



TOMÁS J. ARAGÓN, M.D., Dr.PH
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

Uniting For Ukraine (U4U): Local Health Department Frequently Asked Questions

What is the Uniting for Ukraine (U4U)?

On April 21, 2022, President Biden announced Uniting for Ukraine, a new streamlined process to provide Ukrainian citizens who have fled the war with Russia, opportunities to come to the United States and stay temporarily in a two-year period of parole. For more information, visit the [U.S. Citizenship and Immigration Services \(USCIS\) Uniting for Ukraine webpage](#).

What is the Ukrainian community's background in California before the current resettlement process?

Ukrainians recently began immigrating to the US after the fall of the Soviet Union in 1991. Over 100,000 came by 1997, mostly as economic and family migrants. In addition, some were Evangelical Christians and Jews, who came under the Lautenberg Program that allows nationals of former Soviet republics to immigrate through the refugee resettlement program on grounds of religious persecution. Before the Russian invasion in February 2022, the US Ukrainian population was the second largest population outside of Ukraine, except for Russia. Most Ukrainian immigrants in the United States before the U4U arrivers are naturalized U.S. citizens and most had gained legal permanent residence status either through family sponsorship or admittance via refugee and asylum channels.

U4U arrivers will likely be concentrated in the following CA metro areas based on 2019 census data for people of Ukrainian descent:

1. Los Angeles
2. Sacramento-Roseville-Folsom
3. San Francisco-Oakland-Berkeley
4. San Diego-Chula Vista-Carlsbad
5. San Jose-Sunnyvale-Santa Clara
6. Riverside-San Bernardino-Ontario
7. Oxnard-Thousand Oaks-Ventura

What is the rate of tuberculosis (TB) in the Ukrainian population living in California?

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According to World Health Organization (WHO) country profile, other WHO communication, and the European Center for Disease Control and Prevention (CDC), the rate of tuberculosis (TB) in Ukraine was 73 per 100,000 in 2020 with almost 30% of all new and relapse TB cases diagnosed in Ukraine being started on treatment for rifampin-resistant (RIF-R) or multidrug resistant Tuberculosis (MDR TB). During the ten-year period, 2012-2021, there were 26 TB cases reported in California among people born in Ukraine, representing an average rate of 5.2 per 100,000, just slightly higher than California's rate of 4.4 per 100,000. All cases occurred in adults (age > 14 years) with 46% (n=12) occurring among people older than 65 years. During this period there were 5 cases of MDR TB diagnosed among people born in Ukraine, representing 24% of the 21 cases with drug susceptibility information (compared to 1-2% of all California cases are MDR). This was 2.5% of the 195 MDR TB cases reported overall in California during this time.

What is the TB attestation process for Ukrainian parolees?

Parole allows an individual who may be inadmissible or otherwise ineligible for admission into the United States to be in the United States for a temporary period for urgent humanitarian reasons or significant public benefit. Ukrainian parolees are granted humanitarian parole by the U.S. Department of Homeland Security in response to Russia's war on Ukraine. Because Ukrainians are not entering through the refugee or permanent resident immigration processes, they are not receiving pre-departure medical screenings and are therefore required to have TB screening after arrival. Ukrainian parolees, as part of the U4U process, are required to provide a self-attestation to U.S. Citizenship and Immigration Services (USCIS) that they have undergone TB screening with an interferon-gamma release assay (IGRA) within 90 days after U.S. arrival. Children < 2 years old can qualify for an exemption to this requirement. As parolees are not reported through the CDC Electronic Disease Notification System, they may potentially seek IGRA testing in various locations, e.g., health department, community clinic, refugee health assessment programs. Previously, beneficiaries paroled into the United States under U4U were required to complete the medical screening and attestation within 14 days of arrival to the United States.

What are the recommendations for evaluation of TB in Ukrainian parolees ≥ 2 years old?

In addition to the required IGRA testing, the Tuberculosis Control Branch (TBCB) encourages the evaluation for TB to include a TB symptom review and review of medical history and risk factors (Box 1). History of risk factors or findings concerning for TB disease should lead to additional evaluation, such as physical exam, chest radiographs (CXR), sputum collection for acid-fast bacilli (AFB) smear/culture, Xpert

MTB/RIF, or any relevant imaging/diagnostic study to evaluate for active TB disease. Depending on access, some programs may decide to offer physical exam and/or CXR to all Ukrainian parolees, similar to the overseas TB medical screening process. However, these are not required as part of the USCIS TB screening process, unless the IGRA is positive or symptoms are present. Patients with immunocompromising conditions may have false negative IGRA results and clinicians should consider additional diagnostics to evaluate for TB disease, such as CXR and/or sputum collection if symptoms are present.

Box 1. Questions for TB symptom review and medical history/risk factors (administer in-language, if needed)

- Do (you or your child) have any of the following: cough, coughing up blood, weight loss, fever, night sweats, fatigue, loss of appetite, chest pain?
- Have (you or your child) had previous or recent contact with someone with tuberculosis?
- Have (you or your child) had known exposure to a person with drug resistant tuberculosis or someone that took injectable TB medications or TB medications for 12 months or more?
- Have (you or your child) ever been diagnosed or treated for tuberculosis?
- Do (you or your child) have any medical conditions that can affect the immune system, such as HIV, organ transplant, or cancer/chemotherapy? Do (you or your child) take any medications that can affect the immune system?

What are the recommendations for treatment of latent tuberculosis infection (LTBI) in the Ukrainian population ≥ 2 years old?

In Ukrainians with LTBI, TBCB recommends treatment with the following, **in order of preference**:

1) Rifampin daily for 4 months, 2) Rifapentine/Isoniazid once weekly for 3 months, or 3) Isoniazid daily for 6-9 months. Clinicians may wish to consider treatment for MDR LTBI in persons at higher risk for exposure to drug resistant TB (e.g., known contact to MDR TB). Clinical consultation is recommended and may be available through your [local TB program](#), the CDPH TB Control Branch (510-620-3000, tbcb@cdph.ca.gov), or the [Curry International TB Center warmline](#) consultation service.

What are the recommendations for evaluation of TB in Ukrainian Parolees < 2 years old?

Although children < 2 years of age can qualify for an exemption to the USCIS IGRA requirement, TBCB recommends that Ukrainian parolees < 2 years of age receive a physical examination and history provided by a parent or responsible adult who knows the child best (Box 1). History of risk factors, symptoms, or findings concerning for TB

disease should lead to additional evaluation, including a TST or IGRA, a 2-view CXR, and any additional diagnostics to evaluate for TB disease.

If any accompanying family members or close contacts to the child are diagnosed with LTBI or TB disease, it is recommended that the child receive an IGRA and 2-view CXR. If the IGRA is positive or CXR is abnormal, additional diagnostics should be performed to evaluate for TB disease. Pediatric TB clinical consultation is available through the CDPH TB Control Branch or the Curry International TB Center warmline consultation service.

What are the recommendations for treatment of LTBI in the Ukrainian population < 2 years old?

In children < 2 years old with LTBI, TBCB recommends treatment with the following, **in order of preference**: 1) Rifampin daily for 4 months or 2) Isoniazid daily for 6-9 months. Clinicians may wish to consider treatment for MDR LTBI in persons at higher risk for exposure to drug resistant TB (e.g., known contact to MDR TB). Clinical consultation is recommended and may be available through your [local TB program](#), the CDPH TB Control Branch (510-620-3000, tcb@cdph.ca.gov), or the [Curry International TB Center warmline](#) consultation service.

Is there federal funding to support local TB programs that will be serving Ukrainian parolees?

- a. CDC's Division of TB Elimination will distribute approximately \$29 million dollars in supplemental funding to State and Big City TB programs through existing Cooperative Agreements.
- b. The funding will be split up into two distributions by calendar year:
 - i. **First distribution in calendar year 2022 (\$8 million)**, California (excluding San Diego, San Francisco, and Los Angeles) will receive \$619,748.
 1. We anticipate the funding will arrive mid to end of August.
 2. Funds will be distributed to jurisdictions through our local assistance award mechanism.
 3. Programs will be able to apply funding to previously encumbered expenses retroactive to May 21, 2022* to back pay the expenses you are already incurring (*although federal funding allows for expenses retroactive to May 21, 2022, CDPH fiscal year does not allow for expenses to cross state fiscal years; CDPH will only allow expenses retroactive to July 1, 2022).

- ii. **Second distribution in calendar year 2023 (\$21 million)**, the funding amount will be based on need and real costs associated with the care and treatment of Ukrainian parolees.
4. This funding will also take into account secondary relocation of parolees and provision of services at their new location.
5. TBCB is strongly encouraging programs to use CalREDIE (Clinical Info Tab) for surveillance purposes and to document clinical services (screening, testing results, LTBI treatment) provided to Ukrainian parolees so that programs are able to be reimbursed for staffing/services. The completion of Report of Verified Case of TB (RVCT) will be required for those diagnosed with active TB disease.

What are the allowable expenses and activities that the federal funding will support?

Allowable expenses include:

- Outpatient services related to TB control and clinical care (e.g., IGRA testing, chest radiography, medical evaluation, treatment)
- Procurement and provision of medications for the treatment of LTBI and TB disease
- Reasonable program purposes, including personnel, travel, supplies, and services
- Food, Shelter, Incentives, and Enablers to support TB testing, treatment, and adherence
- Activities like targeted testing, contact investigation, outreach activities, conventional directly observed therapy (DOT) and/or electronic DOT (eDOT)
- Integration of services when it is intended to specifically reduce TB transmission or improve TB screening, testing, or treatment in populations disproportionately affected by other infections or comorbidities including diabetes mellitus, hepatitis B or C virus, sexually transmitted diseases (STDs), and human immunodeficiency virus (HIV)

Do I need to report? What are the benefits to reporting?

TB Control Branch is strongly encouraging programs to use CalREDIE (Clinical Info Tab) to document services (screening, testing results, LTBI treatment) provided to Ukrainian parolees so that programs can track services provided for surveillance and for reimbursement. Additionally, the completion of Report of Verified Case of TB (RVCT) is required for those diagnosed with active TB disease.

How do I enter information in CalREDIE?

1. Create a TB related disease incident in CalREDIE based on appropriate disease classification:
 - Tuberculosis (No Exposure/Not Infected – TB0)
 - o Select this option if parolee tested negative for IGRA and there's no known exposure.
 - Tuberculosis (Exposure/No Evidence of Infection – TB1)
 - Tuberculosis (Infection/No Disease LTBI – TB2)
 - o Select this option for latent TB infection
 - Tuberculosis (Clinically Active – TB3)
 - o Select this option for active TB disease
 - o Additionally, the completion of RVCT 2020 stored in the Electronic Filing Cabinet is required for active cases
 - Tuberculosis (Not Clinically Active – TB4)
 - Tuberculosis (Suspect – TB5)
2. Record patient demographic and contact information on the Patient tab including *Last Name, First Name, Country of Birth, Date of Arrival (initial date arrived in the U.S.), Gender, Race, Ethnicity, DOB, Patient Address, Home Telephone or Cellular Phone, and email.*
3. Document patient test results (e.g., IGRA, CXR, etc.) and LTBI treatment information where relevant on the Clinical Info tab. There are several sections within the Clinical Info tab. Not all sections will be relevant for each patient. Complete the following fields as noted below:
 - **Is This Evaluation Part of an Immigration Screening?** - Select “**Yes, Other**” for all U4U screenings
 - **Risk Assessment: Select Identified TB Risk Factors** - Select the “**Other, specify**” checkbox field
 - **Other Risk:** Write in “**U4UKRAINE**”
4. Complete of Report of Verified Case of TB (RVCT 2020) for those diagnosed with active TB disease (Clinically Active – TB3). Complete the following fields on the RVCT as noted below:
 - Risk Factors section (corresponding to CDC #16) - Select “**Yes**” for the “Other Risk Factor” field. Write in “**U4UKRAINE**” in the “Other Risk, Specify” field
 - Initial Reason Evaluated for TB (CDC #14) - Select “**Screening**” option for cases diagnosed with TB disease as a result of *U4U* post-arrival screening process

Detailed instructions are provided in “Uniting for Ukraine (U4U) – Instructions for Documenting Screening, Testing, & Treatment in CalREDIE” document. Please contact TB Control Branch if you need a copy of these instructions.

What patient education materials are available?

Resources in Ukrainian have been developed by the [Southeastern National TB Center \(SNTC\)](#), [Centers for Disease Control and Prevention \(CDC\)](#) and the [Massachusetts Department of Public Health \(MADPH\)](#). These include:

- TB Elimination: TB General Information
- Questions and Answers About TB
- LTBI vs active TB
- TB prevention through LTBI treatment
- You Can Have TB and No Symptoms
- Why Take TB Medicine Now?
- 12 Dose Regimen for LTBI Patient Education Brochure
- LTBI 4R and 3HR medication trackers
- TB Treatment Adherence
- LTBI and active TB medications
- Ukraine Cultural Quick Reference Guide: TB in Ukraine and Ukrainian background
- Cultural Background on Refugees from Ukraine (European Resettlement and Integration Technical Assistance (EURITA))

Where can I get estimates of Ukrainian parolees (as part of U4U) for my local jurisdiction?

TBCB receives periodic estimates of Ukrainian arrivers by county from the Office of Refugee Health. However, these are based on the location of the sponsor and no locating or contact information for sponsors or parolees are provided.

How can TB programs locate or outreach to Ukrainian arrivers in their jurisdiction?

As Ukrainian parolees as part of the U4U program are not reported through the CDC Electronic Disease Notification System, they may potentially seek IGRA testing in various locations, e.g., health department, community clinic, refugee health assessment programs. TB programs may wish to consider partnering/communicating with local organizations that provide services for Ukrainian arrivers and examples might include: Refugee Health Program/Clinic, Ukrainian community organizations, federally qualified health centers (FQHC) or other community clinics. Information on where to refer Ukrainian parolees for TB testing or treatment may be helpful information to share with community partners.

Are Ukrainian parolees eligible for health insurance?

Most displaced Ukrainian nationals arriving in the United States are eligible for health insurance. Certain Ukrainian nationals are eligible for health coverage through

Medicaid, the Children's Health Insurance Program (CHIP), the Health Insurance Marketplace, or Refugee Medical Assistance (RMA). See the [Centers for Medicare & Medicaid Services \(CMS\) Fact Sheet on Eligibility and Health Coverage Options for Ukrainian Parolees](#).

What other benefits can Ukrainians entering through U4U receive?

Ukrainians are eligible for many federal and state-funded benefits. Official California state communications regarding benefits for Ukrainian parolees can be found here: [Ukraine Resources \(ca.gov\)](#). A chart of benefits by specific immigration status is available here: [ACWDL Errata Benefits Eligibility for Humanitarian Parolees from Ukraine \(ca.gov\)](#).

What if Ukrainians are reluctant to access TB screening, medical care, and other benefits because of fears this will disqualify them for future immigration opportunities?

This fear may be related to concerns about the impact of the 1999 and the 2019 Public Charge Final Rule. As of April 12, 2021, the 2019 Public Charge Final Rule is no longer in effect. See the [USCIS Public Charge](#) website for additional details. However, the 1999 Public Charge Rule is still in effect. It applies to a narrow set of benefits and only to immigrants in very specific situations. Please consult the [Public Charge Resources | USCIS](#) page for detailed information about the 1999 Public Charge Rule.