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March 11, 2022

Chair Tina Liebling
Minnesota House of Representatives Health Finance and Policy Committee
477 State Office Building
St. Paul, MN 55155

Dear Chair Liebling and Members of the House Health Finance and Policy Committee:

It has been my delight to return to the State of Minnesota and the Upper Midwest as Executive Director of Mayo Clinic Cancer Programs and as Director of the Mayo Clinic Comprehensive Cancer Center (MCCC). On behalf of Mayo Clinic and MCCC, I write to extend our very strong support for HF 3871 to allow the State of Minnesota's Cancer Registry to share data with other state and national cancer registries. I would like to thank Representative Morrison for authoring this critical legislation and we respectfully ask for your support.

Cancer is the second leading cause of death in the world; in many vulnerable, minority, and underserved populations and communities, it has become the leading cause of death. To guide our ability to successfully prevent, screen, diagnose and treat cancer in the patients and communities we serve, it is critical that we have access to integrated de-identified and anonymized cancer registry data sets from across our State and the nation. This allows us to understand the patterns and causes of cancer incidence and mortality in our communities, compared to other communities, and to determine how these patterns are changing over time. Through this knowledge we can design the best intervention strategies to overcome cancer for Minnesotans, and we can determine if our interventions are having an impact. Thus, access and sharing of our data plays a key role in achieving these positive outcomes. Unfortunately, Minnesota has been an outlier as a state in not sharing information from its cancer registry with other states, the Centers for Disease Control, and agencies such as the National Institutes of Health. Consequently, we have not had the opportunity to apply for federal matching funding for our registry and cancer screening and surveillance opportunities, that would greatly benefit cancer patients in the state of Minnesota and expand our activities.

Recognizing the value and need for strong data to advance the science of medicine, Mayo Clinic has long supported this change for the state to share data with other registries. At the same time, from working with many cancer registries across the nation, we understand that such data sharing and access must occur in a manner that ensures the privacy and safety of individual cancer patients. The nation's cancer registries, including Minnesota's, are skilled in this process and goal. Hopefully with this change, we as a state and as providers and researchers committed to the exploration of this disease, can further harness the access to increased data to drive transformational change to better serve our patients.

Thank you for your consideration of this important legislation. Please feel free to contact Mayo Clinic's Government Engagement team, Kate Johansen and Nikki Vilendrer, to further discuss the value of this needed change.

Respectfully,

Church L. Willman

Cheryl Willman, M.D.

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