

Centers for Disease Control and Prevention (CDC) Atlanta GA 30333

March 4, 2022

Ms. Khatidja Dawood, Director of Health Promotion and Chronic Disease Division Minnesota Cancer Reporting System (MCRS), Minnesota Department of Health 85 East Seventh Place, Suite 200 Saint Paul, MN 55164-0882

Dear Ms. Khatidja Dawood,

Surveillance is the cornerstone of cancer prevention and control efforts and a Strategic Priority for the Centers for Disease Control and Prevention (CDC). Complete information about all cancer cases is crucial for monitoring trends, planning for and evaluating the impact of cancer control programs, allocating health resources, identifying subpopulations where evidence-based interventions should be targeted to reduce the cancer burden, responding to reports of suspected increases in occurrence, and developing research hypotheses. CDC is authorized under 42 U.S.C. Section 280e [National Program of Cancer Registries (NPCR) Law] to "make grants to States...to support the operation of population-based, statewide registries to collect...demographic information about each case of cancer..." as well as other cancer-related data. Additionally, 42 U.S.C. Section 280e(c)(1)(a) provides that a cancer registry grant may be made only if an application is submitted and is "in such form, submitted in such a manner, and be accompanied by such information as the Secretary may specify."

To accomplish the goals of, and as authorized by, the NPCR Law, CDC currently supports cancer registries, including the Minnesota Cancer Reporting System under Funding Announcement DP17-1701 for the purposes outlined in the funding announcement and the law. This Funding Announcement specifies that registries must, among other activities:

- Collect all reportable diagnoses
- Enhance timely reporting through data exchange
- Meet requirements outlined in the National Program of Cancer Registries Program Standards
- Participate in Interstate data exchange per the requirements of the NPCR Program Standards
- Describe the registry's activities for interstate data exchange for incoming and outgoing data including frequency, quality assurance, and participation with the National Interstate Data Exchange Agreement.

The NPCR law also requires states to have laws and/or regulations that ensure a complete reporting of cancer cases. CDC defines complete reporting of cancer cases to include residents of the state diagnosed and/or treated in other geographic locations. In some instances, data received through interstate data exchange agreements account for approximately 15% of the cases in a registry's database. Without interstate data exchange, certain registries could have an inaccurate picture of their cancer incidence, prevalence, and survival. In order to meet the objectives outlined in the NPCR law as well as the funding

announcement cited above, CDC requires interstate data exchange to ensure completeness and quality of data for individual states and the nation.

In conjunction with the law, Funding Announcement DP17-1701, and the NPCR Program Standards, data exchange is a program requirement for all NPCR-funded registries, including the Minnesota Cancer Reporting System, and is necessary to support the completeness of the entire surveillance system. Currently, Minnesota Department of Health is the only NPCR funded state that does not have a data sharing agreement with its neighboring states and thus negatively impacts the completeness and quality of data in those adjoining states. In accordance with applicable grant regulations, continued failure to comply with this critical required standard procedure in a timely manner may adversely affect the future funding of this project.

We request to have a conference call with MCRS Mid-February to discuss your progress on complying with this critical requirement. Please follow-up with David Butterworth at jji7@cdc.gov to schedule the call.

Sincerely,

Pamela Render

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Grants Management Officer Chronic Disease and Birth Defects Services Branch Office

of Financial Resources/Office of Grants Services

cc: Project Officer/Program Official