

ASSEMBLY BILL

No. 2588

Introduced by Assembly Member Chu

February 19, 2016

An act to amend Sections 103875 and 103885 of the Health and Safety Code, relating to cancer data.

LEGISLATIVE COUNSEL'S DIGEST

AB 2588, as introduced, Chu. Cancer data.

Existing law requires the State Public Health Officer to establish a statewide system for the collection of information determining the incidence of cancer, as specified. Existing law authorizes the State Department of Public Health to designate any demographic parts of the state as regional cancer incidence reporting areas and establish regional cancer registries to carry out the intent of existing law.

This bill would require the State Department of Public Health to analyze data collected pursuant to this program to assess, measure, and publicly report on the quality of cancer care in the state, as specified. The bill would require the development of a public reporting system on the quality of cancer care in the state. The bill also would require the department to develop a system for routine, automated linkages between data collected pursuant to the program and public and private health insurance payer cancer claims data, and would require the State Public Health Officer to convene a cancer care stakeholder committee to study and make recommendations for developing the automated linkage system.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 103875 of the Health and Safety Code
2 is amended to read:

3 103875. (a) The department shall conduct a program of
4 epidemiological assessments of the incidence of cancer. The
5 program shall encompass all areas of the state for which cancer
6 incidence data are available. The program shall include the
7 monitoring of cancers associated with suspected carcinogens
8 encountered by the general public both in occupational locations
9 and in the environment generally.

10 (b) The program shall be under the direction of the ~~director~~ *State*
11 *Public Health Officer*, who may enter into contracts as are
12 necessary for the conduct of the program and may accept, on behalf
13 of the state, grants of public or private funds for the program. The
14 ~~director~~ *department* shall analyze available incidence data and
15 prepare reports and perform studies as necessary to identify cancer
16 hazards to the public health and their remedies.

17 (c) *The department shall analyze data collected pursuant to the*
18 *program to assess, measure, and publicly report on the quality of*
19 *cancer care in the state. In assessing and measuring the quality*
20 *of cancer care in the state, the department shall define and identify*
21 *oncology providers. In publicly reporting on the quality of cancer*
22 *care in the state, the department shall identify oncology providers,*
23 *but not individual cancer patients. The department may contract*
24 *with an entity to assess, measure, and publicly report on the quality*
25 *of cancer care in the state.*

26 (d) *The department shall develop a system for routine,*
27 *automated linkages between data collected pursuant to the program*
28 *and public and private health insurance payer cancer claims data.*
29 *The State Public Health Officer shall convene a cancer care*
30 *stakeholder committee, including public and private payer*
31 *representatives and persons with appropriate technical experience,*
32 *to study and make recommendations for developing the automated*
33 *linkage system. The State Public Health Officer may contract with*
34 *entities or persons to provide the committee with appropriate*
35 *technical expertise.*

36 (e)

37 (e) It is the intent of the Legislature that an appropriation be
38 included in each Budget Act in an amount sufficient to provide

1 for the annual cost of the program. *It is further the intent of the*
2 *Legislature that the cancer care quality measures be available for*
3 *the public to use to improve health care and population health as*
4 *it relates to the prevention and treatment of cancer, including the*
5 *cancer patients themselves.*

6 SEC. 2. Section 103885 of the Health and Safety Code is
7 amended to read:

8 103885. (a) ~~The director~~ *department* shall establish a statewide
9 system for the collection of information determining the incidence
10 of cancer, using population-based cancer registries modeled after
11 the Cancer Surveillance Program of Orange County. *The*
12 *department shall also identify and include in the statewide system,*
13 *cancer care quality measures for use in public reporting.* As of
14 the effective date of this section the ~~director~~ *department* shall begin
15 phasing in the statewide cancer reporting system. By July 1, 1988,
16 all county or regional registries shall be implemented or initiated.
17 By July 1, 1990, the statewide cancer reporting system shall be
18 fully operational. Within 60 days of the effective date of this
19 section, the ~~director~~ *State Public Health Officer* shall submit an
20 implementation and funding schedule to the Legislature.

21 (b) The department may designate any demographic parts of
22 the state as regional cancer incidence reporting areas and may
23 establish regional cancer registries, with the responsibility and
24 authority to carry out the intent of this section in designated areas.
25 Designated regional registries shall provide, on a timely basis,
26 cancer incidence ~~data data~~, as ~~designated~~ *required* by the ~~state~~
27 ~~department to the~~ department. The department may establish a
28 competitive process to receive applications for, and issue, the
29 award of a contract, grant, or allocation of funds, including, but
30 not limited to, a cooperative agreement, subvention agreement, or
31 any other agreement allowed by law, to an agency, including, but
32 not limited to, a health systems agency, single county health
33 department, multicounty health department grouping, or nonprofit
34 professional association to operate the statewide cancer reporting
35 system and to enter into contracts, or issue grants or funding
36 allocations to other agencies representing a designated cancer
37 reporting region for the purposes of collecting and collating cancer
38 incidence data. The award of these contracts, grants, or funding
39 allocations shall be exempt from Part 2 (commencing with Section
40 10100) of Division 2 of the Public Contract Code. The department

1 shall include appropriate terms and conditions in a contract, grant,
 2 or funding allocation to ensure the proper use of state funds,
 3 including provision for reimbursement of allowable costs, financial
 4 reporting, program performance reporting, monitoring of subgrants,
 5 subcontracts, or suballocations to an agency representing a
 6 designated cancer reporting region, retention and access
 7 requirements for records, data use and management, independent
 8 auditing, termination, and disposition of assets acquired under the
 9 contract, grant, or funding allocation.

10 (c) ~~The director~~ *State Public Health Officer* shall designate
 11 cancer as a disease required to be reported in the state or any
 12 demographic parts of the state in which cancer information is
 13 collected under this section. All cancers diagnosed or treated in
 14 the reporting area shall thereafter be reported to the representative
 15 of the department authorized to compile the cancer data, or any
 16 individual, agency, or organization designated to cooperate with
 17 that representative.

18 (d) (1) ~~Any~~ A hospital or other facility providing therapy to
 19 cancer patients within an area designated as a cancer reporting
 20 area shall report each case of cancer to the department or the
 21 authorized representative of the department in a format prescribed
 22 by the department. If the hospital or other facility fails to report
 23 in a format prescribed by the department, the department's
 24 authorized representative may access the information from the
 25 hospital or the facility and report it in the appropriate format. In
 26 these cases, the hospital or other health facility shall reimburse the
 27 state department or the authorized representative for its cost to
 28 access and report the information.

29 (2) ~~Any~~ A physician and surgeon, dentist, podiatrist, or other
 30 health care practitioner diagnosing or providing treatment for
 31 cancer patients shall report each cancer case to the department or
 32 the authorized representative of the department except for those
 33 cases directly referred to a treatment facility or those previously
 34 admitted to a treatment facility for diagnosis or treatment of that
 35 instance of cancer.

36 (e) ~~Any~~ A hospital or other facility that is required to reimburse
 37 the department or its authorized representative for the cost to access
 38 and report the information pursuant to subdivision (d) shall provide
 39 payment to the department or its authorized representative within
 40 60 days of the date this payment is demanded. In the event ~~any a~~

1 hospital or other facility fails to make the payment to the
2 department or its authorized representative within 60 days of the
3 date the payment is demanded, the department or its authorized
4 representative may, at its discretion, assess a late fee not to exceed
5 1 ½ percent per month of the outstanding balance. Further, in the
6 event that the department or its authorized representative takes a
7 legal action to recover its costs and any associated fees, and the
8 department or its authorized representative receives a judgment in
9 its favor, the hospital or other facility shall also reimburse the
10 department or its authorized representative for any additional costs
11 it incurred to pursue the legal action. Late fees and payments made
12 to the department by hospitals or other facilities pursuant to this
13 subdivision shall be considered as reimbursements of the additional
14 costs incurred by the department.

15 (f) All physicians and surgeons, hospitals, outpatient clinics,
16 nursing homes and all other facilities, individuals, or agencies
17 providing diagnostic or treatment services to patients with cancer
18 shall grant to the department or the authorized representative access
19 to all records that would identify cases of cancer or would establish
20 characteristics of the cancer, treatment of the cancer, or medical
21 status of any identified cancer patient. Willful failure to grant
22 access to those records shall be punishable by a fine of up to five
23 hundred dollars (\$500) each day access is refused. ~~Any fines~~ *Fines*
24 collected pursuant to this subdivision shall be deposited in the
25 General Fund.

26 (g) (1) Except as otherwise provided in this section, all
27 information collected pursuant to this section shall be confidential.
28 For purposes of this section, this information shall be referred to
29 as “confidential information.”

30 (2) The department and any regional cancer registry designated
31 by the department shall use the information to determine the
32 sources of malignant neoplasms and evaluate measures designed
33 to eliminate, alleviate, or ameliorate their ~~effect.~~ *effect, and assess*
34 *and publicly report on the quality of cancer care in the state.*

35 ~~(3) Persons with a valid scientific interest who are engaged in~~
36 ~~demographic, epidemiological, or other similar studies related to~~
37 ~~health who meet qualifications as determined by the department,~~
38 ~~and who agree, in writing, to maintain confidentiality, may be~~
39 ~~authorized access to confidential information.~~

1 (3) *The following persons who meet qualifications determined*
2 *by the department and who agree, in writing, to maintain*
3 *confidentiality, may be authorized access to confidential*
4 *information:*

5 (A) *A person with a valid scientific background who is engaged*
6 *in demographic, epidemiologic, quality of care assessment or*
7 *improvement, or other similar studies related to health.*

8 (B) *A person engaged in the dissemination of data to the public*
9 *as it relates to the prevention and treatment of cancer.*

10 (C) *A person engaged in improving health care and population*
11 *health as it relates to the treatment and prevention of cancer,*
12 *including cancer patients themselves.*

13 (4) The department and any regional cancer registry designated
14 by the department may enter into agreements to furnish confidential
15 information to other states' cancer registries, federal cancer control
16 agencies, local health officers, or health researchers for the
17 purposes of determining the sources of cancer and evaluating
18 measures designed to eliminate, alleviate, or ameliorate their ~~effect.~~
19 *effect, and assessing and publicly reporting on the quality of cancer*
20 *care in the state.* Before confidential information is disclosed to
21 those agencies, officers, researchers, or out-of-state registries, the
22 requesting entity shall agree in writing to maintain the
23 confidentiality of the information, and in the case of researchers,
24 shall also do both of the following:

25 (A) Obtain approval of their committee for the protection of
26 human subjects established in accordance with Part 46
27 (commencing with Section 46.101) of Title 45 of the Code of
28 Federal Regulations.

29 (B) Provide documentation to the department that demonstrates
30 to the department's satisfaction that the entity has established the
31 procedures and ability to maintain the confidentiality of the
32 information.

33 (5) Notwithstanding any other ~~provision of law,~~ any disclosure
34 authorized by this section shall include only the information
35 necessary for the stated purpose of the requested disclosure, used
36 for the approved purpose, and not be further disclosed.

37 (6) The furnishing of confidential information to the department
38 or its authorized representative in accordance with this section
39 shall not expose any person, agency, or entity furnishing

1 information to liability, and shall not be considered a waiver of
2 any privilege or a violation of a confidential relationship.

3 (7) The department shall maintain an accurate record of all
4 persons who are given access to confidential information. The
5 record shall include: the name of the person authorizing access;
6 name, title, address, and organizational affiliation of persons given
7 access; dates of access; and the specific purpose for which
8 information is to be used. The record of access shall be open to
9 public inspection during normal operating hours of the department.

10 (8) Notwithstanding any other ~~provision of~~ law, no part of the
11 confidential information shall be available for subpoena, nor shall
12 it be disclosed, discoverable, or compelled to be produced in ~~any~~
13 *a* civil, criminal, administrative, or other proceeding, nor shall this
14 information be deemed admissible as evidence in ~~any~~ *a* civil,
15 criminal, administrative, or other tribunal or court for any reason.

16 (9) Nothing in this subdivision shall prohibit the publication by
17 the department of reports and statistical compilations that do not
18 in any way identify individual cases or individual sources of
19 information.

20 (10) Notwithstanding the restrictions in this subdivision, the
21 individual to whom the information pertains shall have access to
22 his or her own information in accordance with Chapter 1
23 (commencing with Section 1798) of Title 1.8 of the Civil Code.

24 (h) For the purpose of this section, “cancer” means either of the
25 following:

26 (1) All malignant neoplasms, regardless of the tissue of origin,
27 including malignant lymphoma, Hodgkins disease, and leukemia,
28 but excluding basal cell and squamous cell carcinoma of the skin.

29 (2) All primary intracranial and central nervous system (CNS)
30 tumors occurring in the following sites, irrespective of histologic
31 type: brain, meninges, spinal cord, caudae equina, cranial nerves
32 and other parts of the CNS, pituitary gland, pineal gland, and
33 craniopharyngeal duct.

34 (i) Nothing in this section shall preempt the authority of facilities
35 or individuals providing diagnostic or treatment services to patients
36 with cancer to maintain their own facility-based cancer registries.

- 1 (j) It is the intent of the Legislature that the department, in
- 2 establishing a system pursuant to this section, maximize the use
- 3 of available federal funds.

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