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The Missouri Cancer Registry is a collaborative partnership between the Missouri Department of Health and Senior Services and the Center for Health Care Quality, University of Missouri.

Equal Opportunity/ADA Institutions – Services provided on a non-discriminatory basis.
CANCER REPORTING IN MISSOURI

Reporting of cancer cases to the Missouri Department of Health (now the Missouri Department of Health and Senior Services) for Missouri hospitals became mandatory in 1984 when the State General Assembly passed a bill to require inpatient reporting by hospitals. Due to changes in the health care delivery system, an increasing number of cancer cases are now being treated outside the hospital setting. Therefore an expanded cancer reporting law was passed in 1999 (RSMo 192.650-192.657 and CSR 70-21.010). This law requires that pathology laboratories, ambulatory surgery centers, freestanding cancer clinics and treatment centers, physicians and long-term care facilities also report cancer cases.

ARE ALL LEVELS OF LONG-TERM CARE FACILITIES INCLUDED IN THE LEGISLATION?

By law, all levels of long-term care facilities (skilled nursing facilities [SNF], intermediate [ICF] and residential care facilities [RCF]) are required to report cases of cancer. Based on analysis of death clearance data, we anticipate the majority of long-term care facility (LTCF) cancer cases will be residents of SNFs. We realize that some levels of facilities (e.g., residential and intermediate care) will seldom, if ever, have cases to report. The number of reportable cases will vary based on the facility’s patient population.

INITIATING CANCER REPORTING

In May 2002, cancer-reporting manuals were mailed to administrators at more than 1,200 Missouri LTCFs. Administrators also received reporting forms and other explanatory materials.

Nursing home staff may call a special toll-free number (866-240-8809) for questions or additional assistance in establishing cancer-reporting policies and procedures.

HOW DO WE KNOW WHICH PATIENTS TO REPORT?

To comply with the requirements of the law, facilities must report:

- A patient diagnosed with cancer while residing in that institution
- A patient receiving cancer-directed treatment (radiation, chemotherapy, etc.) while residing in that institution.
- A patient diagnosed with a recurrence while residing at that facility.
- Patients identified through the death clearance process.

In addition, facilities may voluntarily report:

- Upon admission, a patient previously diagnosed with cancer but receiving no treatment, even though there is active disease.
- Upon death, a patient with cancer or a history of cancer not reported on the basis of the mandatory requirements.

OTHER GUIDELINES

- Identify one staff member who will be responsible for the ongoing reporting of cancer cases.
  - Director of nursing, medical records clerk, Minimum Data Set (MDS) coordinator, etc.
- Maintain files (including copies) of reported cases
- If available, utilize clinical record-keeping software programs (e.g. MDS software) to identify patients using ICD-9 codes. (List available from MCR.)
- Begin with January 2002 patients.
- Do not report basal or squamous cell skin cancers.
- Submit the information at least quarterly. If it is more convenient, forms may be submitted as they are completed.
- Call the special toll-free number (866-240-8809) for assistance. A staff member is available to answer your questions and to assist staff completing the reporting forms.