SUPPLIES AND SERVICES PROVIDED BY THE ALASKA TUBERCULOSIS **PROGRAM** Who May How to Obtain Contact Cost to Item Order/Use **Patient Pharmaceuticals** PHNs and Public Health No cost Fax PPD Order Form (18.1) to Epi SOE Drug Room **Purified Protein** Drug Room 907-269-0788 Centers **Derivative (PPD)** (f) 907-269--472 ONLY AVAILABLE TO PHNS TB Medications* **PHNs** Fax TB/LTBI Medication Request AK TB Program No cost (18.1) to the AK TB Program 907-269-8000 (Health care providers order through PHNs) (f) 907-563-7868 Pill crushers PHNs Indicate "pill crusher" on TB/LTBI AK TB Program No cost 907-269-8000 Medication Request (18.1) (f) 907-563-7868 Lab Supplies No cost Health care providers and Fax ASPHL Supply Request Form ASPHL-Anchorage Sputum collection **PHNs** (18.1) to ASPHL- Anchorage 907-334-2100 containers and (f) 907-334-2161 packaging materials **Other Supplies** AK TB Program TB Screening and Health care providers No cost Call AK TB Program 907-269-8000 Clearance cards (f) 907-563-7868 Incentives and PHNs only No cost Contact Regional Nurse Manager Enablers† **Services** Call an Epi Nurse for a CXR **Chest Radiograph** Health care providers AK TB Program AK TB Program caring for nonreimburses up authorization number. Use the Referral 907-269-8000 (CXR) Single view± insured/underinsured to \$125 per and Authorization for TB Screening (f) 907-563-7868 patients outside of **CXR** and Follow-up Services (18.1). (CPT 71010) Anchorage AK TB Program As above Automatic on any submitted CXR. **CXR** interpretation No cost Use the Tuberculosis Screening 907-269-8000 Questionnaire /CXR Interpretation (f) 907-563-7868 Request (18.1). Call an Epi Nurse for a LFT AK TB Program **Liver Function Tests** Health care providers Reimbursement authorization number. 907-269-8000 -AST, ALT, bilirubin caring for nonup to \$110 for insured/underinsured LFTs and up to Use the Referral and Authorization for (f) 907-563-7868 (CPT 80076) patients outside of \$40 for TB Screening and Follow-up Services Venipuncture Anchorage venipuncture (18.1).(CPT 36415) Health care providers Call AK TB Program AK TB Program Medical No cost 907-269-8000

Call an Epi Nurse for an IGRA

Use the Referral and Authorization for

TB Screening and Follow-up Services

authorization number.

(18.1).

Health care providers

insured/underinsured

patients outside of

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Anchorage

Consultations[±]

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IGRA testina

Reimbursement

up to \$110

(f) 907-563-7868

AK TB Program

(f) 907-563-7868

907-269-8000

All providers prescribing and /or requesting medications from the SOE Drug Room agree to use standard and approved regimens as referenced in this AK TB Manual to treat individuals for suspected or confirmed tuberculosis or LTBI. In special situations and after consultation with the Alaska TB Program, other regimens may be approved if clinically indicated.

[†]When funding is available.

^{*}The Municipality of Anchorage provides TB clinical services, CXRs, and medical consultations within the Municipality of Anchorage, 825 L Street. Anchorage, AK 99501. Call 907-343-4799 to obtain these services.