

**CHAPTER 57A
CANCER REGISTRY**

Authority

N.J.S.A. 26:2-104 through 109, particularly 26:2-106b.

Source and Effective Date

R.2011 d.109, effective March 10, 2011.
See: 42 N.J.R. 2529(a), 43 N.J.R. 850(a).

Chapter Expiration Date

Chapter 57A, Cancer Registry, expires on March 10, 2016.

Chapter Historical Note

Chapter 57A, Cancer Registry, was originally codified in Title 8, Chapter 57, as Subchapter 6, Cancer Registry. Subchapter 6 was adopted as R.1986 d.277, effective June 16, 1986. See: 17 N.J.R. 2836(b), 18 N.J.R. 1283(a).

Subchapter 6, Cancer Registry, was recodified as N.J.A.C. 8:57A by R.1990 d.242, effective May 21, 1990. See: 21 N.J.R. 3909(a), 22 N.J.R. 1596(a).

Pursuant to Executive Order No. 66(1978), Chapter 57A, Cancer Registry, was readopted as R.1995 d.241, effective April 12, 1995. See: 27 N.J.R. 629(a), 27 N.J.R. 1988(a).

Pursuant to Executive Order No. 66(1978), Chapter 57A, Cancer Registry, was readopted as R.2000 d.193, effective April 12, 2000. See: 32 N.J.R. 214(a), 32 N.J.R. 1790(a).

Chapter 57A, Cancer Registry, was readopted by R.2005 d.367, effective October 3, 2005. See: 37 N.J.R. 1666(a), 37 N.J.R. 4257(a).

Chapter 57A, Cancer Registry, was readopted as R.2011 d.109, effective March 10, 2016. As a part of R.2011 d.109, Appendices A through M were added as new rules, effective April 4, 2011. See: Source and Effective Date. See, also, section annotations.

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SUBCHAPTER 1. CANCER REGISTRY

8:57A-1.1 Purpose and scope

(a) The purpose of this subchapter is to:

1. Implement N.J.S.A. 26:2-104 through 109, which authorizes the Department of Health and Senior Services to establish and maintain the New Jersey State Cancer Registry (NJSCR) as the Statewide repository of records of cases of cancer and specified cases of tumorous or precancerous disease that occur in New Jersey;

2. Set forth standards for maintaining confidentiality of information submitted to the NJSCR; and

3. Set forth standards for the establishment, use and maintenance of the NJSCR.

(b) The purpose of the NJSCR is to:

1. Monitor cancer incidence and mortality trends in New Jersey;

2. Conduct epidemiologic surveys of cancer and cancer-related diseases in New Jersey; and

3. Assist physicians, researchers, public health officials, epidemiologists and health care facility administrative officers by providing data, subject to the confidentiality provisions established at N.J.A.C. 8:57A-10, to understand cancer, improve cancer treatment, increase survival, improve long-term quality of life for cancer patients and identify the most appropriate cancer prevention and control measures.

(c) This subchapter applies to:

1. All health care facilities, physicians, dentists and other health care providers that diagnose or treat cancer patients;

2. Clinical laboratories located in New Jersey that conduct hematology examinations or examine tissue specimens that are positive for the existence of cancer or other specified tumorous and precancerous disease; and

3. All health care insurers and other third-party health care payers providing benefit plans to residents of New Jersey that are cancer patients.

New Rule, R.2011 d.109, effective April 4, 2011.

See: 42 N.J.R. 2529(a), 43 N.J.R. 850(a).

Former N.J.A.C. 8:57A-1.1, Reporting of cancer; general requirements, recodified to N.J.A.C. 8:57A-1.4.

8:57A-1.2 Incorporated and referenced documents

(a) The Department incorporates by reference, as amended and supplemented, the following documents in this subchapter:

1. The e-path Reporting Site Information Checklist (based on the National Cancer Institute's Surveillance Epidemiology End Results (SEER) Program Case Finding List, effective January 2010), developed by the Artificial Intelligence in Medicine Incorporated, 2 Berkeley Street, Suite 403, Toronto, Ontario, Canada M5A 2W3, which will be used by pathology laboratories to send site information in order to implement electronic cancer case-finding and pathology data gathering for the NJSCR and is available through request to the NJSCR;

2. The SEER Program Code Manual 2007, developed by the Surveillance Epidemiology and End Results (SEER) Program of the National Cancer Institute, Division of Cancer Control and Population Sciences, Surveillance Research Program, Cancer Statistics Branch/SEER Program, 6116 Executive Boulevard, Suite 504, MSC 8316, Bethesda, MD 20892-8316, Telephone: (301) 496-8510, which is used for abstracting and coding cancer data and is available online at: <http://seer.cancer.gov>;

3. The NAACCR Data Standards for Cancer Registries – Data Standards and Data Dictionary (Volume II – Version 12), developed by the North American Association of Central Cancer Registries (NAACCR), Executive Office, 2121 West White Oaks Drive, Suite B, Springfield, IL 62704-6495, Telephone: (217) 698-0800, which is used by health care facilities, physicians, dentists and other health care providers to electronically submit data to the NJSCR and is available online at: <http://www.naacr.org/StandardsandRegistryOperations/VolumeII.aspx>; and

4. The NAACCR Standards for Cancer Registries Volume V: Pathology Laboratory Electronic Reporting, Version 2.1 (effective January 1, 2008), developed by the North American Association of Central Cancer Registries (NAACCR), Executive Office, 2121 West White Oaks Drive, Suite B, Springfield, IL 62704-6495, Telephone: (217) 698-0800, which sets forth the Health Level 7 (HL-7) Version 2.3.1 standard protocol that

independent or hospital-based clinical laboratories must use if they chose to make reports to the Department electronically and is available online at: <http://www.naacr.org/StandardsandRegistryOperations/VolumeII.aspx>.

(b) The Department references the following documents as guidance in this subchapter:

1. The NJSCR Manual: Instructions For Health Care Facilities written and published by the New Jersey Department of Health and Senior Services, Cancer Epidemiology Services to provide guidance to health care facilities on the electronic transmission of data to the Department and to provide information from Federal programs that establish standards for cancer registries and which is available online at: http://nj.gov/health/ces/cancer_reporting_hos.shtml; and

2. The NJSCR Abstract Instruction Manual For Physicians, Ambulatory Care Centers and Radiation Treatment Facilities 2008 written and published by the New Jersey Department of Health and Senior Services, Cancer Epidemiology Services to provide guidance to physicians, ambulatory care centers (ACCs) and radiation treatment facilities (RTFs) on the electronic or written transmission of data to the Department and which is available online at: http://nj.gov/health/ces/cancer_reporting_phy.shtml.

(c) The Department incorporates by reference the following forms in this subchapter:

1. The Radiation Therapy Facility Report Form (N.J.A.C. 8:57A Appendix A), which is a form required of radiation facilities to report radiotherapy treatment information for cases of cancer to the NJSCR;

2. The Ambulatory Surgery Center Report Form (N.J.A.C. 8:57A Appendix B), which is a form required of ambulatory care centers to report surgical cancer diagnosis and cancer treatment to the NJSCR;

3. The Physician Report Form (N.J.A.C. 8:57A Appendix C), which is a form required of physicians to report information on cancer diagnosis or treatment at their respective practices to the NJSCR;

4. The Dentist Report Form (N.J.A.C. 8:57A Appendix D), which is a form required of dentists to report information on non-hospitalized cases of cancer to the NJSCR;

5. The Laboratory Report Form (N.J.A.C. 8:57A Appendix E), which is a form required of laboratories to report cancer diagnoses to the NJSCR;

6. The Hospice Program Report Form (N.J.A.C. 8:57A Appendix F), which is a form required of hospice providers to report patients diagnosed with cancer to the NJSCR;

7. The Hematology/Oncology Physician Report (N.J.A.C. 8:57A Appendix G), which is a form required of physicians to report information on cases of hematopoietic cancer to the NJSCR;