APPENDIX G

TUMOR REGISTRY RULES AND REGULATIONS

CHAPTER 1

GENERAL PROVISIONS

Section 1. Authority. The statutory authority for these rules is W.S. § 35-1-240(b) and P.L.102-515.

- Section 2. **Definitions.** The following definitions shall apply in the interpretation and enforcement of these rules and regulations.
 - (a)"ACoS" means the American College of Surgeons Commission on Cancer.
 - (b) "Billing Period" means January 1 through December 31 of each calendar year.
- (c) "Cancer" means diagnosis of disease to include carcinoma, sarcoma, melanoma, leukemia and lymphoma.
- (d) "Case Eligibility Criteria" means criteria determined by the ACoS as reportable cases of cancer, supplied by the State Agency.
- (e) "Case Finding" means screen hospital listing of patient admit and outpatient visits by ICD-9 code to determine patients with a new diagnosis or history of cancer. Screen pathology department autopsy, cytology and pathology reports to determine patients with a new diagnosis or history of cancer.
- (f) "Clinical Laboratory" means a facility for the microbiological, serological, chemical, hematological, biophysical, cytological or pathological examination of materials derived from a human body for the purpose of obtaining information for the diagnosis, prevention or treatment of disease or assessment of medical conditions
- (g) "Completed Registration" means all of a cancer patient's available data items required by the ACoS in format specified in manuals required by the State Agency
- (h) "Confidential statistical records" means a group of any records under the control of an agency from which information is retrieved by the name of the individual or by some identifying number, symbol, or other identifying particular assigned to the individual.

- (i) "Epidemiologist" means one who specializes in the practice of the science concerned with the study of the factors determining and influencing the frequency and distribution of disease, injury and other health-related events and their causes in a defined human population for the purpose of establishing programs to prevent and control their development and spread.
- (j) "Health Care Provider" means a person who is licensed, certified or otherwise authorized by the law of this state to provide health care in the ordinary course of business or practice of a profession, but does not include a person who provide health care solely through the sale or dispensing of drugs.
- (k) "Hospitals" means establishments with organized medical staffs, with permanent facilities that include in-patient; beds and with medical services, including physician services and continuous nursing services; to provide diagnosis, treatment, and continuity of care for patients.
 - (I) "Hospital Authority" means administrator or person appointed by the administrator
- (m) "Hospital Cancer Registrar" means a person on staff or contracted by a Wyoming Hospital, who is assigned the responsibility of completed registration of all required cancer cases to the State Agency.
- (n) "Infirmaries of Wyoming Institutional Facilities" means a place where ill persons are cared for within lodging facilities owned and operated by the State of Wyoming.
 - (o) "ICD-9" means International Classification of Diseases.
 - (p) "NAACCR" means North American Association of Central Cancer Registries.
- (q) "Nonconfidential statistical data" means nonidentifying masses of numerical data which summarize disease factors.
- (r) "Nursing Care Facilities" means a facility which is currently licensed and certified to provide skilled nursing services and/or intermediate nursing services.
- (s) "Patient" means an individual who receives or has received health care and/or a deceased individual who has received health care.
- (t) "Patient Follow-up" means annual investigation and recording of patient status and of patient's disease required by ACoS.
- (u) "Physician" means a term used to indicate individuals appropriately licensed in Wyoming.

- (v) "Private Office" means a term used to indicate office space used by physician in private practice.
- (w) "Rules" means to be construed to embrace and be synonymous with the term "regulation".
- (x) "Semi-Annually" means every six months (twice a year). Schedule will be established and agreed on between each individual hospital and the State Agency.
 - (y) "Shall" means State Agency requirement.
- (z) "State Agency" means the Wyoming Department of Health, Division of Public Health, Preventive Medicine Branch, office of the Wyoming Central Tumor Registry.

Section 3. Applicability.

- (a) Chapters 1, 2 and 3 of these regulations shall apply to all hospitals, physicians and other health care providers licensed and performing patient care in Wyoming.
 - (i) Exception: Wyoming State (Psychiatric) Hospital.
- (b) Chapters 1 and 4 of these regulations shall apply to any person employed by the State Agency, epidemiologist, researcher and any other persons or organizations utilizing statewide cancer registry data.

Section 4. Immunity from Civil Action.

- (a) Any person who complies with W.S. § 35-1-240(b) is immune from any civil action with respect to a cancer case report provided to the State Agency or with respect to access to cancer case information provided to the registry.
- Section 5. **Standards**. The State Agency has adopted the latest version of "Standards for Cancer Registries" published by the North American Association of Central Cancer Registries (NAACCR).
- (a) Data Completeness: 95% of unduplicated, expected malignant cases of reportable cancer occurring in Wyoming residents in a diagnosis year shall be reported to the state cancer registry.
- (b) Data Timeliness: Cancer cases shall be reported to the state cancer registry within six (6) months of diagnosis date.
- (c) Data Quality: Comply with standards for data quality including standardized data format as promulgated by the NAACCR.

CHAPTER 2

UNIFORM REGISTRATION AND REPORTING OF CANCER CASES

Section 1. Training.

- (a) All hospitals shall arrange for a minimum of one (1) person and a maximum of three (3) persons, to attend initial training at the State Agency unless a waiver is granted to the hospital by the State Agency. Waivers will be granted at the sole discretion of the agency upon a showing of good cause; i.e., proof of contract with an independent contractor or proof that current hospital personnel have previously received training.
- (b) Initial educational training of Hospital Cancer Registrars shall be done in the State Agency offices by a qualified trainer at no cost to the hospital. Hospital's employee expenses shall be the responsibility of the hospital.
- (c) Hospitals shall be responsible for utilizing the initially trained employees to train other personnel to insure a continuum of trained personnel.
- (d) Additional training of Hospital Cancer Registrars shall be provided by the State Agency or a suitable alternative within a reasonable time of individual hospital's request.

Section 2. All Hospitals, Physicians and Other Health Care Providers.

- (a) and other health care providers shall grant State Agency access to all records that would identify cases of cancer or would establish characteristics of the cancer, treatment or medical status of any identified patient.
- (b) Hospitals, physicians and other health care providers shall not be held liable in any civil action with respect to a cancer case report provided to the statewide cancer registry, or with respect to access to cancer case information provided to the statewide cancer registry per W.S. § 35-2-609 (Disclosure without patient's authorization).

Section 3. All Hospitals.

- (a) Hospitals shall perform case finding to determine all patients with a new diagnosis of cancer or history of cancer which meets the case eligibility criteria.
- (b) Hospitals shall provide semi-annually to the State Agency a listing of cancer cases by ICD-9 codes which includes the diagnosis of cancer and history of cancer. The State Agency shall be authorized to inspect same, to verify the completeness of cancer reporting.
- (c) Hospitals shall perform patient follow-up on all living patients annually per ACoS guidelines. Follow-up shall be submitted to the State Agency on a monthly basis.

(d) All hospitals shall have the right to establish a contract, to meet Tumor Registry requirements, with an independent contractor or hospital previously trained.

Section 4. Registration Options

- (a) All hospitals shall select one of the following options relative to the registration of cancer patients seen in their hospital:
 - (i) Option 1.
- (A) Submit completed registration to the State Agency of all cases within the facility which meet case eligibility criteria. New case registrations shall be reported to the State Agency on a monthly basis.
 - (ii) Option 2.
 - (A) Pay the designated fee per cancer case as defined in Chapter 3, Section 1.
- (B) Mail all required documentation to the State Agency on a monthly basis for case registration to be completed within the State Agency.
- (b) Hospitals selecting option 2 shall notify the State Agency in writing of their selection no later than December 1st of the calendar year.
- (c) Option selection may be reviewed and/or changed after December 1st of the current years by hospital authority or by State Agency by providing thirty (30)days written notice.

Section 5. Physicians.

- (a) Physicians shall report to the State Agency, all cancer patients who meet case eligibility criteria who are diagnosed and/or treated in a private office and who are not admitted to a Wyoming Hospital.
- (b) Physicians shall supply all available information requested by the State Agency concerning cancer patients who meet case eligibility criteria.
- (c) Physicians shall supply all available information requested by their Hospital Cancer Registrar, concerning cancer patients who meet case eligibility criteria.

Section 6. Other Health Care Providers.

(a) Clinical Laboratories in Wyoming shall provide copies of all tissue, cytology and autopsy reports on cancer patients seen outside a Wyoming Hospital.

- (b) Infirmaries of Wyoming Institutional Facilities shall supply all available information requested by the State Agency concerning cancer patients who meet case eligibility criteria.
- (c) Nursing Care Facilities shall supply all available information requested by the State Agency concerning cancer patients who meet case eligibility criteria.

CHAPTER 3

REGISTRATION FEES

Section 1. Fee Assessment.

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- (a) Fees shall be assessed only to those hospitals which select option 2 as defined in Chapter 2, Section 4(ii).
- (b) Hospitals which select option 2 as defined in Chapter 2, Section 4(ii), shall be assessed a fee of twenty-five dollars (\$25) per new case.
- (c) Cancer cases diagnosed prior to July 1, 1994 shall not be subject to fee assessment.
- (d) Cancer case count for assessment of fees shall be calculated by State Agency's record of cases added to each hospital's file during each billing period.
- (e) State Agency shall assess hospital fees annually for each cancer case registered within each billing period.
- (f) Fees shall be payable to the state general fund within sixty (60) days of receipt of billing.
- (g) Individual physicians shall not be assessed fees.

CHAPTER 4

PUBLIC LAW 102-515

Section 1. Disclosure of Data

- (a) Confidential Case Data. The protection and release of confidential statistical records shall be in accordance with W.S. § 16-4-201, et seq, the Wyoming Public Records Act, and the Wyoming Department of Health Information Practices Rules.
- (b) Nonconfidential Statistical Data. Nonconfidential statistical data shall be released to all hospitals, physicians, other health providers and interested persons in compliance with the latest written policies set forth by the Wyoming State Epidemiologist.