

Nebraska Cancer Registry Statutes

The following Nebraska statutes can be found on the website:

<http://uniweb.legislature.ne.gov/LegalDocs/view.php?page=s81index>

The Nebraska Statutes pertaining to the cancer registry follow:

Excerpts of the Relevant Sections from Nebraska Statutes

81-638. Cancer and smoking disease research; appropriation; distribution; contracts; requirements.

(1) The Legislature shall appropriate for each year from the Health and Human Services Cash Fund to the department an amount derived from one cent of the cigarette tax imposed by section 77-2602, less any amount appropriated from the fund specifically to the University of Nebraska Eppley Institute for Research in Cancer and Allied Diseases. The department shall, after deducting expenses incurred in the administration of such funds, distribute such funds exclusively for grants and contracts for research of cancer and smoking diseases, for funding the cancer registry prescribed in sections 81-642 to 81-650, and for associated expenses due to the establishment and maintenance of such cancer registry. Not more than two hundred thousand dollars shall be appropriated for funding the cancer registry and associated expenses. The University of Nebraska may receive such grants and contracts, and other postsecondary institutions having colleges of medicine located in the State of Nebraska may receive such contracts.

(2) The Legislature shall appropriate for each year from the Health and Human Services Cash Fund to the department for cancer research an amount derived from two cents of the cigarette tax imposed by section 77-2602 to be used exclusively for grants and contracts for research on cancer and smoking diseases. No amount shall be appropriated or used pursuant to this subsection for the operation and associated expenses of the cancer registry. Not more than one-half of the funds appropriated pursuant to this subsection shall be distributed to the University of Nebraska Medical Center for research in cancer and allied diseases and the University of Nebraska Eppley Institute for Research in Cancer and Allied Diseases. The remaining funds available pursuant to this subsection shall be distributed for contracts with other postsecondary educational institutions having colleges of medicine located in Nebraska which have cancer research programs for the purpose of conducting research in cancer and allied diseases.

(3) Any contract between the department and another postsecondary educational institution for cancer research under subsection (2) of this section shall provide that:

(a) Any money appropriated for such contract shall only be used for cancer research and shall not be used to support any other program in the institution;

(b) Full and detailed reporting of the expenditure of all funds under the contract is required. The report shall include, but not be limited to, separate accounting for personal services, equipment purchases or leases, and supplies. Such reports shall be made available to the Legislature; and

(c) No money appropriated for such contract shall be spent for travel, building construction, or any other purpose not directly related to the research that is the subject of the contract.

Source: Laws 1981, LB 506, § 2; ; Laws 1983, LB 192, § 2; ; Laws 1986, LB 258, § 33; ; Laws 1986, LB 925, § 1; ; Laws 1991, LB 703, § 67; ; Laws 1993, LB 595, § 3; ; Laws 1996, LB 1044, § 847; ; Laws 2007, LB296, § 736.; Operative date July 1, 2007

81-642. Cancer registry; legislative intent; information released.

It is the intent of the Legislature to require the establishment and maintenance of a cancer registry for the State of Nebraska. This responsibility is delegated to the Department of Health and Human Services along with the authority to exercise the necessary powers to implement sections 81-642 to 81-650. To insure an accurate and continuing source of data concerning cancer, all hospitals within the state shall make available to the department upon its request, at least once a year, information contained in the medical records of patients who have cancer within such time following its diagnosis as the department shall require. Any medical doctor, osteopathic physician, or dentist within the state shall make such information available to the department upon request by the department. This cancer registry should provide a central data bank of accurate, precise, and current information which medical authorities state will assist in the research for the prevention, cure, and control of cancer. The information contained in the cancer registry may be used as a source of data for scientific and medical research. Any information released

from the cancer registry shall be disclosed as Class I, Class II, Class III, or Class IV data as provided in sections 81-663 to 81-675.

Source: Laws 1982, LB 212, § 1; ; Laws 1989, LB 342, § 38; ; Laws 1991, LB 703, § 68; ; Laws 1993, LB 536, § 113; ; Laws 1995, LB 406, § 87; ; Laws 1996, LB 1044, § 848; ; Laws 2007, LB296, § 739.;
Operative date July 1, 2007

81-643. Cancer registry; terms, defined.

As used in sections 81-642 to 81-650, unless the context otherwise requires, the definitions in section 81-664 shall be used and:

(1) Cancer shall mean: (a) A large group of diseases characterized by an uncontrolled growth and spread of abnormal cells; (b) any condition of tumors having the properties of anaplasia, invasion, and metastasis; (c) a cellular tumor the natural course of which is fatal; and (d) malignant neoplasm. Cancer shall be deemed to include, but not be limited to, carcinoma, sarcoma, melanoma, lymphoma, Hodgkin's disease, and myeloma, but shall not include precancerous conditions, benign polyps, or benign tumors; and

(2) Cancer registry shall mean the system of reporting established by sections 81-642 to 81-650 in which the cases of cancer in this state are reported and recorded in order to achieve the goals of prevention, cure, and control of cancer through research and education.

Source: Laws 1982, LB 212, § 2; Laws 1991, LB 703, § 69; Laws 1993, LB 536, § 114;

81-644. Cancer registry; Department of Health and Human Services; establish and maintain; information released.

The department shall establish and maintain a cancer registry that includes a record of the cases of cancer that occur within the state and such information concerning these cases which the department determines necessary and appropriate to provide a basic source of information to further scientific and medical research for the prevention, cure, and control of cancer. Any information released from the registry shall be disclosed as Class I, Class II, Class III, and Class IV data as provided in sections 81-663 to 81-675.

Source: Laws 1982, LB 212, § 3; Laws 1991, LB 703, § 70; Laws 1993, LB 536, § 115;

81-645. Cancer registry; Department of Health and Human Services; duties.

In order to implement the intent and purposes of sections 81-642 to 81-650, the department shall:

(1) Compile and publish a statistical report annually or at reasonable intervals containing information obtained from patient data pursuant to such sections in order to provide accessible information useful to physicians, medical personnel, and the public. Such report shall comply with sections 81-663 to 81-675;

(2) Comply with all necessary requirements in order to obtain funds or grants;

(3) Coordinate with existing statewide cancer registry programs to the extent feasible; and

(4) Consult with medical professionals, hospital tumor registries, and medical records representatives in formulating the plans and policies of the cancer registry program.

Source: Laws 1982, LB 212, § 4; Laws 1986, LB 925, § 2; Laws 1991, LB 703, § 71; Laws 1993, LB 536, § 116;

81-646. Cancer registry; hospital; health practitioner; provide data; contents.

(1) On the request of the department or its authorized representative, each medical doctor, osteopathic physician, or dentist within the state shall produce and make available to the department or its authorized representative, in a manner prescribed by the department, data which the department determines is necessary and appropriate from each medical record of cancer under the doctor's, osteopathic physician's, or dentist's custody or control.

(2) Each hospital within the state shall make available to the department or its authorized representative on presentation of proper identification of the department's representative, a list of names of cancer patients, corresponding medical records numbers, and medical records which document the diagnosis and treatment of cancer on the premises of the hospital, office, or clinic during normal working hours, for the purpose of recording specific data about a patient's cancer.

(3) Each hospital that initially diagnoses cancer made reportable by the department for more than fifty patients during a calendar year shall, for the next calendar year, at the request of the department or its authorized representative, produce and make available, in a manner prescribed by the department, data which the department

determines is necessary and appropriate from each medical record of cancer under the control of the hospital. Any hospital with fewer than fifty initial diagnoses of cancer may report in the same manner.

(4) The data produced pursuant to subsection (1) of this section shall include, but not be limited to, the:

- (a) Patient's name, address, and available social security number;
- (b) Patient's hospital accession number;
- (c) Patient's birthdate, race, and sex;
- (d) Date of diagnosis;
- (e) Primary site of cancer;
- (f) Stage of the disease, including in situ, localized, regional, distant, or metastasis;
- (g) Basis of staging, including clinical diagnostic, surgical evaluative, postsurgical treatment pathological, or retreatment; and
- (h) Diagnostic confirmation.

Source: Laws 1982, LB 212, § 5; Laws 1986, LB 925, § 3; Laws 1989, LB 342, § 39; Laws 1995, LB 406, § 88;

81-647. Cancer registry; certain data; confidential; access for research.

(1) All data obtained from medical records of individual patients is for the confidential use of the department and the private or public persons or entities that the department determines may view such records as provided in sections 81-663 to 81-675.

(2) The department may approve individuals or entities to obtain access to case-specific data or case-specific and patient-identifying data to assist in their research for prevention, cure, or control of cancer. Any information released from the cancer registry shall be disclosed as provided in sections 81-663 to 81-675.

(3) For purposes of protecting the public health, local health departments in Nebraska, health departments or cancer registries located outside Nebraska, and the Centers for Disease Control and Prevention and the National Cancer Institute of the United States Department of Health and Human Services or their successors may have access to the data contained in the cancer registry upon the department's approval based on the entity's written application.

Source: Laws 1982, LB 212, § 6; ; Laws 1986, LB 925, § 4; ; Laws 1991, LB 703, § 72; ; Laws 1992, LB 1019, § 123; ; Laws 1993, LB 536, § 117; ; Laws 2006, LB 994, § 111; ; Laws 2007, LB 185, § 48.; Operative date September 1, 2007

81-648. Cancer registry; liability for providing information; limitation.

No hospital, medical doctor, osteopathic physician, or dentist nor any administrator, officer, or employee of such hospital or office in which any such professional practices take place who is in compliance with sections 81-642 to 81-650 and 81-663 to 81-675 shall be civilly or criminally liable for divulging the information required pursuant to such sections. The department or any of its officials or employees shall not be liable civilly or criminally for the release of information contained in the cancer registry or for the conduct or activities of any individual or entity permitted access to data of the cancer registry if done pursuant to sections 81-663 to 81-675.

Source: Laws 1982, LB 212, § 7; Laws 1989, LB 342, § 40; Laws 1991, LB 703, § 73; Laws 1993, LB 536, § 118;

81-649. Cancer registry; sections, how construed; patient and patient's family; privacy rights.

Sections 81-642 to 81-650 shall not be deemed to compel any individual to submit to any medical examination or supervision by the department, any of its authorized representatives, or an approved researcher. No person who seeks information or obtains registry data pursuant to such sections or sections 81-663 to 81-675 shall contact a patient on the registry or such patient's family unless the registry has first obtained the permission of such patient or patient's family. The registry shall coordinate its activities with the person desiring such contact and may authorize the person desiring such contact to perform these contacts under the direction of the registry.

Source: Laws 1982, LB 212, § 8; Laws 1991, LB 703, § 74; Laws 1993, LB 536, § 119; Laws 2002, LB 1021, § 105;

81-649.01. Repealed. Laws 1993, LB 536, s. 128.

81-649.02. Cancer registry; hospital; failure to report; penalty.

Any hospital which fails to make reports as provided in sections 81-642 to 81-650 shall be guilty of a Class V misdemeanor for each offense.

Source: Laws 1991, LB 703, § 76;

81-650. Cancer registry; Department of Health and Human Services; annual report.

The department shall annually report to the Legislature's Health and Human Services Committee with the documentation on the operation and performance of the cancer registry program established pursuant to sections 81-642 to 81-650.

Source: Laws 1982, LB 212, § 9; Laws 1992, LB 965, § 4;

81-665. Department of Health and Human Services; duties.

To implement the intent and purposes of sections 81-663 to 81-675, the department shall:

- (1) Adopt and promulgate necessary rules and regulations, including rules and regulations for the frequency and form of information submitted and for standards and procedures for approving researchers;
- (2) Execute contracts that the department considers necessary; and
- (3) Receive and record the data obtained from the medical and health information records of persons with particular diseases or injuries.

Source: Laws 1993, LB 536, § 3;

81-666. Approved researcher; application; contents; Department of Health and Human Services; powers.

The department may approve an individual or entity to be an approved researcher upon application and proof satisfactory to the department that the applicant is a qualified researcher, that the data will be used for bona fide scientific or medical research for prevention, cure, or control of certain diseases or injuries, and that the applicant will maintain the confidentiality and security of data obtained. The application shall contain, but not be limited to, the following information:

- (1) The qualifications of the applicant and of the principal investigator, if other than the applicant, including education, experience, prior publications, and recommendations of professional colleagues who have knowledge and experience of scientific or medical research;
- (2) The purpose of the research project, a summary of the project, and the anticipated time of completion of such project;
- (3) The location where the research project will be conducted and the equipment, personnel, and other resources available to the applicant to carry out the project;
- (4) The identity of the individual or entity funding the research project, a description of the availability of funds for the research project, and any conditions on the receipt or continuation of such funding;
- (5) The specific data requested and a description of the use to be made of such data and, if patient-identifying data is requested, a substantiation of the need for access to such patient-identifying data;
- (6) A description of the measures to be taken to secure the data and maintain the confidentiality of such data during the research project, for disposal of the data upon completion of the study, and to assure that the results of the study will not divulge or make public information that will disclose the identity of any individual patient;
- (7) If contact with a patient or patient's family is planned or expected, substantiation of the need for such contact and a description of the method to be used to obtain permission from such patient or patient's family for such contact; and
- (8) Such additional information as the department determines to be necessary to assure that release of data to the applicant is appropriate and will further the purpose of sections 81-663 to 81-675 or the laws governing the specific registry.

Source: Laws 1993, LB 536, § 4; Laws 2002, LB 1021, § 106;

81-667. Medical records; classification.

Medical records provided to the department for use in its medical record and health information registries shall be classified for release according to the following categories:

- (1) Class I data shall be confidential with release only in aggregate data reports created by the department on a periodic basis, usually specified in the statutes creating the registry. These reports shall be public documents;
- (2) Class II data shall be confidential with release only in aggregate data reports created by the department at the request of an individual. These reports shall be public documents;

(3) Class III data shall be confidential with release of patient-identifying data to approved researchers for specific research projects. The approved researcher shall maintain the confidentiality of the information; and

(4) Class IV data shall be confidential with release of case-specific data to approved researchers for specific research projects. The approved researcher shall maintain the confidentiality of the data.

Source: Laws 1993, LB 536, § 5;

81-668. Case-specific and patient-identifying data; confidentiality; aggregate data; cost.

All case-specific and patient-identifying data obtained from medical records of individual patients shall be for the confidential use of the department, those reporting data to the department, and the public health agencies and approved researchers that the department determines may view such records in order to carry out the intent of sections 81-663 to 81-675. Such information shall be privileged and shall not otherwise be divulged or made public so as to disclose the identity of an individual whose medical records and health information have been used for acquiring such data. Aggregate data collected shall be open and accessible to the public, and such information shall not be considered medical records pursuant to section 84-712.05. The cost of data retrieval and data processing shall be paid by the data requester.

Case-specific and patient-identifying data may be released to those individuals or entities who have reported information to the department. Such data may be released for the purpose of confirming the accuracy of the data provided and to coordinate information among sources.

Source: Laws 1993, LB 536, § 6; Laws 2006, LB 994, § 112.;

81-669. Case-specific and patient-identifying data; use in legal proceeding; prohibited.

All case-specific and patient-identifying data furnished and any findings or conclusions resulting from such data shall be privileged communications which may not be used or offered or received in evidence in any legal proceeding of any kind, and any attempt to use or offer any such information, findings, conclusions, or any part thereof, unless waived by the interested parties, shall constitute prejudicial error resulting in a mistrial in any such proceeding.

Source: Laws 1993, LB 536, § 7;

81-670. Research project; department; review.

The approved researcher shall submit the reports or results of the research project to the department. The department shall review such reports or results and shall prohibit publication of confidential information. The approved researcher shall acknowledge the department and its medical record and health information registries in any publication in which information obtained from the medical record and health information registries is used.

Source: Laws 1993, LB 536, § 8;

81-671. Release of information to public health departments and agencies; requirements.

(1) Except as otherwise provided by the law governing a specific medical record and health information registry, the department may release information contained in a registry to official public health departments and agencies as follows:

(a) Upon request by an official local health department within the State of Nebraska, the department may release such data to the requesting local health department. The official local health department shall not contact patients using data received under sections 81-663 to 81-675 without approval by the department of an application made pursuant to section 81-666; and

(b) Upon approval of an application by federal, state, or local official public health agencies made pursuant to section 81-666, the department may release such data.

(2) The receiving agency shall not further disclose such data to any third party but may publish aggregate statistical reports, except that no patient-identifying data shall be divulged, made public, or released to any public or private person or entity. The receiving agency shall comply with the patient contact provisions of sections 81-663 to 81-675. The receiving agency shall acknowledge the department and its medical record and health information registries in any publication in which information obtained from the medical record and health information registries is used.

(3) The release and acknowledgment provisions of this section do not apply to cancer registries located outside Nebraska which receive data through approved data exchange agreements.

Source: Laws 1993, LB 536, § 9; ; Laws 2006, LB 994, § 113; ; Laws 2007, LB185, § 49.; Operative date September 1, 2007

81-672. Receipt or release of information; immunity; exception.

Any person who receives or releases information in the form and manner prescribed by sections 81-663 to 81-675 and the rules and regulations adopted and promulgated pursuant to such sections shall not be civilly or criminally liable for such receipt or release unless the receipt or release is done with actual malice, fraudulent intent, or bad faith. In an action brought against a person for wrongful receipt or release of medical record and health information registry information, the party bringing the action shall plead specifically the allegation that the immunity provided in this section does not apply because the person receiving or releasing the information did so with actual malice, fraudulent intent, or bad faith.

Source: Laws 1993, LB 536, § 10; Laws 2001, LB 152, § 4;

81-673. Patient and patient's family; privacy rights.

Nothing in sections 81-663 to 81-675 shall be deemed to compel any individual to submit to any medical examination or supervision by the department, any of its authorized representatives, or an approved researcher. No person who seeks information or obtains registry data pursuant to such sections shall contact a patient on the registry or such patient's family unless the registry has first obtained the permission of such patient or patient's family. The registry shall coordinate its activities with the person desiring such contact and may authorize the person desiring such contact to perform these contacts under the direction of the registry.

Source: Laws 1993, LB 536, § 11; Laws 2002, LB 1021, § 107;

81-674. Violations; penalty.

Any private or public entity, individual, or approved researcher who wrongfully discloses confidential data obtained from the medical record and health information registries or uses such information with the intent to deceive shall be guilty of a Class IV misdemeanor for each offense.

Source: Laws 1993, LB 536, § 12;

81-675. Rules and regulations.

The department shall adopt and promulgate rules and regulations to implement sections 81-663 to 81-674.

Source: Laws 1993, LB 536, § 13;