



January 2016 Update

New Electronic Submission of Data Requirements ~

MCSP will be implementing Web Plus for electronic submission of data to the MCSP. Web Plus is a Web-based application that collects cancer data securely over the public internet and is ideal for file upload of submission of data to the central cancer registry. Web Plus is hosted on a secure Web server that has a digital certificate installed; the communication between the client and the server is encrypted with Secure Sockets Layer (SSL) technology. All records saved in a database at the hosting central cancer registry and cases entered by one facility are not visible to other facilities. Data is validated by the CDC EDITS engine running a Web server and users, display types, and edit configurations are managed at the hosting central cancer registry.

Beginning January 1, 2016 and forward, electronic submission of data to the MCSP will be required to be submitted through Web Plus. Implementation date for Web Plus is scheduled for the later part of February. More information will be available soon.

If you have any questions regarding electronic data submissions, please contact Jetty Alverson at alversong@michigan.gov or 517-335-8855.

Note: If your registry is in the SEER area (Wayne, Oakland or Macomb County) and you have questions regarding submission of data, please contact your SEER-State Coordinator, Jeanne Whitlock at 313-578-4219 or whitlock@med.wayne.edu.

NAACCR: 2016 Implementation Guidelines and Recommendations~

The North American Association of Central Cancer Registries, Inc. (NAACCR) has released the 2016 Implementation Guidelines and Recommendations for NAACCR Standards Volume II, Data Standards and Data Dictionary, Version 16, effective with cases diagnosed on or after January 1, 2016.

Effective with Standards Volume II, Version 16, there are several new geocoding data items. Most significantly, there are numerous changes and many new data items associated with the transition from Collaborative Stage System to collection of directly assigned staging components.

Most of these changes, including all definitions of the new items and modifications in the column assignments are specified in Version 16 at <http://www.naacr.org/StandardsandRegistryOperations/VolumeII.aspx>. A brief overview of the

changes are provided below. For more information, refer to the NAACCR Data Standards and Data Dictionary, Version 16.

New Data Items

Four new County at DX Geocode data items [NAACCR Data Items 94-97] were introduced in order to identify an address's geocode relative to each given decennial census. The change was necessary because some states and counties have had changes to county boundaries and therefore changes over time in county of some particular addresses. Appropriate county-census tract combinations are important for deriving census-related socioeconomic factors, such as poverty indicators.

The Rural Urban Continuum 2013 [3312] captures the population size and degree of urbanization by county to aide researchers when investigating how proximity to metropolitan areas and urbanization correlate to burden of cancer. NOTE: This data item is derived electronically (i.e., proprietary cancer abstracting software and Abstract Plus) and should not be entered by an abstractor.

The data items listed below have been introduced as part of the staging transition and data collection requirements that vary among standard setters (see section 6 for more details):

- Six Mets at DX data items [1112-1117]
- Three Tumor Size data items [752-754]
- Eleven derived TNM data items [3605, 3610, 3614, 1616, 1618, 3620, 3622, 3624, 3626, 3650, 3655]

Changed Data Items

Record Layout Changes

The overall record layout remains the same length. Column spaces for some of the data items have been moved in the record layout in order to accommodate the new data items and expanded length of the TNM Clin Staged By and TNM Path Staged By data items (see section 3.5)

Addition of Clinical and Pathologic Indicators to AJCC T, N, M

Clinical and pathologic indicators are being added to six of the AJCC T, N, and M data items [940, 950, 960, 880, 890, and 900].

Sex [220]

The word 'hermaphrodite' formerly classified under code 3 is outdated. The definition was updated to code '3 - Other (intersex, disorders of sexual developmet/DSD).'

Census Ind Code 2010 [272] and Census Occ Code 2010 [282]

The Census Code 2010 and Census Occ Code 2010 were renamed to Census Ind Code 2010 and Census Occ Code 2010 CDC.

“Blank” has been added as an allowable value for both data items when coding has not been attempted.

Alternate names were added for each field, along with revisions to the Description, Rationale, and Coding Instruction to clarify that the field uses NIOSH non-paid worker codes in addition to U.S. Census Bureau codes to improve consistency of data for research use.

TNM Path Staged By [930] and TNM Clin Staged By [990]

The length of both Staged By data items has been expanded to 2 digits to accommodate new codes.

Refer to the most recent version of FORDS for additional coding instructions. See Appendix A for the conversion crosswalk from the 1 character codes to the expanded 2 character codes.

Wording changes to accommodate EHR reporting

The data items listed in Appendix B were updated to harmonize Standards Volume II, Version 16 with data coming in from electronic health record (EHR) reporting.

SEER Coding Sys-Current and Original [2120 and 2130]

Code G was added for the use of the 2016 Coding Manual

Other Changes

Stage Transition: See section 6, Standard Setters Reporting Requirements for 2016, for detailed information and requirements. The Collaborative Stage Transition Newsletter provides communication from the standard setters regarding the transition from Collaborative Stage. The following is a link to the newsletters: <http://seer.cancer.gov/registrars/cs-tnm/>.

MCSP Reporting Requirements by Item and Facility Type~

The ‘MCSP Reporting Requirements by Item and Facility Type’ has been revised for changes in reporting requirements based upon MCSP requirements and NAACCR format version 16. A copy of the document is available on the MCSP Web page at http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_5221-16586--,00.html.

A revised copy of the MCSP Cancer Program Manual for changes in reporting requirements will be available on the MCSP Web page on or before February 1.

MCSP Staff ~

Please feel free to contact one of us if you have any questions regarding cancer reporting or if you would like more information about upcoming training/workshop opportunities.

Jetty Alverson	517-335-8855	alversong@michigan.gov
Stacey Coltrain	517-373-0758	coltrains@michigan.gov
Glenn Copeland	517-335-8677	copelandg@michigan.gov
Claudia Hardin	517-335-9967	hardinc@michigan.gov
Doug Koster	517-335-8348	kosterd@michigan.gov
Elaine Snyder	517-335-8949	snydere@michigan.gov
Georgia Spivak	517-335-8702	spivakg@michigan.gov
Mary Stephens	517-335-9403	stephensm2@michigan.gov
Wendy Stinnett	517-335-8747	stinnett@w@michigan.gov
David Westover	517-335-9624	westoverd1@michigan.gov

MCSP Cancer Program Manual and Resource References ~

The MCSP Cancer Program Manual and resource reference documents can be obtained from the MCSP webpage at http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_5221-16586--00.html.

Funding for the MCSP is made possible (in part) by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the State of Michigan Department of Health and Human Services and the U.S. Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.