



COLLIN COUNTY

Collin County Health Care Services
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TO: Commissioners' Court

FROM: Candy Blair, Health Care Administrator

DATE: May 18, 2010

RE: Sole Source Vendor for Health Care Services Tuberculosis testing (T-Spot)

In following with state mandates, Collin County Health Care Services (CCHCS) provides testing for Tuberculosis (TB) for our community. Over the past few years, the numbers of active tuberculosis cases and patients with latent tuberculosis infections (LTBI) have increased significantly. To illustrate the impact of TB for Collin County, please note the following points:

- CCHCS had 189 LTBI patients at the end of February
- On average, 24 new LTBI patients are added to the CCHCS workload each month
- Each LTBI patient receives evaluation and testing for TB
- CCHCS performed 1,668 skin tests during FY 2009
- Current testing method requires the nurse to conduct the skin test by needle and the patient must return within 72 hours for the test to be read; if the patient has a positive skin test or has a history of positive skin test, then a chest x-ray is ordered.
- T-Spot rules out people who have a positive skin test due to Bacillus Calmette-Guerin vaccine (BCG) and non MTB variants; eliminating the need for an additional chest x-rays and the potential treatment of 6-9 months by the county health department.

POTENTIAL COST SAVINGS	
Number of TB Skin Test Readings (2nd Visit) Eliminated	923
Average RN wage (including benefits)	\$28.45
Average Patient Visit Time	1 hr
Potential Cost/Time Savings reallocated within the TB Clinic	923 work hours X \$28.45/HR = \$26,259.35
Future Cost Saving Opportunities	
According to a study published by the CDC ¹ , for public health agencies, the average cost to treat a Latent Tuberculosis Infection (LTBI) patient is approximately \$338 for 1 intervention. With health care costs significantly increasing since the study was released, it is reasonable to conclude that the cost is currently higher. In 2009, CCHCS TB clinic treated 189 LTBI patients. If these patients had been screened with the T-Spot, their 6-9 months of treatment could have potentially been eliminated at a cost savings of at least \$63,000 .	

Additionally, there is great potential in decreasing the number of chest x-rays needed and ultimately, the number of LTBI's which require long-term treatment. The savings in work hours and funding would be reinvested within the TB Clinic in providing services to the increasing number of TB Clinic patients. With this in mind, I respectfully request the approval of T-Spot as a sole source vendor for providing tuberculosis testing services for CCHCS.

¹ Miller, T.L., Hilsenrath, P., McNabb, S.J.N., and Weis, S.E. Economic Evaluation of Tuberculosis Prevention and Control: special considerations. 2005 National Tuberculosis Controllers Workshop, Atlanta, GA.