

By Ms. Resor of Acton, petition of Pamela P. Resor and other members of the General Court relative to the establishment of a statewide cancer registry within the Department of Public Health. Health Care.

The Commonwealth of Massachusetts

In the Year One Thousand Nine Hundred and Ninety-Five.

AN ACT RELATIVE TO THE ESTABLISHMENT OF A STATEWIDE CANCER REGISTRY.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- 1 Chapter 111 of the General Laws is hereby amended by striking
2 out section 111B and inserting in place thereof the following
3 section:
- 4 Section 111B. 1) The department shall establish a statewide
5 cancer registry program to ensure that cancer reports, required in
6 paragraph two shall be maintained and shall be available for use
7 in the course of any study for the purpose of advancing medical
8 research or medical education in the interest of reducing mor-
9 bidity or mortality.
- 10 2) Every health care facility, licensed in the commonwealth,
11 shall report to the department such information as will indicate
12 diagnosis, state of disease, medical history, laboratory data, tissue
13 diagnosis, and radiation, surgical, or other methods of treatment
14 on each cancer patient admitted to the hospital for treatment. No
15 liability shall arise against any health care facility by reason of
16 having provided such information to the department. Failure to
17 comply with this requirement shall be cause for suspension or
18 revocation of the license of any such facility.
- 19 3) The commissioner shall establish a training program for the
20 personnel of participating health care facilities and a quality con-
21 trol program for cancer data. The commissioner shall collaborate
22 in studies with clinicians and epidemiologists and publish reports
23 on the results of such studies. The commissioner shall cooperate

24 with the National Institutes of Health and the Centers for Disease
25 Control in providing cancer incidence data.

26 4) (a) Any health care facility diagnosing or providing treat-
27 ment to cancer patients shall report each case of cancer to the
28 commissioner or his or her authorized representative in a format
29 prescribed by the commissioner within 120 days of admission or
30 diagnosis.

31 (b) Any health care provider diagnosing or providing treatment
32 to cancer patients shall report each cancer case to the commis-
33 sioner or his or her authorized representative within 120 days of
34 diagnosis.

35 (c) All health care facilities and health care providers who pro-
36 vide diagnostic or treatment services to patients with cancer shall
37 report to the commissioner any further demographic, diagnostic,
38 or treatment information requested by the commissioner con-
39 cerning any person now or formerly receiving services, diagnosed
40 as having or having had a malignant tumor. Additionally, the com-
41 missioner or his or her authorized representative shall have phys-
42 ical access to all records which would identify cases of cancer or
43 would establish characteristics of the cancer, treatment of the
44 cancer, or medical status of any identified cancer patient. Willful
45 failure to grant access to such records shall be punishable by a
46 fine of up to \$500.00 for each day access is refused. Any fines
47 collected pursuant to this subsection shall be deposited in the gen-
48 eral fund.

49 5) The department shall use or publish said material only for
50 the purpose of advancing medical research or medical education
51 in the interest of reducing morbidity or mortality, except that a
52 summary of such studies may be released for general publication.
53 Information which discloses or could lead to the disclosure of the
54 identity of any person whose condition or treatment has been
55 reported and studied shall be confidential and subject to the
56 following provisions:

57 (a) release may be made with the written consent of all persons
58 to whom the information applies;

59 (b) the department may contact individuals, for the purpose of
60 epidemiologic investigation and monitoring, provided information
61 that is confidential under this section is not further disclosed.

62 (c) The commissioner may furnish confidential information to
63 other states' cancer registries, federal cancer control agencies, or
64 health researchers in order to collaborate in a national cancer reg-
65 istry or to collaborate in cancer control and prevention research
66 studies. However, before releasing confidential information, the
67 commissioner shall first obtain from such state registries, agen-
68 cies, or researchers agreement in writing to keep the identifying
69 information confidential and privileged. In the case of researchers,
70 the commissioner shall also first obtain evidence of the approval
71 of their academic committee for the protection of human subjects
72 established in accordance with Part 46 of Title 45.

73 6) Funds appropriated for this section shall be used for the pur-
74 pose of establishing, administering, compiling, processing and
75 providing suitable biometric and statistical analyses.

76 7) The commissioner, in conjunction with the commissioner of
77 the department of environmental protections, shall be responsible
78 for the publication of an annual report, available to the legislature
79 and to the public, that would identify the incidence of cancer, by
80 type and by region, along with any other data that the commis-
81 sioner deems necessary.

82 Nothing in this section shall be construed to compel any indi-
83 vidual to submit to medical or department examination or
84 supervision.

85 The department shall make such rules and regulations as are
86 necessary to implement the provisions of this section pursuant to
87 chapter thirty A.

