Tennessee Cancer Registry (TCR)
Electronic Health Record (EHR) Incentive Programs
Implementation Guide

Please note that the information in this document only applies to cancer case reporting in Tennessee. The information below does not pertain to Immunization Registry updates, Electronic Laboratory Reporting, or Syndromic Surveillance.

Introduction

Population-based cancer surveillance is critical in North America for cancer control activities aimed at reducing the morbidity and mortality of cancer, the second leading cause of death in the United States and in Tennessee. Reporting to cancer registries by ambulatory healthcare providers would address current underreporting of cancer, especially for certain types of cancers. In the past most cancers were diagnosed and/or treated in a hospital setting and data were primarily collected from this source. However, medical practice is changing rapidly and an increasing number of cancer cases are never seen in a hospital. Data collection from ambulatory providers presents new challenges since the infrastructure for reporting is less mature than it is in hospitals. Certified Electronic Health Record (EHR) Technology can address this barrier by identifying reportable cancer cases and treatments to the provider and facilitating electronic reporting either automatically or upon verification by the provider.

Purpose

The purpose of this guide is to provide eligible providers, who meet the requirements for cancer case reporting under the EHR Incentive Programs, with the information necessary for successful cancer case reporting to the Tennessee Cancer Registry (TCR). Standards specifications provided in this guide are designed to facilitate the implementation of an automated electronic process for the identification and reporting of cancer cases, treatment, and outcomes from ambulatory healthcare provider EHR systems to public health central cancer registries. This guide is intended for eligible providers (EPs), and their vendors, and business associates. Automated electronic reporting is expected to reduce labor and increase the security, completeness, timeliness and accuracy of cancer surveillance data.

Useful Links

Health Level 7 International

Clinical Document Architecture (CDA), Release 2 Information

Implementation Guide for Ambulatory Healthcare Provider Reporting to Central Cancer Registries, HL7 CDA

Cancer Reporting Clarification Document for Electronic Health Record (EHR) Technology Certification

Transport Options

Public Health Reporting Task Force

Cancer Reporting System Act of 1983 – T.C.A. 68-1-1001

Cancer Reporting System Act of 1983, May 2000 Amendment – T.C.A. 69-1-1001

Checklist for reporting from a certified EHR to the Tennessee Cancer Registry

PRE-REGISTRATION: DETERMINING ELIGIBILITY

❖ In order to participate in Cancer Case Reporting in Tennessee, Eligible Providers (EPs) must be able to answer 'Yes' to the following questions:

Eligible Provider Activity	**Complete**
Does the provider diagnose or treat 25 cancer patients in a calendar year? All histologies in the *International Classification of Diseases for Oncology, Third Edition (ICD-0-3)* with a behavior of /2 or /3 are reportable except: ▪ Prostatic intraepithelial neoplasia (PIN III) of the prostate (C61.9) ▪ Carcinoma in situ of the cervix (/2) or cervical intraepithelial neoplasia (CIN III) of the cervix ▪ Malignant primary skin cancers (C44.0—C44.9) with any of the following histology codes are not required: o Malignant neoplasm (8000-8005) o Epithelial carcinoma (8010-8046) o Papillary and squamous cell carcinoma (8050-8084) o Basal cell carcinoma (8090-8110) o AIN III (8077) arising in perianal skin (C44.5)	☐ Yes
Is the provider's physician specialty included in the below list? • Dermatology • Urology • Gastroenterology • Hematology • Medical Oncology • Radiation Oncology • Surgical Oncology • Gynecologic Oncology	☐ Yes
Does the provider have certified Electronic Health Record (EHR) software that is able to Record Cancer Case Information and is capable of Transmission to Cancer Registries? The list of certified products from ambulatory vendors can be found within the Office of the National Coordinator for Health Information Technology's Certified Health IT Product List. 1. Enter the name of your EHR product in the search box 2. Click on the blue box labeled '*Certification Edition*' to the right of the search box and select '2014' or '2015' 3. Navigate to the specific version of your EHR product and select '*Details*' 4. In the Certification Criteria table verify your EHR product has the following certification criteria: a. '**170.315(f)(4)**' – Ambulatory Setting Only – Transmission to Cancer Registries (2015 Edition)	☐ Yes

Note: EPs who do not have EHR software certified by the Office of the National Coordinator (ONC) for Health Information Technology to transmit cancer data will be able to register with the Tennessee Cancer Registry (TCR) in the Trading Partner Registration (TPR) application; however, those EPs will be *unable* to test with TCR until their software is certified by ONC to record and transmit cancer case information.

PHASE 1: REGISTRATION

❖ EP's registration of intent to exchange data electronically with TDH

Eligible Provider Activity	Complete	Tennessee Cancer Registry Response
Identify the individuals who will be responsible for testing, validation, and ongoing cancer data submission. ***This step is vital to achieving successful registration of EPs within the Trading Partner Registration (TPR) application.***	☐	N/A
Work with EHR vendor to receive proper training in using EHR software to ensure the information required for cancer case reporting is captured.	☐	N/A
Complete registration through the Trading Partner Registration (TPR) application using the TPR User's Guide.	☐	Review registration request.
If EP's EHR *is not certified* by ONC to transmit cancer data to TCR, EP will be placed in Registration Queue until EP's EHR is certified. Once EP's EHR receives certification from the ONC to record and transmit cancer data to TCR, EP will resubmit TPR registration.	☐	Deny EP's registration submission until EP's EHR receives certification from the ONC to transmit cancer data to TCR.
If EP's EHR *is certified* by ONC to transmit cancer data to TCR, EP will continue to Phase 2: Testing with Vendor.	☐	Approve EP's registration submission and provide EP with Onboarding Instructions.

PHASE 2: TESTING WITH VENDOR

❖ EP's Creation of Certified Test CDA Document According to Specification in the Implementation Guides

Eligible Provider Activity	Complete	Tennessee Cancer Registry Response
Work with EHR vendor to ensure CDA documents are formatted correctly, using the correct codes, and filled with valid data. To obtain clear and concise specifications for electronic reporting to a central cancer registry, review the : Implementation Guide for Ambulatory Healthcare Providers Reporting to Central Cancer Registries	☐	N/A
EPs should ensure that their EHR vendor addresses all errors identified during in-house validation with the validation tools provided by the National Institute of Standards and Technology (NIST) before engaging in tests with TCR. EP sends NIST error reports to TNCancer.Registry@tn.gov. In the subject of your email, include the name of your facility and indicate that it contains NIST error reports. EP is placed in the Onboarding Queue until TDH initiates secure transport discussion.	☐	Discuss with EP secure transport options offered by the Tennessee Department of Health (TDH). TCR currently supports only SFTP as a transport method.
Work with EHR vendor to validate a Test CDA document using the CDA Validation Plus Tool. EPs and EHR vendors may obtain download information for the CDA Validation Plus Tool by e-mailing a request to Lindsay Ryan at viu3@cdc.gov. Review error reports generated by the CDA Validation Plus Tool and correct all errors from Test CDA document.	☐	N/A

Note: Use of HL7 Clinical Document Architecture (CDA), Release 2.0 is required.

PHASE 3: ON-BOARDING

❖ TCR's Quality Assurance Review to Validate CDA Documents' Content and Format

Eligible Provider Activity	Complete	Tennessee Cancer Registry Response
Establish secure transport method with TDH.	☐	Assist EP and TDH with transport mechanism setup. The preferred method of transport for the TCR is SFTP.
Work with TCR to generate and submit initial CDA document from EHR software to ensure CDA document will contain valid values.	☐	Validate EP's Test CDA document and provide the resulting error report generated by CDA Validation Plus to EP.
If validation **fails**, EP will receive a request for action notice to resolve any issues. *"EPs are required to respond within 30 days. EPs that fail to respond within 30 calendar days to TCR requests for action on two (2) separate occasions will fail to meet the cancer case reporting objective."*	☐	Send a request for actions to document issues that require corrective action from EP. NOTE: All formal requests for actions may be found in the TPR system.
If validation **passes**, EP is sent a Trading Partner Agreement (TPA) detailing the technical requirements of the data exchange with the TCR. EP is placed in the Production Queue and will wait in queue until further status update from TCR.	☐	Distribute TPA to EP. Provide instruction on how to begin transmission of production-ready CDA documents when EP reaches the front of the Production Queue.

PHASE 4: PRODUCTION

❖ EP's Submission of HL7 CDA Cancer Data and Participation in Quality Assurance Activities

Eligible Provider Activity	Complete	Tennessee Cancer Registry Response
Generate and submit initial Production CDA document to TCR. After the data have been transmitted and validated, EP will receive confirmation from TCR and instructions for ongoing submission. *All cancer cases must be reported within 6 months of diagnosis or treatment.*	☐	Validate EP's Production CDA document and provide the resulting error report to EP. Provide EP with instructions for ongoing submission.
If validation **fails**, EP will receive a Request For Action notice to resolve any issues.	☐	Issue a Request For Action to resolve any issues with EP's submission.
If validation **passes**, EP will receive an official letter from TCR via the TPR application. This letter will serve as attestation that EP has completed the onboarding process with TCR and has therefore met the Cancer Case Reporting objective under the EHR Incentive Program.	☐	Provide EP with an official letter that serves as attestation that EP has completed the onboarding process and has met the Cancer Case Reporting objective under the EHR Incentive Program. Supply EP with instructions for on-going submission. Upload finalized TPA to the TPR application.
By submitting Cancer Cases to TDH the EP meets the active engagement requirement according to the Public Health Reporting measure and continues ongoing submission of cancer data to TCR.	☐	Perform Annual Quality Assurance Testing.

Registry Contact Information

For more information about reporting cancer cases electronically in Tennessee, please contact: The Tennessee Cancer Registry (TCR) at (615) 741-5548 or toll-free at 1-800-547-3558 or email us at TNCancer.Registry@tn.gov.

Public Health Reporting Information

For general information on Public Health Reporting using Certified Electronic Health Record Technology (CEHRT), please visit the following website: https://www.tn.gov/health/cedep/meaningful-use-summary.html

For more information regarding other public health reporting options, please contact: The Tennessee Department of Health Partner Engagement Coordinator at MU.Health@tn.gov.