



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
House Committee on Health
March 16, 2016 at 8:30 a.m.

by

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HCR 76/HR 38 – URGING THE DEPARTMENT OF HEALTH TO PROTECT PUBLIC HEALTH BY UPDATING ITS RULES REGARDING TUBERCULOSIS

Chair Belatti, Vice Chair Creagan, and Members of the Committee on Health:

HCR 76/HR 38 urges the Department of Health to update its rules regarding tuberculosis (TB) and specifically to require that any “individual” or “student, including postsecondary student,” who has spent more than one year in foreign TB high-risk locations to submit TB clearance documentation upon entering or re-entering the State.

The University of Hawai'i (UH) limits the following comments to post-secondary students who meet the criteria stated in HCR 76/HR 38 and who intend to enter or re-enter UH after having undergone the required initial tuberculosis (TB) screening.

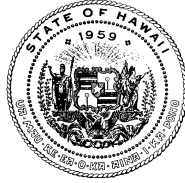
UH supports HCR 76/HR 38 as it applies to postsecondary students since the re-testing of students who have spent substantial time living in foreign locations with high prevalence rates of TB may potentially reduce the risk of active TB cases on our campuses. The potential risks and consequences associated with experiencing an active TB case on a campus is amplified by our substantial student enrollment numbers, for example, at Mānoa with nearly 4000 residence hall students.

The American College Health Association recommends tuberculosis screening for any incoming students who have ever had close contact with persons with known or suspected active TB, were born in or had frequent or prolonged visits to countries with high incidences of TB, have been a resident or employee of high-risk congregate settings (e.g., correctional facilities, long-term care facilities, and homeless shelters), have been a volunteer or health care worker who has served clients who are at increased risk for active TB disease, or have been a member of a group with an increased incidence of TB disease (e.g., medically underserved, low-income, or abusing alcohol/drugs).

The American College Health Association recommends TB screening and targeted testing of incoming college and university students, but does not provide recommendations for students who underwent initial screening and are subsequently returning to a postsecondary school after spending substantial time in locations with a high prevalence of tuberculosis infections.

At UH, a TB screening questionnaire could be utilized to efficiently direct screening efforts in this returning student population. An additional benefit is that the health clearance process offers young adults an opportunity to establish contact with health care providers and the health care system.

Thank you for the opportunity to testify.



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Testimony in OPPOSITION to HCR76
URGING THE DEPARTMENT OF HEALTH TO PROTECT PUBLIC HEALTH BY
UPDATING ITS RULES REGARDING TUBERCULOSIS.

REPRESENTATIVE DELLA AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: March 16, 2016

Room Number: 329

1 **Fiscal Implications:** A system to track, test and document travelers, visitors and tourists for TB
2 testing under this resolution does not currently exist and would be costly to establish and
3 maintain.

4 **Department Testimony:** The Department opposes HCR76. This measure would require “any
5 individual who has spent more than one year in foreign high-risk locations to submit to
6 tuberculosis clearance testing upon entering or reentering the State.”

7 More than 85% of Hawaii’s communicable TB cases occur in individuals who are born in
8 countries that have high rates of communicable TB. Very few immigrants arrive in Hawaii with
9 communicable TB due to immigration policies, and those that do are identified by the
10 department and treated. A higher percentage, as high as 35% depending on the country of origin,
11 however, have inactive or dormant TB infection generally acquired from their country of birth.
12 A small percentage of these inactive TB infections, perhaps as high as 5%, will go on to develop
13 active TB later in life.

14 Consequently, high rates of TB in Hawaii are associated with people, primarily from Asia and
15 the Pacific, who develop reactivation TB after they have been in Hawaii. The State would have
16 difficulty mandating, for ethical reasons, that anti-TB medication with potential side effects be
17 taken by a large number of asymptomatic individuals with noncontagious TB to prevent a much
18 smaller number of individuals from developing active TB.

1 Hawaii does not currently have a system exists to track, test and document travelers, visitors and
2 tourists for TB testing. It would be challenging and costly to develop an accurate system for this
3 purpose. Perception of such a system, including the enforcement of TB testing for returning
4 residents, visitors and tourists, warrants consideration. On the whole, this system may have an
5 adverse effect on tourism and business for Hawaii without evidence that it would provide a high
6 degree of benefit for TB control. There is no similar legislation in any of the other 49 states or
7 the District of Columbia.

8 The TB Control Branch currently identifies cases of communicable TB when students enter
9 school, almost entirely at the secondary school level. The branch was not aware of any recent
10 cases (at least during the past seven years) that would have been identified through the proposed
11 resolution.

12 We believe that HCR 76 provides little additional public health benefit while creating a costly
13 system based on occasionally inaccurate self-reports of travel history that could be used for more
14 effective TB preventive efforts. The potential effects on business and tourism warrant additional
15 consideration.

16 Hawaii Revised Statutes §325-15 requires U.S. citizens or nationals who return to Hawaii after
17 being in a high risk area for five years or more to obtain a medical examination report that
18 includes a TB skin test and/or chest x-ray report. This statute, enacted in 1978, has not been
19 enforced for at least 30 years. The department plans to request repeal of this statute, for the
20 Legislature's consideration during the next session, for the reasons stated above.

21 The department is currently in the process of updating its TB administrative rules.

22 Thank you for the opportunity to testify.