

**The Law**  
**Chapter 82, Health and Safety Code**  
**(amended September 1, 2001)**

**Section 82.001. Short Title**

This Chapter may be cited as the Texas Cancer Incidence Reporting Act.

**Section 82.002. Definition**

In this chapter:

- (1) Cancer includes:
  - (A) a large group of diseases characterized by 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, including malignant and benign tumors of the central nervous system; and
  - (D) malignant neoplasm, other than nonmelanoma skin cancers such as basal and squamous cell carcinomas.
- (2) Clinical laboratory means an accredited facility in which:
  - (A) tests are performed identifying findings of anatomical changes; and
  - (B) specimens are interpreted and pathological diagnoses are made.
- (3) Health care facility means:
  - (A) a general or special hospital as defined by Chapter 241 (Texas Hospital Licensing Law);
  - (B) an ambulatory surgical center licensed under Chapter 243;
  - (C) an institution licensed under Chapter 242; or
  - (D) any other facility, including an outpatient clinic, that provides diagnosis or treatment services to patients with cancer.
- (4) Health care practitioner means:
  - (A) a physician as defined by Section 151.002, Occupations Code; or
  - (B) a person who practices dentistry as described by Section 251.003, Occupations Code.

**Section 82.003. Applicability of Chapter**

This chapter applies to records of cases of cancer, diagnosed on or after January 1, 1979, and to records of all ongoing cancer cases diagnosed before January 1, 1979.

**Section 82.004. Registry Required**

The board shall maintain a cancer registry for the state.

### **Section 82.005. Content of Registry**

- (a) The cancer registry must be a central data bank of accurate, precise, and current information that medical authorities agree serves as an invaluable tool in the early recognition, prevention, cure, and control of cancer.
- (b) The cancer registry must include:
  - (1) a record of the cases of cancer that occur in the state; and
  - (2) information concerning cancer cases as the board considers necessary and appropriate for the recognition, prevention, cure, or control of cancer.

### **Section 82.006. Board Powers**

To implement this chapter, the board may:

- (1) adopt rules that the board considers necessary;
- (2) execute contracts that the board considers necessary;
- (3) receive the data from medical records of cases of cancer that are in the custody or under the control of clinical laboratories, health care facilities, and health care practitioners to record and analyze the data directly related to those diseases;
- (4) compile and publish statistical and other studies derived from the patient data obtained under this chapter to provide, in an accessible form, information that is useful to physicians, other medical personnel, and the general public;
- (5) comply with requirements as necessary to obtain federal funds in the maximum amounts and most advantageous proportions possible;
- (6) receive and use gifts made for the purpose of this chapter; and
- (7) limit cancer reporting activities under this chapter to specified geographic areas of the state to ensure optimal use of funds available for obtaining the data.

### **Section 82.007. Annual Report**

- (a) The department shall publish an annual report to the legislature of the information obtained under this chapter.
- (b) The department, in cooperation with other cancer reporting organizations and research institutions may publish reports the department determines are necessary or desirable to carry out the purpose of this chapter.

### **Section 82.008. Data From Medical Records**

- (a) To ensure an accurate and continuing source of data concerning cancer, each health care facility, clinical laboratory, and health care practitioner shall furnish to the board or its representative, on request, data the board considers necessary and appropriate that is derived from each medical record pertaining to a case of cancer that is in the custody or under the control of the health care facility, clinical

laboratory, or health care practitioner. The department may not request data that is more than three years old unless the department is investigating a possible cancer cluster.

- (b) A health care facility, clinical laboratory, or health care practitioner shall furnish the data requested under Subsection (a) in a reasonable format prescribed by the department and within six months of the patient's admission, diagnosis, or treatment for cancer unless a different period is prescribed by the United States Department of Health and Human Services.
- (c) The data required to be furnished under this section must include patient identification and diagnosis.
- (d) The department may access medical records that would identify cases of cancer, establish characteristics or treatment of cancer, or determine the medical status of any identified patient from the following sources:
  - (1) a health care facility or clinical laboratory providing screening, diagnostic, or therapeutic services to a patient with respect to cancer; or
  - (2) a health care practitioner diagnosing or providing treatment to a patient with cancer, except as described by Subsection (g).
- (e) The board shall adopt procedures that ensure adequate notice is given to the healthcare facility, clinical laboratory, or health care practitioner before the department accesses data under Subsection (d).
- (f) A health care facility, clinical laboratory, or health care practitioner that knowingly or in bad faith fails to furnish data as required by this chapter shall reimburse the department or its authorized representative for the costs of accessing and reporting the data. The costs reimbursed under this subsection must be reasonable, based on the actual costs incurred by the department or by its authorized representative in the collection of data under Subsection (d), and may include salary and travel expenses. The department may assess a late fee on an account that is 60 days or more overdue. The late fee may not exceed one and one-half percent of the total amount due on the late account for each month or portion of a month the account is not paid in full. A health care facility, clinical laboratory, or health care practitioner may request that the department conduct a hearing to determine whether reimbursement to the department under this subsection is appropriate.
- (g) The department may not require a health care practitioner to furnish data or provide access to records if:
  - (1) the data or records pertain to cases reported by a health care facility providing screening, diagnostic, or therapeutic services to cancer patients that involve patients referred directly to or previously admitted to the facility; and
  - (2) the facility reported the same data the practitioner would be required to report.
- (h) The data required to be furnished under this section may be shared with cancer registries of health care facilities subject to the confidentiality provisions in Section 82.009.

### **Section 82.009. Confidentiality**

- (a) Reports, records, and information obtained under this chapter are confidential and are not subject to disclosure under Chapter 552, Government Code, are not subject to subpoena, and may not otherwise be released or made public except as provided by this section or Section 82.008(h). The reports, records, and information obtained under this chapter are for the confidential use of the

department and the persons or public or private entities that the department determines are necessary to carry out the intent of this chapter.

- (b) Medical or epidemiological information may be released:
  - (1) for statistical purposes in a manner that prevents identification of individuals, healthcare facilities, clinical laboratories, or health care practitioners;
  - (2) with the consent of each person identified in the information; or
  - (3) to promote cancer research, including release of information to other cancer registries and appropriate state and federal agencies, under rules adopted by the board to ensure confidentiality as required by state and federal laws.
- (c) A state employee may not testify in a civil, criminal, special, or other proceeding as to the existence or contents of records, reports, or information concerning an individual whose medical records have been used in submitting data required under this chapter unless the individual consents in advance.
- (d) Data furnished to a cancer registry or a cancer researcher under Subsection (b) or Section 82.008 (h) is for the confidential use of the cancer registry or the cancer researcher, as applicable, and is subject to Subsection (a).

### **Section 82.010. Immunity From Liability**

The following persons subject to this chapter that act in compliance with this chapter are not civilly or criminally liable for furnishing the information required under this chapter:

- (1) a health care facility or clinical laboratory;
- (2) an administrator, officer, or employee of a health care facility or clinical laboratory
- (3) a health care practitioner or employee of a health care practitioner; and
- (4) an employee of the department.

### **Section 82.011. Examination and Supervision Not Required**

This chapter does not require an individual to submit to any medical examination or supervision or to examination or supervision by the board or its representatives.

This Act takes effect September 1, 2001.