

Title 15: Mississippi State Department of Health

Part 9: Office of Health Policy and Planning

SUBPART 96: MISSISSIPPI CONRAD STATE 30 J-1 VISA WAIVER GUIDELINES

CHAPTER 1. MISSISSIPPI CONRAD STATE 30 J-1 VISA WAIVER GUIDELINES

SUBCHAPTER 2: GENERAL GUIDELINES:

Rule 1.2.2. All requests must at a minimum, include the following:

11. HIV test result and evidence of screening for tuberculosis infection and disease for the applying physician. The tuberculosis screening must include: a tuberculosis signs and symptom assessment by a licensed physician or nurse practitioner; testing for infection performed by an interferon gamma release assay (IGRA) and a chest x-ray with a written interpretation. The HIV test, tuberculosis screening, and tuberculosis tests must have occurred within the 3 months prior to the submission date of the Site Predetermination Application. The IGRA is not required if records of current or previous tuberculosis treatment completion are provided with the submission. If the applicant tests positive for tuberculosis infection or disease, during the application process, the recommendation shall be withheld until treatment is completed or a satisfactory treatment plan has been submitted to and approved by MSDH and agreed to by the applying physician. If any part of the testing or treatment is to be provided by the MSDH, the MSDH approved plan shall include the treatment regimen to be followed and an approved plan and method of payment for any required testing, treatment or follow-up. Failure to adhere to the plan or complete treatment may result in a revocation of the recommendation and notice to the appropriate federal entities.
12. An indication of whether the applying physician is a party to any existing or possible future (one that may occur within the obligation period) petition that would result in the applying physician not having to complete the service obligation.

SOURCE: Miss. Code Ann. §41-3-17

Rule 1.2.16 The Site Predetermination Application must include a HIV test result and evidence of screening for tuberculosis infection and disease for the applying physician. The tuberculosis screening must include: a tuberculosis signs and symptom assessment by a licensed physician or nurse practitioner; testing for infection performed by an interferon gamma release assay (IGRA) and a chest x-ray with a written interpretation. The HIV test, tuberculosis screening, and tuberculosis tests must have occurred within the 3 months prior to the submission date of the Site Predetermination Application. The IGRA is not required if records of current or previous tuberculosis treatment completion are provided with the

submission. If the applicant tests positive for tuberculosis infection or disease, during the application process, the recommendation shall be withheld until treatment is completed or a satisfactory treatment plan has been submitted to and approved by MSDH and agreed to by the applying physician. If any part of the testing or treatment is to be provided by the MSDH, the MSDH approved plan shall include the treatment regimen to be followed and an approved plan and method of payment for any required testing, treatment or follow-up. Failure to adhere to the plan or complete treatment may result in a revocation of the recommendation and notice to the appropriate federal entities.

SOURCE: Miss. Code Ann. §41-3-17

Subchapter 5: PROHIBITIONS:

Rule 1.5.1. MSDH will not consider recommendations when the provisions of Subchapter 2 have not been met and under the following circumstances:

8. Failure to comply with Rule 1.2.16.

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CHAPTER 1. MISSISSIPPI CONRAD STATE 30 J-1 VISA WAIVER GUIDELINES

SUBCHAPTER 2: GENERAL GUIDELINES:

Rule 1.2.2. All requests must at a minimum, include the following:

11. ~~A HIV test result and evidence of screening for latent and active tuberculosis for the applying J-1 physician. The tuberculosis screening must include: a tuberculosis signs and symptom assessment by a licensed physician or nurse practitioner; testing for infection performed by an interferon gamma release assay (IGRA) when reasonably available or a Mantoux tuberculin skin test (TST) when the IGRA is not available; and a chest x-ray with a written interpretation. Both the HIV test result and tuberculosis screening must have occurred within the past 6 months prior to the submission date of the Site Predetermination Application, with the exception, of the IGRA and TST if documentation of current or previous tuberculosis treatment completion is provided with the submission. For an applying physician showing signs of active tuberculosis, a MSDH approved plan for treatment, and an approved provision for payment of testing, treatment, and follow up is required. A HIV test result and evidence of screening for tuberculosis infection and disease for the applying physician. The tuberculosis screening must include: a tuberculosis~~ A HIV test result and evidence of screening for tuberculosis infection and disease for the applying physician. The tuberculosis screening must include: a tuberculosis

signs and symptom assessment by a licensed physician or nurse practitioner; testing for infection performed by an interferon gamma release assay (IGRA) and a chest x-ray with a written interpretation. The HIV test, tuberculosis screening, and tuberculosis tests must have occurred within the 3 months prior to the submission date of the Site Predetermination Application. The IGRA is not required if records of current or previous tuberculosis treatment completion are provided with the submission. If the applicant tests positive for tuberculosis infection or disease, during the application process, the recommendation shall be withheld until treatment is completed or a satisfactory treatment plan has been submitted to and approved by MSDH and agreed to by the applying physician. If any part of the testing or treatment is to be provided by the MSDH, the MSDH approved plan shall include the treatment regimen to be followed and an approved plan and method of payment for any required testing, treatment or follow-up. Failure to adhere to the plan or complete treatment may result in a revocation of the recommendation and notice to the appropriate federal entities.

12. An indication of whether the applying physician is a party to any existing or possible future (one that may occur within the obligation period) petition that would result in the applying physician not having to complete the service obligation.

SOURCE: Miss. Code Ann. §41-3-17

Rule 1.2.16 ~~The Site Predetermination Application must include a HIV test result and evidence of screening for latent and active tuberculosis. The tuberculosis screening must include: a tuberculosis signs and symptom assessment by a licensed physician or nurse practitioner; testing for infection performed by an interferon gamma release assay (IGRA) when reasonably available or a Mantoux tuberculin skin test (TST) when the IGRA is not available; and a chest x ray with a written interpretation. Both the HIV test result and tuberculosis screening must have occurred within the past 6 months prior to the submission date of the Site Predetermination Application, with the exception, of the IGRA and TST if documentation of current or previous tuberculosis treatment completion is provided with the submission. The Site Predetermination Application must include a HIV test result and evidence of screening for tuberculosis infection and disease for the applying physician. The tuberculosis screening must include: a tuberculosis signs and symptom assessment by a licensed physician or nurse practitioner; testing for infection performed by an interferon gamma release assay (IGRA) and a chest x-ray with a written interpretation. The HIV test, tuberculosis screening, and tuberculosis tests must have occurred within the 3 months prior to the submission date of the Site Predetermination Application. The IGRA is not required if records of current or previous tuberculosis treatment completion are provided with the submission. If the applicant tests positive for~~

tuberculosis infection or disease, during the application process, the recommendation shall be withheld until treatment is completed or a satisfactory treatment plan has been submitted to and approved by MSDH and agreed to by the applying physician. If any part of the testing or treatment is to be provided by the MSDH, the MSDH approved plan shall include the treatment regimen to be followed and an approved plan and method of payment for any required testing, treatment or follow-up. Failure to adhere to the plan or complete treatment may result in a revocation of the recommendation and notice to the appropriate federal entities.

SOURCE: Miss. Code Ann. §41-3-17

Subchapter 5: PROHIBITIONS:

Rule 1.5.1. MSDH will not consider recommendations when the provisions of Subchapter 2 have not been met and under the following circumstances:

8. ~~A J 1 physician showing signs of active tuberculosis without a MSDH approved plan for treatment and an approved provision for payment of testing, treatment, and follow-up. Failure to comply with Rule 1.2.16.~~

SOURCE: Miss. Code Ann. §41-3-17