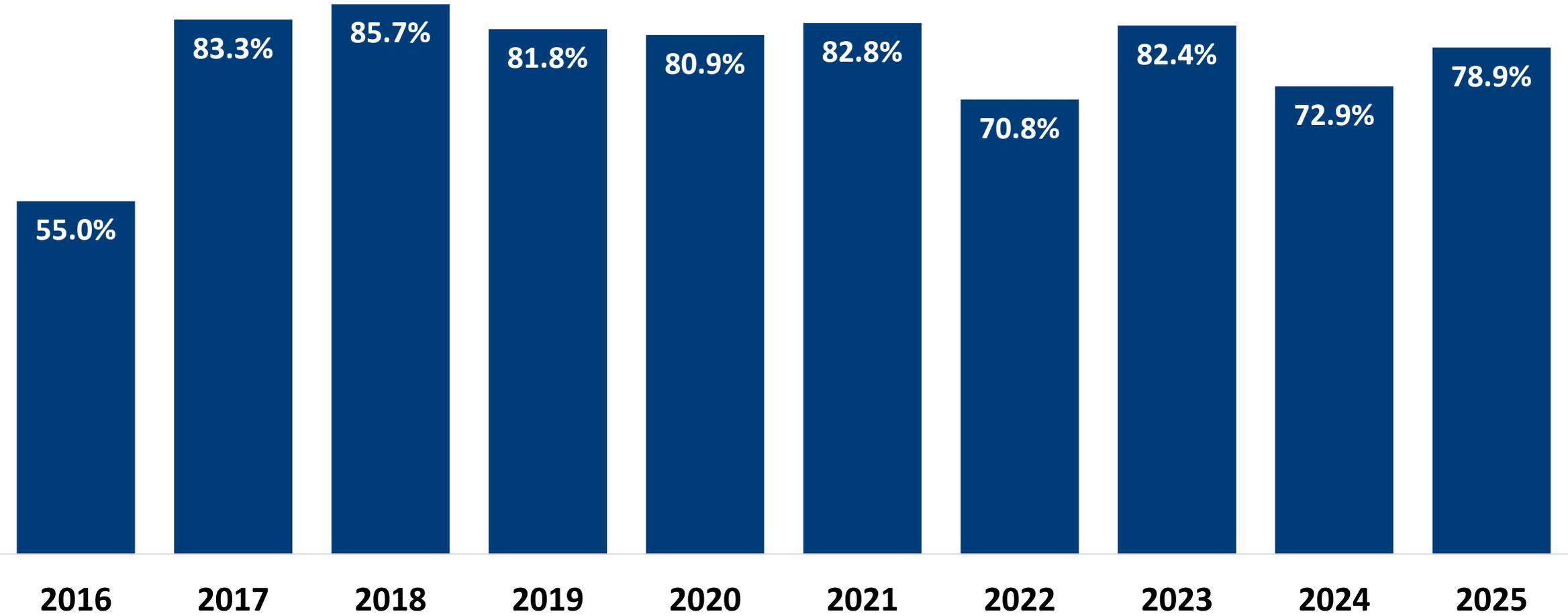
Percent of Contacts Who Were Fully Evaluated Post Exposure



*Preliminary data for 2025

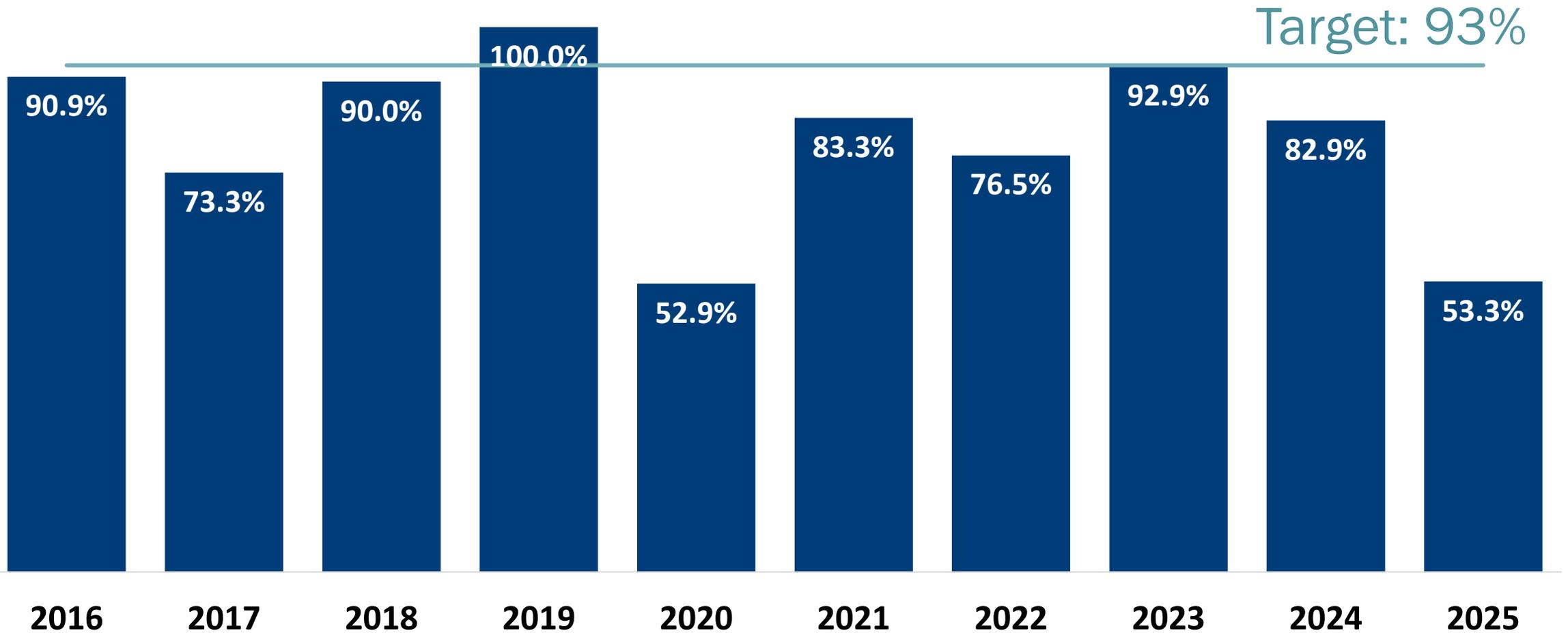
Percent of Contacts Who Began Latent TB Infection (LTBI) Therapy

Target: 92%



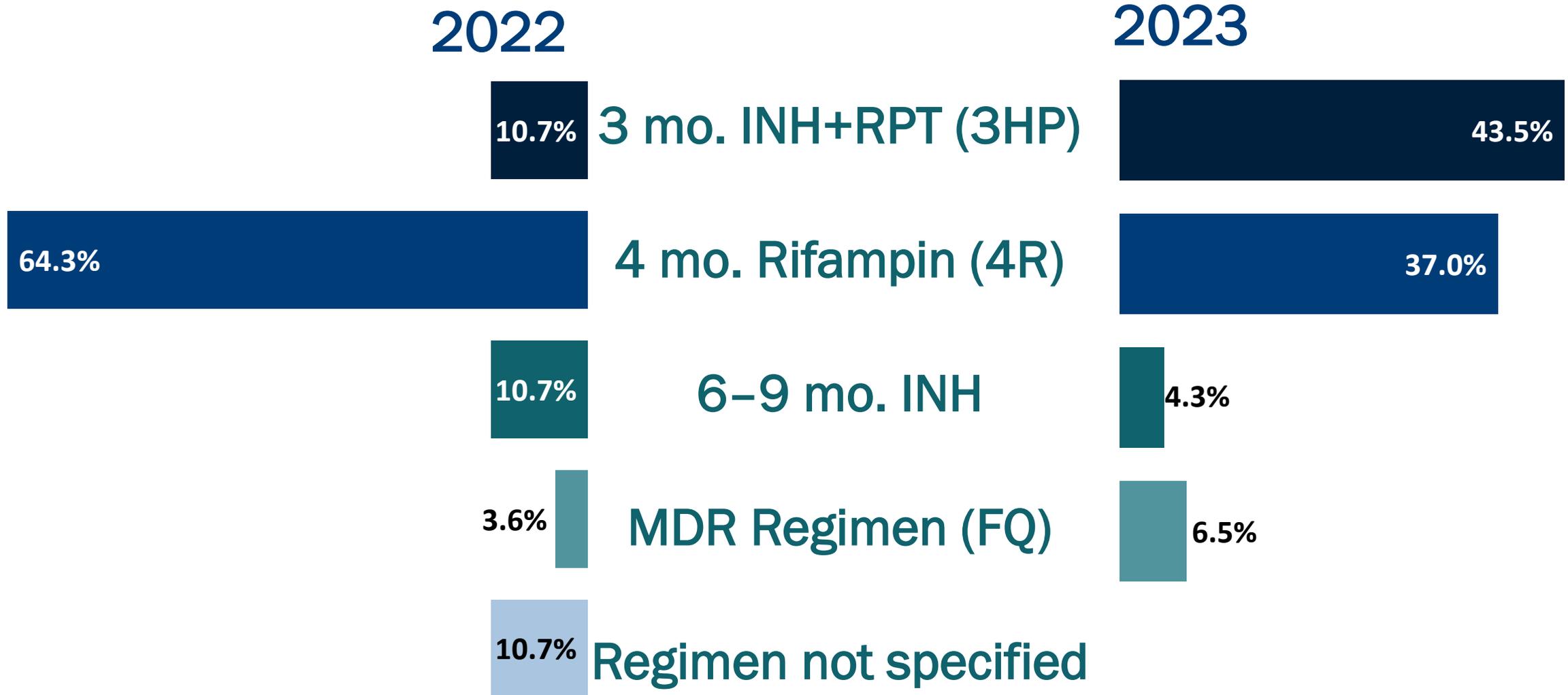
*Preliminary data for 2025

Percent of Contacts With LTBI Who Completed Treatment



*Preliminary data for 2025

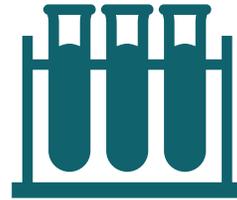
LTBI Treatment Regimens Initiated



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

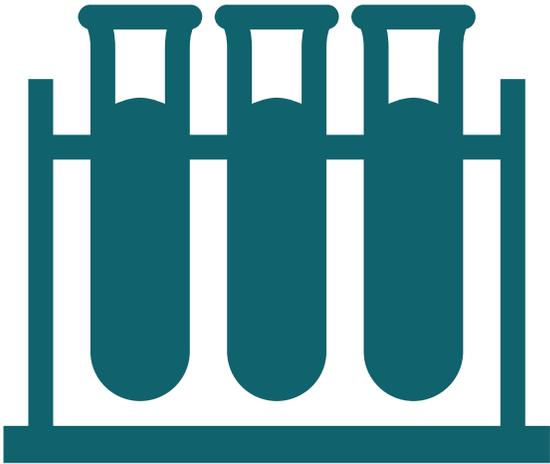


Need to increase documentation of country of birth for people identified as contacts. More education on complete documentation needed across health jurisdictions in Wisconsin.



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. In 2023 the only regimen with a completion rate less than 95% was four months of daily RIF (4R) at 80%.



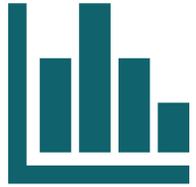
Interventions for 2023–2024

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)



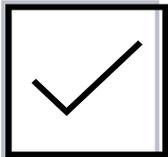
Increase
participation and
engagement in
training sessions



Improvement Goals, 2025



Increase knowledge of program evaluation targets (disseminate goals, encourage local interventions, set up regional cohort reviews)



HIV testing project completed: continue improvement trend, present on findings and project (TB PEN, MCCT TB nurse symposium)



Educational content to increase nurse case manager confidence and skillset (MCCT SE regional NCM training, TB program manual publication, lab results webinar)



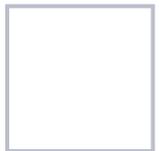
Improvement Goals, 2026



Increase knowledge of program evaluation targets (disseminate goals, encourage local interventions, host regional cohort reviews)



Evaluation and Performance Management
Plan Area of Focus: Culture Conversion



Educational content to increase nurse case manager confidence and skillset (MCCT SE regional NCM training, TB summit pre-conference content, annual refresher training)



Contact Us

Wisconsin TB Program



608-261-6319



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





Thank you!

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



WISCONSIN DEPARTMENT
of HEALTH SERVICES