
Why is there **Non-hospital Medical Provider Electronic Cancer Reporting?**

What is the Oregon State Cancer Registry and why should I report cancer to
comply with Oregon State law.

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This guide is for Non-hospital Cancer Incidence Reporters such as:

- ❑ Ambulatory Surgery Centers
- ❑ Cancer Treatment Centers
- ❑ Physicians (individual providers, small clinics and large medical groups)
- ❑ Radiation Treatment Facilities
- ❑ Pathology Labs

What is the Oregon State Cancer Registry (OSCaR)?

The Oregon State Cancer Registry (OSCaR) is the sole repository of complete cancer incidence data for cancer surveillance, prevention and control efforts for the State of Oregon.

OSCaR is a population-based reporting system that collects and analyzes information about cancer cases occurring in Oregon. OSCaR was established by the 1995 Oregon legislature and began collecting information on all cancers diagnosed in Oregon as of January 1, 1996.

Cancer is a reportable disease in Oregon

Every year, thousands of Oregonians are diagnosed with cancer. The Oregon State Cancer Registry (OSCaR) was established after the Oregon Legislature unanimously passed legislation making cancer a **reportable disease**.

OSCaR is a statewide, population-based registry that collects and analyzes information about cancer cases occurring in Oregon. The ability to identify who is diagnosed statewide is important in the development of ways to prevent and control cancer.

Data from OSCaR provide an overview of all cancers diagnosed in Oregon. This information is useful for cancer prevention programs, clinicians, policy makers, and the public for understanding the impact of cancer among Oregonians.

National Program of Cancer Registries (NPCR)

The NPCR provides funding and support for state cancer registries to:

- ❑ Monitor cancer trends over time
- ❑ Determine cancer patterns in various populations
- ❑ Guide planning and evaluation of cancer control programs
- ❑ Help set priorities for allocating health resources
- ❑ Advance cancer research
- ❑ Provide information for a national database of cancer incidence

Oregon began receiving funds from NPCR in 1995. For further information regarding NPCR: <http://www.cdc.gov/cancer/npcr>

Why is Non-hospital medical provider reporting important?

- ❑ Shift in recent years toward outpatient diagnosis and treatment for cancer patients
- ❑ Pathology labs, physician offices, ambulatory surgery centers, cancer treatment centers and radiation treatment centers together with hospitals play a key role in the collection of cancer information
- ❑ Without non-hospital medical provider reporting, Oregon cancer statistics would not be accurate and the OSCaR database could not be relied upon to help direct cancer prevention and control efforts
- ❑ Increases completeness of data for cancer incidence in Oregon

Types of Cancers Diagnosed and Treated Outside of the Hospital

The most common types of cancer diagnosed or treated outside of the hospital are:

- ❑ Melanoma
- ❑ Prostate
- ❑ Non-invasive bladder tumors
- ❑ Colorectal tumors
- ❑ Lymphoma, leukemia, multiple myeloma and other bone marrow primaries

What does OSCaR do with the data you report?

- ❑ Provides accurate cancer data for public health policy-making and epidemiological research and investigation efforts related to cancer control efforts.
- ❑ Provides surveillance of cancers addressed by cancer prevention or early detection programs for targeting and evaluating control.
- ❑ Tracks cancer incidence and treatment trends in Oregon.
- ❑ Assesses suspected cancer data or cancer hazards in local communities.
- ❑ Supports efforts by community hospitals, health systems, and community-based cancer prevention programs by providing statistics on the distribution of cancer cases by type and treatment.

Confidentiality at OSCaR

OSCaR maintains the confidentiality of data

- ❑ OSCaR has procedures in place to assure that the confidentiality provisions of state law, ARRA HITECH and HIPPA are implemented. Staff sign confidentiality agreements annually and data is kept in secured offices, workstations, applications and networks.
- ❑ Only aggregated data that does not reveal patient identity is released for published reports or to respond to general data requests
- ❑ Researchers needing confidential data from OSCaR must undergo a stringent approval process.
- ❑ HIPAA privacy regulations allow OSCaR, as a public health authority, to collect information for the purpose of preventing and controlling cancer.

Required Reporting Data

Types of data that are currently collected by OSCaR include:

- ❑ Primary Site (Cancer site)
- ❑ Demographic data (Patient data)
- ❑ Diagnostic information, including pathology report data
- ❑ Staging data (Extent of the disease)
- ❑ First Course of Treatment(s)

Additional Data that may be required

Non-hospital medical provider offices may be contacted by OSCaR to obtain additional information such as:

- ❑ Any illegible or questionable data
- ❑ Diagnostic and treatment information for cancer cases identified through death certificate review

Uses of OSCaR Data

Examples of how OSCaR data is used:

- ❑ Oregon Health Authority (OHA) Chronic Disease data website - [OSCaR Data](#)
- ❑ Treatment and follow-up data collected for use in planned quality of cancer care and survivorship studies
- ❑ NAACCR's CINA report <http://www.cancer-rates.info/naaccr/>
- ❑ NPCR's National Cancer Institute's publication United States Cancer Statistics (USCS): Incidence and Mortality Data <https://www.cdc.gov/cancer/uscs/public-use/index.htm>

Why Non-hospital medical providers in Oregon need to report

- ❑ Cancer is a reportable disease with mandatory reporting requirements.
- ❑ Even minimal clinical data for a patient, such as date of diagnosis, cancer site and type, helps us to create the most complete patient record.
- ❑ Cancer patients often travel between Oregon and its (3) border states for treatment.
- ❑ A patient could be referred to an Oregon hospital for treatment but, not go there for these services then, this case could go unreported.
- ❑ Data from different reporting sources is consolidated at OSCaR for a complete, accurate cancer abstract for each case.

How do you select cancer cases to report?

Your office may select cases to report to OSCaR based on:

- ❑ Text from the patient's pathology report, medical records, or other documentation
- ❑ Codes: A comprehensive list of ICD-10 codes is provided on our website. Use it to run a search of your billing system for cases with these codes
<http://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/CHRONIC/DISEASE/CANCER/OSCAR/Pages/reporting.aspx>

Submitting Cancer Data Electronically

- ❑ *OSCaR maintains a highly secure, encrypted web portal for cancer data submission. [Web Plus](#) is hosted on a secure Web server that has a digital certificate installed; the communication between the client and the server is encrypted with Secure Sockets Layer (SSL) technology. Using Web Plus is free.*
- ❑ Onboarding activities to initiate electronic reporting are done virtually via TEAMS or ZOOM. Training takes about 1 hour to complete. OSCaR staff provide ongoing technical support.

Questions?
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