



Texas Department of State Health Services

Texas Infertility Prevention Project (TIPP) *Procedures of Collaboration*

To promote the identification, treatment, and prevention of sexually transmitted infections (STIs), the Department of State Health Services (DSHS) collaborates with a variety of state, local and regional partners including, but not limited to: local health departments; community-based clinics; sexual health, family planning, or other essential community providers; and state, local, and private laboratory partners (referred to as *partners* in this document).

DSHS and/or the Texas IPP administrative agency will utilize STI funds from the Centers for Disease Control and Prevention (CDC) and/or general revenue funds to conduct the following activities:

- a) Purchase and distribute chlamydia and gonorrhea (CT/GC) amplified technology test kits to project partners as agreed upon by all parties;
- b) Provide CT/GC laboratory processing (i.e., lab costs) for specimens from patients who have been tested (based on project screening criteria);*
- c) Purchase and distribute medications to treat CT/GC through the DSHS Pharmacy Branch, PIOS;
- d) Provide statewide and partner site-specific CT/GC data analysis semi-annually and additional data analysis as requested on a case-by-case basis;
- e) Provide training, technical assistance, and programmatic consultation to project partners via telephone, written correspondence, and/or site visit;
- f) Provide staff and patient educational materials and online resources as appropriate; and
- g) Provide on-site administrative and clinical site audits to TIPP sites, including a clinical record review, to ensure policies, procedures, and practices are in compliance with program guidelines and objectives.

Participating Project Partners will:

- a) Conduct CT/GC screening according to project screening guidelines*/best practices, and ensure patients will not be charged for test kits and/or laboratory processing supported by TIPP;
- b) Submit CT/GC specimens to an approved laboratory and accurately complete laboratory requisition forms to assure quality data and appropriate payor source**;
- c) Submit data[†] required based on project data criteria and assure transmissions and correspondence meet security and confidentiality standards;
- d) Submit confidential reports of diagnosed STI cases to local health authority or DSHS surveillance as required by [25 Texas Administrative Code, Chapter 97](#) ;
- e) Provide patient care and document in accordance with the [DSHS HIV/STD Program Operation Procedures and Standards \(POPS\) Chapter 12 - STI Clinical Standards](#) and the most current [CDC STD Treatment Guidelines](#);
- f) Ensure that services provided are patient-centered as defined by the [CDC Recommendations for Providing Quality Sexually Transmitted Diseases Clinical Services, 2020](#);
- g) Ensure medications obtained from DSHS through the Pharmacy Branch platform, PIOS, are used in accordance with the criteria set forth by DSHS;
- h) Maintain all records on all patients, participate in administrative and clinical site audits conducted by DSHS programmatic staff, Cardea staff and consultants, and/or project representatives, provide timely and thorough response to site audit feedback and reporting as requested;
- i) Appoint a quality assurance (QA) committee to meet regularly and follow an approved protocol to conduct internal audits (including health record audits and observations of staff interactions with clients), analyze findings, and develop recommendations. It is recommended that clinics develop internal written procedures for the following self-directed QA activities:



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- Collecting and analyzing client feedback (i.e., a yearly client satisfaction survey);
 - Receiving, reviewing, and responding to client complaints;
 - Assessing the number of clients not seen the day they seek services to routinely analyze appointment and staffing needs,
 - Ensuring staff properly label and pack specimens for shipping in accordance with the receiving laboratory specifications;
 - Conducting client flow analysis at least every other year to provide a systematic understanding of bottlenecks in clinic flow;
- j) Comply with the [Texas Administrative Code \(TAC\) Title 1, Part 15, Chapter 382, Subchapter A, Healthy Texas Women, 382.17 Healthcare Providers \(b\)-\(d\)](#);
- k) Assure all agency staff utilizing project supplies are oriented to project goals, mission, and screening guidelines;
- l) Participate in TIPP-related training and technical assistance (TTA) opportunities as appropriate. This may include (but is not limited to) electing at least one clinical provider to attend the annual TIPP Fall Convening in-person and completing the TIPP annual needs assessment; and
- m) Maintain documentation of TIPP eligibility* in client records.

Note: The Procedures of Collaboration may be renegotiated based on factors including but not limited to: special project goals and objectives, partner agency capacity, screening volume, chlamydia and gonorrhea positivity rates, compliance with the most recent CDC STI Treatment Guidelines, adherence to the project screening guidelines, and available project funding.

Support to partners is non-monetary. Support includes CT/GC testing supplies, CT/GC laboratory processing, STI medications, training, technical assistance, and miscellaneous patient and staff education supplies.

**Project CT/GC testing supplies are for a specified target population of uninsured individuals ([as defined in TIPP policy 420.002](#)) to assist public health/safety net providers maintain screening according to current screening guidelines and to meet community needs based on morbidity data.*

***Project partners are responsible for assuring allocated test supplies are used for specified project target population and the annual allocated supplies are expended routinely. Unused allocated supplies will be reallocated to other project partners as needed, and this could affect the next project year annual allocation. Project partners must ensure project tests are accurately reflected in laboratory invoices from participating private laboratories. If laboratory requisition forms are not completed accurately and project tests are not accounted for, the project may be unable to pay for missing tests due to the project funding cycle. If the project partner finds tests are not being accounted for on laboratory reports or invoices, notify the Coordinator immediately.*

+ Participating Project Partners must submit required data quarterly either through their CT/GC processing lab or clinic/agency data transfer through electronic health record system or other standardized reporting mechanism. Minimum required data elements: patient unique identifier, date of specimen collection, DOB, sex, race, ethnicity, test type, specimen source, CT test result, and GC test result.



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Texas IPP Standards

- Sexually Transmitted Infection Treatment Guidelines, (CDC), 2021. [CDC STI Treatment Guidelines, 2021](#)
 - Clinical Prevention Guidance
 - STD/HIV Prevention Counseling
 - Prevention Methods
 - Reporting and Confidentiality
 - Chlamydial Infections
 - Gonococcal Infections
- [DSHS HIV/STD Program Operation Procedures and Standards \(POPS\); POPS Chapter 12 - STI Clinical Standards](#)
- [CDC Morbidity and Mortality Weekly Report \(MMWR\), Recommendations and Reports / January 3, 2020 / 68\(5\);1–20; Recommendations for Providing Quality Sexually Transmitted Diseases Clinical Services, 2020](#)

TIPP Partner Organization, Representative Name	Partner Representative Signature	Date Signed

Bri Seoane

Cardea Representative Name

Signed by:

Bri Seoane

862955F6F03G420...

Cardea Representative Signature

September 22, 2025

Date Signed

DSHS Representative Name

DSHS Representative Signature

Date Signed

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