

A Case for TB Reimbursement

This client had not been feeling well for several days. Cold like symptoms at first were ignored by the individual and were brushed off as something that would take care of itself. Family members noticed that the cough was not going away. Fever, chills, and night sweats were frequently occurring along with loss of appetite, weight loss, and then fatigue and weakness. Concerned family members took their loved one to the doctor only to find out that this individual had active tuberculosis disease (TB).

The client received treatment immediately. The Health Department soon began the extensive process of interviewing and bringing TB education to individuals who had been in contact with this individual. I was able to join the Health Department Nurses as their interpreter on some of their home visits. Approximately twelve individuals were contacted, interviewed, and given TB education within the guidelines and support of KDHE and their TB nurses. Those interviewed were encouraged to get TB skin tests. Individuals who received the initial skin tests are now in the process of getting a second TB skin test for the three month follow up. Of the twelve individuals interviewed, only one was found with latent TB where the person is infected but does not have active TB disease.

I wanted to tell this success story as a reminder that KDHE also has Tuberculosis Services Reimbursement Program for uninsured Kansans who are under 200% of Federal Poverty Level Guidelines. Most of the individuals who were interviewed in this case were also uninsured and were able to get needed chest x-rays that were paid through the KDHE TB Reimbursement Program. This was such an educational experience for me as a case manager. I was able to see firsthand the importance of a strong partnership between the local Health Departments and KDHE. This partnership is invaluable and necessary when it comes to the health and safety of Kansans.

