DATE: April 9, 2024
TOPIC: Latent Tuberculosis Infection Reporting Requirements and Updates to NAC441A
AUTHOR: Susan McElhany, DMD, Nevada Tuberculosis (TB) Controller, Office of State Epidemiology
TO: Health Care Providers, Health Care Facilities, Correctional Facilities, and Local Health Authorities

BACKGROUND
On Dec. 10, 2023, the Nevada Legislative Commission approved amendments to Nevada Administrative Code (NAC) 441A that included new reporting requirements for the condition Latent Tuberculosis Infection (LTBI). Amendments were made to align LTBI reporting with the Centers for Disease Control and Prevention (CDC)¹ and Healthy People 2030² goals to reduce tuberculosis disease through expansion of testing and treatment for LTBI. Official codification of NAC 441A.350 LTBI amendment is pending, however the approved amendments can be found here.

This technical bulletin provides guidance to health care providers for LTBI required reporting elements and methods to ensure proper reporting to the health authority.

Reporting Requirements for LTBI
Amended NAC 441A.350 subsection 2 requires that, “A health care provider shall report to the health authority within 5 days after the discovery of any case having latent tuberculosis.” LTBI diagnosis is verified when the following are met:

1) A positive Mantoux tuberculin skin test or interferon gamma release assay test;
2) No radiological evidence of active tuberculosis in the lungs;
3) No signs or symptoms consistent with tuberculosis disease; and
4) No documented prior tuberculosis infection.

The following elements of LTBI diagnosis must be reported to the health authority:

- Patient and provider information as required in NAC 441A.230 which is found here.
- TB test results: Must include the result of test, date of test, and test type (skin or blood, like a QuantiFERON or TSPOT).
- Chest radiograph: Must include the date performed and result of radiograph.
- Physical examination: Must include date of exam and result of exam.
- Immunocompromising conditions or planned immunosuppression identified (if applicable).
- LTBI treatment status: Must include date LTBI treatment was recommended and date LTBI treatment was accepted or was declined.
Provider LTBI Reporting
Nevada’s Confidential Morbidity Report Form can be found online here. Please complete the Tuberculosis/Latent TB Infection section (located at the end of the form) and include copies of TB test result, chest radiograph result, and physical exam results.

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<th>Health Authority</th>
<th>County</th>
<th>Fax &amp; Phone Number to Report</th>
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<tr>
<td>Carson City Health and Human Services (CCHHS)</td>
<td>Carson City, Douglas, and Lyon</td>
<td>Fax: 775-328-3764 Ph: 775-887-2190 (24 hours)</td>
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<tr>
<td>Central Nevada Health District (CNHD)</td>
<td>Churchill, Mineral, Eureka, and Pershing</td>
<td>Fax: 775-687-2697 Ph: 775-866-7535 (24 hours)</td>
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<tr>
<td>Northern Nevada Public Health (NNPH, formerly WCHD)</td>
<td>Washoe</td>
<td>Fax: 775-328-3764 Ph: 775-328-2447 (24 hours)</td>
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<tr>
<td>Southern Nevada Health District (SNHD)</td>
<td>Clark</td>
<td>Fax: 702-759-1435 Ph: 702-759-1300 (24 hours)</td>
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<td>Nevada Division of Public and Behavioral Health (DPBH) Office of State Epidemiology (OSE)</td>
<td>All other counties</td>
<td>Fax: 775-684-5999 Ph: 775-684-5911 (M-F 8 a.m.-5 p.m.)</td>
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Questions
For updated guidance, review the Division of Public and Behavioral Health Technical Bulletin web page regularly. Email stateepi@health.nv.gov for other questions regarding NAC 441A LTBI required reporting.

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