## Maine Cancer Surveillance System

<table>
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<tr>
<th>State</th>
<th>Statute/Rule</th>
<th>Language Specific to Surveillance System</th>
<th>Data Sharing</th>
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<tr>
<td>ME</td>
<td>STATUTE: MRS Title 22, Subt. 2, Part 3 Chapter 255 §1401 to 1407. RULE: 10-144 Chapter 255</td>
<td>§1404. Cancer-incidence registry. The Department of Health and Human Services shall establish, maintain and operate a statewide cancer-incidence registry. [1981, c. 507, §1 (NEW); 2003, c. 689, Pt. B, §6 (REV).]</td>
<td>§1402. Duty of physicians and hospitals. A physician, surgeon or other health care practitioner who diagnoses or provides treatment for cancer patients, upon notification by the Department of Health and Human Services, shall report to the</td>
<td>§1406. Maine Cancer Registry Data Review Committee The Maine Cancer Registry Data Review Committee, referred to in this section as the &quot;committee,&quot; is established. The committee is appointed and convened by the Bureau of Health to review and advise the administrators of the statewide cancer-incidence registry established in section 1404 on the release of identifiable data as requested by researchers for the purposes of cancer prevention, control and research.</td>
<td>NO</td>
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</tbody>
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Updated August 2012. All state statutes and department rules originally accessed online July/Aug 2008. Statute/Rule data not inclusive. For comprehensive or updated language, access complete statute and rules online, at local library or through the state legislature.

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### §1402. Duty of physicians and hospitals

All hospitals and other health care facilities providing screening, diagnostic or therapeutic services with respect to cancer shall report to the Department of Health and Human Services all persons diagnosed as having a malignant tumor or certain benign tumors as determined by rule no later than 6 months from the date of diagnosis. The report must include information on the person's usual occupation and industry of employment and other elements determined by rule to be appropriate. The Commissioner of Health and Human Services shall adopt rules to implement this section.

A. Monitoring cancer prevalence at the state and community levels through the cancer-incidence registry under section 1404 and other means;

B. Education and training of health professionals on the current methods of diagnosing and treating cancer;

C. Patient and family education on how to manage the disease and the treatment of the disease;

D. Consultation with and support of community-based cancer prevention, research and treatment programs; and

E. Implementation of a comprehensive cancer screening, detection and prevention program.

### §1402. Duty of physicians and hospitals. The requirements of this section do not apply to health care practitioners who provide treatment by spiritual means alone.
### 10-144 CHAPTER 255: MAINE CANCER DEGISTRY RULES AND REGULATIONS:

#### 2. INTRODUCTION.

The objectives of the State of Maine’s Cancer Incidence Registry Program (MCR) are to collect case-specific data on all persons diagnosed with cancer living in Maine and, to the extent feasible, those Maine residents who are either diagnosed or die out of state; to tabulate and summarize patient data to determine the frequency and incidence rates by age, sex, and type of cancer for geographic areas; to evaluate factors which might determine the incidence of cancer or survival of cancer patients; and to assist others interested in improving the control of cancer among residents of the State of Maine.

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#### 2. Consultation.

In implementing the program established in subsection 1, the Bureau of Health shall consult with the Medicaid program administered by the department and with the Department of Education. In addition, the bureau shall seek advice from other organizations and private entities concerned with cancer prevention, research and treatment.

#### 3. Funding.

The Bureau of Health may accept federal funds and grants for implementing the program established in subsection 1 and may contract for work with outside vendors or individuals.
### 6. CONFIDENTIALITY OF CANCER REGISTRY DATA

A … Data on cancer patients whose legal address is outside of the State of Maine may be shared with other cancer registries if a reciprocal data sharing agreement is implemented with that registry. The Maine Cancer Registry will insure that agreements with other cancer registries include data confidentiality provisions.

### 4. Comprehensive Cancer Screening, Detection and Prevention Fund; funding.

The Comprehensive Cancer Screening, Detection and Prevention Fund is established within the department to fund or assist in funding the comprehensive cancer screening, detection and prevention program should it be established pursuant to subsection 1, paragraph E. Any balance in the fund does not lapse but is carried forward to be expended for the same purposes in succeeding fiscal years. The fund must be deposited with and maintained and administered by the department. The fund may receive funds from any non-General Fund source, including grants or contributions of money from the public or private sector, to carry out the purposes of subsection 1, paragraph E.

### 5. Rulemaking.

The Bureau of Health shall adopt rules to carry out the purposes of this section. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2A.