

CENTRAL UPDATE

The Alabama Statewide Cancer Registry has experienced much change during the past six months. Reda Wilson, the Program Director, left to take a position with the Centers for Disease Control in Atlanta. Since Reda had been with the ASCR program since its inception her departure left a huge void.

Filling this void would take some restructuring and adjustments. Vicki Nelson who has been with the ASCR for more than seven years was asked to take the position of Program Manager and Tom Phillips who has more than thirty years

experience in the area of Public Health was named Administrative Director. Together, this management team brings more than 50 years experience to the registry. This will help to steer the central registry into its next phase of success.

The ASCR recently submitted its 2002 data to the North American Association of Central Cancer Registry (NAACCR) for certification consideration. The registry certification program recognizes those registries meeting

the highest standards of data quality with Gold or Silver recognition certificates for each data year. The standards are based on complete, accurate, and timely data. The Alabama Statewide Cancer Registry currently enjoys Silver Certification and are in "hot" pursuit of Gold. We will keep you posted on our progress.

The Registry staff of the ASCR would like to take this opportunity to thank you for helping us to be successful. We cannot do what we do without all of **you!**

Inside this issue:

Privacy	2
Conference	2
Arica White	2
Edit Help	3
NPCR	3
ACRA	4

"If you can't change your fate, change your attitude"

~Amy Tan—1952

ADVANCED NOTICE

- The ASCR will be requiring a "Call for Data" later this year this year The year of data that will be required is 2003
- The purpose of the Call for Data is:
 - to ensure completeness of case reporting
 - to provide reporting facilities with recognition awards based on their level of completeness and quality of data reported
- Formal notification of the Call for Data will be sent at a later date.

Staff

Administrative Director
Tom Phillips 334-206-5552

Program Manager
Vicki Nelson 251-438-2809

Central Region Coordinator
Regina Dillard 205-930-1151

North Region Coordinator
Diane Hadley 256-734-0258

South Region Coordinator
Mark Jackson 251-433-7809

Epidemiologist
Bill Jarrell 334-206-2688

Operation Analyst
XJ Shen 205-664-2740

Q A Coordinator
Arica White 205-554-4529

**Case finding Auditor
South Region**
Shirley Williams 334-206-7072

**Case finding Auditor
North Region**
Bobbie Bailey 205-554-4516

Administrative Assistant
Shirley Bowman 334-206-5557

Research Assistant
Tracey Taylor 334-206-7022

Speaking of Data....



- Did you know the you should have 58% your 2004 cases completed by now?
- Did you know that you should be abstracting July 2004 cases now ?



Congratulations

Alabama New CTRs'

Jennifer Ballard
Mobile Infirmery

Welcome To:

Silva Ramsey
Nikkii Julienne
North Alabama Regional

Kelly Evers
Gadsden Regional

Privacy Prosecution Under HIPAA Rules

Richard W. Gibson, age 42, of SeaTac, Washington pleaded guilty in federal court in Seattle to wrongful disclosure of individually identifiable health information of economic gain. This is the first criminal conviction in the United States under the health information privacy provisions of the Health Insurance Portability and Accountability Act. (HIPAA) which became effective in April, 2003. Those provisions made it illegal to wrongfully disclose personally identifiable health information.

Gibson admitted that he obtained a cancer patient's name, date of birth date and social security number while Gibson was employed at the Seattle Cancer Care Alliance and disclosed the information to get four credit cards in the patient's name. Gibson admitted he used the cards to purchase various items, including video games, home improvement supplies apparel, jewelry, porcelain figur-

ines, groceries and gasoline for his personal use. Gibson was fired shortly after the identity theft was discovered.

A plea agreement was reached. A hearing was scheduled for November 5, 2004 to determine whether to accept the Plea Agreement. If accepted, Gibson could receive a sentence within 10-16 months.

"Too many Americans have experienced identity theft and the nightmare of dealing with bills they never incurred. To be a vulnerable cancer patient, fight for your life, and having to cope with identity

theft is just unconscionable" stated United States Attorney John McKay. This case should serve as a reminder that misuse of patient information may result in criminal prosecution. The case was investigated by the Federal Bureau of Investigation (FBI) and was prosecuted by the Office of the United States Attorney's Office.

This case should serve as a reminder that misuse of patient information may result in criminal prosecution.

CONFERENCE CALENDAR

ACRA

- **Alabama Cancer Congress** - Destin, Florida **April 8-10, 2005**
Details to follow. Stella Seagle, ACRA President.

NAACCR

- **The Cancer Surveillance Institute I; Principles and Public Health Applications** **January 25-28, 2005** Chicago, IL
- **Midwest Institute for Cancer Registry Operations** March 2-11, 2005 Chicago, IL

NCRA

- **Explore the Gateway to Information, Education and all that Jazz** is the theme for the 2005 Annual NCRA Conference to be held in New Orleans, **April 10-13, 2005.**

SITE SPECIFICALLY SPEAKING

CS Site Specific Factors identifies additional information needed to generate stage or prognostic factors that have an effect on stage and survival.

We want to take this opportunity to review some important things about the Prostate Schema— **Site Specific Factor 3 for Prostate primary.**

- This field is reserved to record **PATHOLOGICAL EXTENTION ONLY.**
- **Code 097** should be recorded if there was no prostatectomy performed within the first course of treatment.

ACRA

Happy New Year everyone!

First let me say thank you for electing me to serve as ACRA president for 2004-2005. I am sorry to be so late in expressing my gratitude to you for your vote of confidence in me. I can assure you that I will do my best to serve you and our organization to the best of my ability. Please let me know if I can be of assistance in any way. I want to be a visible, active president so please don't hesitate to contact me for any reason.

As we begin this New Year lets all resolve to network, share our ideas, thoughts and experience to enhance our professional growth. I know that you, like myself, are proud of our organization and would like to see it promoted more, so lets work together to try and accomplish this.

A note regarding our State meeting, at our annual meeting in November we voted to continue meeting with the Cancer Congress. The meeting will be April 8-10 in San Destin. Due to hurricane season the Cancer Congress will hold the meeting in the spring. These dates conflict with national, as it begins on April 10th, however, we have nothing on Sunday the 10th. I hope this will allow those who plan to attend both to do so.

"A candle never loses anything by lighting another candle," so gang, lets light all the candles we can this year, and have fun along the way.

Respectfully Yours
Stella Seagle RHIT/CTR

ASCR News

EDIT HELPS

The information below was taken from edit reports recently returned to facilities. The ASCR encourages the use of the edit report information as a learning tool. Registrars should always be careful to collect and record the most accurate data available. Always consult the manual; this information is too vast to commit to memory. One may think that they remember, only to discover that they were off by a single digit which does make a difference.

- **EOD data items contained in the EOD manual are no longer required for cases diagnosed in 2004.**
- **For cases diagnosed beginning 1/1/2004 EOD fields should be left blank.**
- **Lymph nodes examined and lymph nodes positive should continue to be recorded in the appropriate fields.**
- **Please do not confuse SEER EOD with Collaborative Stage codes. These are two separate and distinct**

coding systems. The codes are not the same.

- **If vital status =1 (patient alive) then cause of death must = 0000 (patient alive at last contact)**
- Laterality **must be provided** for specified paired organs/sites. **Be careful not to record unknown.**
- Be sure to exhaust all methods of identification **before** submitting race and/or sex as unknown.
- Check the medical record
- Contact the reporting physician

For Cases Prior to 2004

- If **primary site is unknown**, lymph node and EOD extension must = unknown.
- **For prostate primary, the EOD code for unknown extension or metastasis must = 90.**
- If lymph nodes are recorded as positive; lymph node involvement must = **a value other than 00 or 99**

CDC's National Program of Cancer Registries

Providing National Leadership

The Centers for Disease Control and Prevention (CDC) has administered the National Program of Cancer Registries (NPCR) since 1994. Before NPCR was established, 10 states had no registry and most states with registries lacked the resources and legislative support needed to gather complete data. With fiscal year 2004 appropriations of approximately \$50 million, CDC's NPCR supports central registries and promotes the use of registry data in 45 states of which **Alabama is one**, the District of Columbia, and the territories of Puerto Rico, the Republic of Palau, and the Virgin Islands. CDC also is conducting special research projects such as studies to examine patterns of cancer care in specific populations. CDC's goal is for all states to maintain registries that provide high-quality data on cancer and cancer care.



Ensuring the Quality of Registry Data: CDC Standards and NAACCR Certification

CDC has established national standards to ensure the completeness, timeliness, and quality of cancer registry data. In addition, CDC recommends that central cancer registries incorporate standards for data quality and format as described by the North American Association of Central Cancer Registries (NAACCR). In 1997, NAACCR instituted a program that annually reviews member registries' abilities to produce complete, accurate, and timely data. Registries that meet the highest standards receive NAACCR certification. Thirty-five CDC-supported NPCR registries achieved these high standards for their 2001 data, the most recent year for which cancer incidence data are available. Alabama is happy to be counted among those registries that have achieved certification status.

Currently, the Alabama Statewide Cancer Registry enjoys silver certifi-

cation status with high hopes of achieving gold with its' most recent data submission.

Implementing the NPCR-Cancer Surveillance System

NPCR has a unique opportunity to strengthen cancer reporting in the United States. NPCR registries collect information on cancer cases occurring among 96% of the U.S. population. In 2001, CDC began to receive state cancer data from these registries on an annual basis for entry into the NPCR-Cancer Surveillance System. This repository for cancer data is enabling CDC to provide valuable feedback to help state registries improve the quality and usefulness of their data and link with other databases. In addition, the availability of regional and national data is facilitating studies in areas such as rare cancers, cancer in children, the quality of cancer care, and cancer among specific racial/ethnic minority populations.



Alabama Department of Public Health

Alabama Statewide Cancer Registry
The RSA Tower
204 Monroe Street, Suite 1400
Montgomery, Alabama 36130-3017
Phone: 334-206-5557
Fax: 334-206-3823



Capturing Cancer Data in Alabama
Find us on the web
Adph.org/cancer_registry

ASCR News is published quarterly for those involved in cancer data collection in Alabama. Contact us to submit articles for publication

Regina T. Dillard, RHIT, CTR
Editor:

Vicki Nelson, RHIT CTR,
Program Manager
&
Tom Phillips, MPH
Administrative Director

Editorial Review

Meet Arica White

A native of Alabama, **Arica** joined the ASCR staff in June of 2003. She had previously held a position with another state program. As **Quality Assurance Coordinator**, Arica plans, conducts, and reports on studies analyzing and interpreting cancer-related data to assist in decision making processes related to intervention and early detection programs. She conducts cancer registration quality control studies; reviews data for expected results, trends and unusual findings. She is responsible for the publication of quarterly cancer-related newsletters, reports and correspondence. Lastly, the development and implementation of reporting procedures for non registry facilities.



Arica White

Arica received a BA at Johns Hopkins University, in Baltimore, Maryland and her MPH degree from the University of Michigan in Ann Arbor, Michigan..

Welcome Arica !

ASCR NEW ADMINISTRATIVE DIRECTOR

Tom Phillips became the Director of the Alabama Statewide Cancer Registry in October, 2004. He is a native of Florence, Alabama, and a graduate of Oklahoma Christian University. He has a Master's degree in Public Administration from Auburn University and has done additional graduate work at the University of Alabama.



Tom Phillips

Tom began his career as an administrator with the U. S. Public Health Service, serving in Alabama, Maryland, and Pennsylvania. In 1975, he began with the Alabama Department of Public Health as an area Administrator of 13 counties in south Alabama. Since 1990, he has served as

the Director of the Alabama Hypertension Program and several other state programs. He transferred from Bio-Terrorism to the Cancer Registry in 2004.

Tom and his wife, Patsy, are the parents of two sons and a daughter. They live in Montgomery, close to two grandsons. Apart from his health career, Tom has served as an adjunct instructor at Faulkner University and in the Alabama National Guard College Program. He has developed a character building course and taught in the

Alabama Correction centers for several years. In 2004, Tom taught "Character in Business" at Donetsk University in the Ukraine. He has been invited to return and conduct seminars in the Ukraine in 2005 and 2006.

Tom recently said, "In the brief time I've been in the Cancer Registry Program, I've come to appreciate the tediousness and complexity of tumor registry work. I have a great appreciation for the work of the staff and the contributing professionals across the state. They're making a real contribution to the continuing health of the citizens of Alabama and the nation."