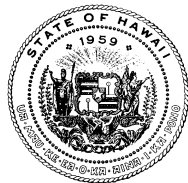


DAVID Y. IGE  
GOVERNOR OF HAWAII



VIRGINIA PRESSLER, M.D.  
DIRECTOR OF HEALTH

**STATE OF HAWAII  
DEPARTMENT OF HEALTH  
DEVELOPMENTAL DISABILITIES DIVISION**

P. O. BOX 3378  
HONOLULU, HI 96801-3378  
Telephone: (808) 586-5840  
Fax Number: (808) 586-5844

In reply, please refer to:  
File:

Medicaid I/DD Waiver  
Memo No.: FY2018-06  
Date: May 1, 2018

TO: Medicaid I/DD Waiver Providers  
FROM: Mary Brogan, Administrator  
Developmental Disabilities Division  
SUBJECT: Tuberculosis (TB) Screening

In March 2018, the Department of Health (DOH) announced new requirements regarding the State's Tuberculosis (TB) clearances. We have received several questions from providers about how the new requirements affect the Intellectual/Developmental Disabilities (I/DD) Waiver staff qualifications. The DOH, Developmental Disabilities Division (DDD), is in the process of obtaining clarification from the DOH TB Control Branch about the requirements for I/DD Waiver staff who are currently required to obtain a TB clearance annually.

In the interim, until guidance is issued through a DOH DDD Transmittal Memo, I/DD Waiver staff will still be required to obtain the annual TB clearance. Attached is a form letter that the provider agency must complete with the employee's name and agency name. Information must be legible. This letter must be presented by the employee to the TB Clinic at the time of request for a TB test. If the employee does not have the letter with them, the TB Clinic may refuse to provide the test. All of the TB Clinics have been advised of this interim process.

Effective immediately and until further written notice, please use the attached form letter for every I/DD Waiver employee who must obtain a TB clearance. Please inform your service supervisors and other personnel of this interim process. Note that the letter includes the TB Control Branch number for information; this is for the TB Clinic if they have questions for their Branch Chief. For I/DD Waiver provider questions, please call the Community Resources Management Section (CRMS) office at (808)733-2133.

Thank you for your assistance.

Attachment

Medicaid I/DD Waiver Program – Provider Memo  
Memo No. FY2018-05  
January 30, 2018  
Page 2 of 2

c: Jon Fujii, DHS-MQD  
Dr. Elizabeth MacNeill, DOH-CDPHND-TBB  
DDD Branch Chiefs