



State Cancer Legislative Database

UPDATE

Issue 87 Fall 2011

The *State Cancer Legislative Database Update (SCLD Update)* is a product of the National Cancer Institute's (NCI) State Cancer Legislative Database (SCLD) Program. The *SCLD Update* presents an overview of state cancer-related legislation enacted each quarter and includes a graphic illustration that summarizes a particular topic area. The SCLD contains information synthesized from state-level laws and resolutions. The SCLD does not contain state-level regulations; executive orders; measures implemented by counties, cities, or other localities; Attorneys General opinions; or data addressing the implementation of state laws—all of which may vary significantly from the laws reported herein. Due to variations among states in the methods of identifying resolutions, potentially relevant measures from some states may not be reported. Although SCLD Program coverage of Medicaid and Medicare law is not comprehensive, some SCLD records include these data. **This issue's Legislative Data Byte highlights states with measures acknowledging ovarian cancer awareness months.**

Enacted Legislation and Adopted Resolutions: July-September 2011

BREAST CANCER

Awareness

A resolution adopted in **New Jersey** (S.R. 129) recognized the state and national observances of Breast Cancer Awareness Month during October 2011.

A **Pennsylvania** resolution (S.R. 186) recognized October 2011 as Breast Cancer Awareness Month and encouraged people to take advantage of early detection services.

See the additional summary of this resolution in the Health Disparities/Awareness and Acknowledgment section on page 2.

Screening and Treatment Reimbursement

Connecticut's S.B. 10 and S.B. 18 amend the previous requirements for coverage of breast cancer screening by individual and group health insurance policies by adding magnetic resonance imaging if a mammogram demonstrates heterogeneous or dense breast tissue based on the Breast Imaging Reporting and Data System established by the American College of Radiology.

S.B. 5800 amends **New York** law to require specified individual insurers to provide annual mammograms to women 40 years of age and older. Additionally, the law requires specified individual and group insurers, including health maintenance organizations, to provide coverage for the following screening services, not subject to annual deductibles or coinsurance: (1) mammography services that have an A or B rating in the current recommendations of the United States Preventive Services Task Force; and (2) additional preventive care and mammography screenings as provided in the state Health Resources and Services Administration's guidelines. *See the additional summary of this law in the Cervical Cancer/Screening and Treatment Reimbursement section on page 2.*

CONTENTS

Enacted Legislation and Adopted Resolutions: July-September 2011

- Breast Cancer 1
- Cancer—General.....2
- Cervical Cancer.....2
- Colorectal Cancer2
- Genetics.....2
- Health Disparities2
- Obesity Prevention.....3
- Ovarian Cancer.....4
- Prostate Cancer4
- State-of-the-Art Treatment.....4
- Tobacco Use.....4
- State Legislative Actions Related to Tobacco Settlements5
- Table of Enacted Legislation and Adopted Resolutions6
- Legislative Data Byte7

Issue 87

The *SCLD Update* is now available for electronic delivery. To sign up, please visit www.sclcd-nci.net and click on Subscribe.

CANCER—GENERAL

Awareness

A recent **California** law (S.B. 332) acknowledges that secondhand smoke has been proven to cause cancer in humans. *See the additional summary of this law in the Tobacco Use/Smoke-Free Air section on page 4.*

Recently adopted *resolutions* in **New Mexico** (S.J.M. 3a) and **Pennsylvania** (H.R. 368/S.R. 188) declared September 2011 Childhood Cancer Awareness Month.

Screening and Treatment Reimbursement

A recent **Illinois** law (H.B. 1825) requires specified individual and group insurers to ensure that: (1) the financial requirements and treatment limitations for orally-administered cancer medications are not more restrictive than those for intravenously administered or injected cancer medications; and (2) insurers do not achieve compliance by increasing financial requirements or imposing more restrictive treatment limitations on cancer medications.

Recently enacted legislation in **New York** (S.B. 3988) requires specified individual and group insurers, including health maintenance organizations, to provide coverage for prescribed, orally administered anticancer medication. The law requires insurers to apply the lower cost sharing of either the anticancer medication under the prescription drug benefit or the intravenous or injected anticancer medications. This law prohibits insurers from: (1) varying the terms of the policy to avoid compliance; (2) providing incentives to encourage insureds to accept less than the minimum protections; (3) penalizing health care practitioners for recommending or providing care in accordance with this law; (4) providing incentives to health care practitioners to induce the practitioner to provide care in a manner inconsistent with this law; or (5) achieving compliance by increasing cost sharing for an intravenous or injected anticancer medication.

CERVICAL CANCER

Screening and Treatment Reimbursement

New York's S.B. 5800 requires specified individual and group insurers to provide coverage for the following cervical screening services, not subject to annual deductibles or coinsurance: (1) items or services that have an A or B rating in the current recommendations of the United States Preventive Services Task Force; and (2) additional preventive care and cervical screenings as provided in the state Health Resources and Services Administration's guidelines. *See the additional summary of this law in the Breast Cancer/Screening and Treatment Reimbursement section on page 1.*

COLORECTAL CANCER

Screening and Treatment Reimbursement

A recent **Connecticut** law (S.B. 923) prohibits specified individual and group insurers from imposing coinsurance, copayments, deductibles, or other out-of-pocket expenses for additional colonoscopies ordered in a policy year by a physician.

GENETICS

Employment Discrimination

Recently enacted legislation in **California** (S.B. 559) makes it an unlawful employment practice for employers, labor organizations, employment agencies, and apprenticeship training programs to discriminate against a person with respect to employment, training, or membership based on a medical condition or genetic information, unless based on a bona fide occupational qualification. Employers are prohibited from subjecting individuals to genetic tests, while employers and employment agencies are prohibited from making non-job related inquiries with respect to a medical condition or genetic characteristic.

HEALTH DISPARITIES

Awareness and Acknowledgment

A recent **California** *resolution* (S.C.R. 17) acknowledges that African American men are more likely to develop prostate cancer than any other group. *See the additional summary of this resolution in the Prostate Cancer/Awareness section on page 4.*

A recently adopted *resolution* in **Pennsylvania** (H.R. 404) acknowledges that prostate cancer is more common among African American men. *See the additional summary of this resolution in the Prostate Cancer/Awareness section on page 4.*

For a summary of a Pennsylvania resolution (S.R. 178) related to health disparities awareness and acknowledgment, see the Obesity Prevention/Awareness section on page 3.

Another **Pennsylvania** *resolution* (S.R. 185) acknowledges that: (1) the chance of developing prostate cancer rises rapidly after 50 years of age, and (2) African American men are 60 percent more likely than Caucasian men to be diagnosed with prostate cancer and twice as likely to die from it. *See the additional summary of this resolution in the Prostate Cancer/Awareness section on page 4.*

A recent **Pennsylvania** *resolution* (S.R. 186) acknowledges that men are typically diagnosed with breast cancer at a late stage due to a lack of awareness that men can develop the disease. *See the additional sum-*

mary of this resolution in the *Breast Cancer/Awareness* section on page 1.

Research and Prevention

For summaries of a **District of Columbia** law (L.B. 144) related to health disparities research and prevention, see the *Obesity Prevention/Food Environment* section on page 3, the *Obesity Prevention/Reimbursable Meals* section on page 4, and the *Tobacco Use/Smoke-Free Air* section on page 4.

Newly enacted legislation in **Minnesota** (H.F. 25a) requires the state Department of Human Services to request funding for an initiative to prevent the onset of chronic disease. The law gives Medicaid funding to provide incentives to encourage healthy behavior and prevent the onset of chronic disease, in areas including tobacco cessation.

For a summary of a **New York** law (S.B. 614) related to health disparities research and prevention, see the *Obesity Prevention/Food Environment* section on page 3.

For a summary of an **Oregon** law (H.B. 2800) related to health disparities research and prevention, see the *Obesity Prevention/Food Environment* section on page 3.

A new law in **Oregon** (H.B. 3650) establishes the Oregon Integrated and Coordinated Health Care Delivery System, consisting of state policies and actions that make coordinated care organizations accountable for care management for each organization's members to reduce medical cost inflation while supporting the development of regional and community health accountability. The law requires the Oregon Health Authority to seek input from underserved communities as well as providers, coordinated care organizations, and communities to develop strategies that promote person-centered care and encourage healthy behaviors and lifestyles.

OBESITY PREVENTION

Awareness

For a summary of a **Missouri** law (H.B. 344) related to obesity prevention awareness, see the *Obesity Prevention/Food Environment* section on page 3.

A recent **Pennsylvania** resolution (S.R. 178) acknowledges that research shows that preschool and school-age children who experience severe hunger have higher levels of chronic illness. The resolution also designated September 2011 as Hunger Action Month.

Competitive Foods

For summaries of a **District of Columbia** law (L.B. 144) related to obesity prevention competitive foods, see the *Obesity Prevention/Food Environment* section on page 3, the *Obesity Prevention/Reimbursable Meals* section on

page 4, and the *Tobacco Use/Smoke-Free Air* section on page 4.

Food Environment

The **District of Columbia's** L.B. 144 requires the School Garden Program to assist public schools and public charter schools in receiving certification as United States Department of Education Green Ribbon Schools. See the additional summaries of this law in the *Obesity Prevention/Reimbursable Meals* section on page 4 and the *Tobacco Use/Smoke-Free Air* section on page 4.

A recent **Illinois** law (S.B. 1852) establishes the Farmers' Market Task Force to assist the state Department of Public Health (DPH) in implementing statewide administrative regulations for farmers' markets. The law also requires the DPH and the state Department of Agriculture, in conjunction with the Task Force, to adopt rules, including those concerning labels, sanitation, and food product safety.

A new law in **Iowa** (S.F. 509) establishes a Local Food and Farm Program and a local food and farm program fund within the state Treasury. The goals of the Program include improving communication and cooperation among: (1) farmers, food entrepreneurs, and consumers; and (2) government agencies, public universities and community colleges, organizations, and private-sector firms working on local food and farm-related issues.

A new **Missouri** law (H.B. 344) creates the Farm-to-Table Advisory Board with the mission of providing recommendations to: (1) allow schools and state institutions to incorporate locally grown agricultural products more easily into their food offerings; and (2) increase public awareness of the role that local agriculture plays in supporting healthy lifestyles.

A **New York** law (S.B. 614) allows the provision of specified financial incentives to support transportation and distribution projects that will facilitate distribution and sales of state farm products to restaurants, schools, food retailers, farmers' markets, colleges, and other institutional operations, especially in communities that lack such products.

A new law in **Oregon** (H.B. 2800) allows school districts to apply to the state Department of Education for grants for: (1) reimbursing the school district for costs incurred in purchasing state food products produced or processed in the state and used in National School Lunch Program meals; and (2) funding food-based, agriculture-based, and garden-based educational activities in school districts.

Nutrition Education

For summaries of a **District of Columbia** law (L.B. 144) related to obesity prevention nutrition education, see the *Obesity Prevention/Food Environment* section on page 3,

the *Obesity Prevention/Reimbursable Meals* section on page 4, and the *Tobacco Use/Smoke-Free Air* section on page 4.

For a summary of a **Missouri** law (H.B. 344) related to obesity prevention nutrition education, see the *Obesity Prevention/Food Environment* section on page 3.

For a summary of an **Oregon** law (H.B. 2800) related to obesity prevention nutrition education, see the *Obesity Prevention/Food Environment* section on page 3.

Reimbursable Meals

A new law in the **District of Columbia** (L.B. 144) allows private schools that include the National School Lunch Program, the School Breakfast Program, or the Summer Food Service Program to have the option of participating in the Healthy Schools Program. The law also requires schools to provide at least 30 minutes for students to eat lunch and sufficient time for every student to pass through the food service line. See the *additional summaries of this law in the Obesity Prevention/Food Environment* section on page 3 and the *Tobacco Use/Smoke-Free Air* section on page 4.

For a summary of an **Oregon** law (H.B. 2800) related to obesity prevention reimbursable meals, see the *Obesity Prevention/Food Environment* section on page 3.

Research

For a summary of a **Missouri** law (H.B. 344) related to obesity prevention research, see the *Obesity Prevention/Food Environment* section on page 3.

State Capacity

For a summary of an **Illinois** law (S.B. 1852) related to obesity prevention state capacity, see the *Obesity Prevention/Food Environment* section on page 3.

For a summary of an **Iowa** law (S.F. 509) related to obesity prevention state capacity, see the *Obesity Prevention/Food Environment* section on page 3.

For a summary of a **Missouri** law (H.B. 344) related to obesity prevention state capacity, see the *Obesity Prevention/Food Environment* section on page 3.

OVARIAN CANCER

Awareness

A resolution in **California** (A.C.R. 81) designates September of every year as Ovarian Cancer Awareness Month.

Resolutions in **Michigan** (H.R. 123) and **Pennsylvania** (H.R. 401) declared September 2011 as Ovarian Cancer Awareness Month.

PROSTATE CANCER

Awareness

A recently adopted resolution in **California** (S.C.R. 17) designated September 2011 as Prostate Cancer Awareness Month. See the *additional summary of this resolution in the Health Disparities/Awareness and Acknowledgment* section on page 2.

Two recent **Pennsylvania** resolutions (H.R. 404 and S.R. 185) designated September 2011 as Prostate Cancer Awareness Month. See the *additional summaries of these resolutions in the Health Disparities/Awareness and Acknowledgment* section on page 2.

Screening and Treatment Reimbursement

A recent **Connecticut** law (S.B. 396) requires specified individual and group insurers to provide coverage for prostate cancer treatment, provided such treatment is in accordance with the guidelines of the National Comprehensive Cancer Network, the American Cancer Society, or the American Society of Clinical Oncology.

STATE-OF-THE-ART TREATMENT

Clinical Trials

Recently enacted **Connecticut** legislation (S.B. 21) adds to the list of clinical trials eligible for coverage of routine patient care costs those trials qualified to receive Medicare coverage of such costs under the Medicare Clinical Trial Policy.

Recently enacted legislation in **Illinois** (H.B. 1191) prohibits specified individual and group insurers from excluding coverage for routine patient care administered to an individual participating in a qualified clinical cancer trial, if the policy covers that same routine patient care of insureds not enrolled in a trial. Coverage must be subject to all terms, conditions, restrictions, exclusions, and limitations that apply to those not enrolled in a trial.

TOBACCO USE

Public/Professional Education

For a summary of a **Minnesota** law (H.F. 25a) related to tobacco use public/professional education, see the *Health Disparities/Research and Prevention* section on page 3.

Smoke-Free Air

A new law in **California** (A.B. 426) adds additional agencies to the list of local authorities that may enact and enforce ordinances related to smoking in or on a public transportation facility or vehicle for which the locality has jurisdiction.

A recent **California** law (S.B. 332) allows residential landlords to prohibit smoking or using tobacco products on the property or inside or outside of the building. Beginning in 2012, leases must include a provision specifying the areas where smoking is prohibited. *See the additional summary of this law in the Cancer—General/Awareness section on page 2.*

Another law in **California** (S.B. 796) prohibits a person from delivering tobacco products to a patient in a state hospital if the hospital bans such products. Notice of this law must be posted at the facility, and penalties are specified for violations.

A recent **District of Columbia** law (L.B. 144) prohibits tobacco products on the premises of public schools and at off-campus, school-sponsored events. *See the additional summaries of this law in the Obesity Prevention/Food Environment section on page 3 and the Obesity Prevention/Reimbursable Meals section on page 4.*

New York's A.B. 5516 prohibits smoking in the outdoor ticketing, boarding, and platform areas of railroad stations operated by the state Metropolitan Transportation Authority. Penalties are specified for the violation of this law.

Tobacco Access by Minors

A new law in **New York** (A.B. 6037) prohibits the selling to or possession of shisha and tobacco paraphernalia by persons under 18 years of age and requires tobacco businesses to post such a notice. The law adds shisha to the list of tobacco products: (1) that persons who appear to be under the age of 25 are required to show photographic identification in order to purchase; (2) on which sellers may perform a transaction scan; and (3) that must not be sold or displayed unless they are stored either behind a counter in an area accessible only by personnel or in a locked container. Penalties are specified for the violation of this law.

Treatment Reimbursement

Recently enacted legislation in **Illinois** (S.B. 673) requires specified group insurers, including health maintenance organizations, to offer, for an additional premium, optional coverage of up to \$500 annually for a tobacco use cessation program. The coverage must be subject to other general policy limitations. Insurers are prohibited from penalizing providers or furnishing them with incentives to induce the provision of care in a manner inconsistent with this law.

**State Legislative Actions Related to Tobacco Settlements
(July through September 2011)**

State	Measure Number	ENACTED LEGISLATION ¹		Provides penalties for manufacturers who fail to comply with tobacco settlement terms
		Fund Establishment		
		Establishes or modifies fund(s) to receive revenues from state tobacco settlements	Specifies intended uses of tobacco settlement monies ²	
Oregon	H.B. 5045	•	H, O, U	
Totals	1	1	TC=0 TG=0 C=0 H=1 O=1 U=1	0

¹ Does not include appropriations legislation.

² Intended uses of tobacco settlement monies specified:

TC=Tobacco Control, TG=Tobacco Growers, C=Cancer, H=Health, O=Other, U=Unspecified

Table of Enacted Legislation and Adopted Resolutions, 3rd Quarter, 2011

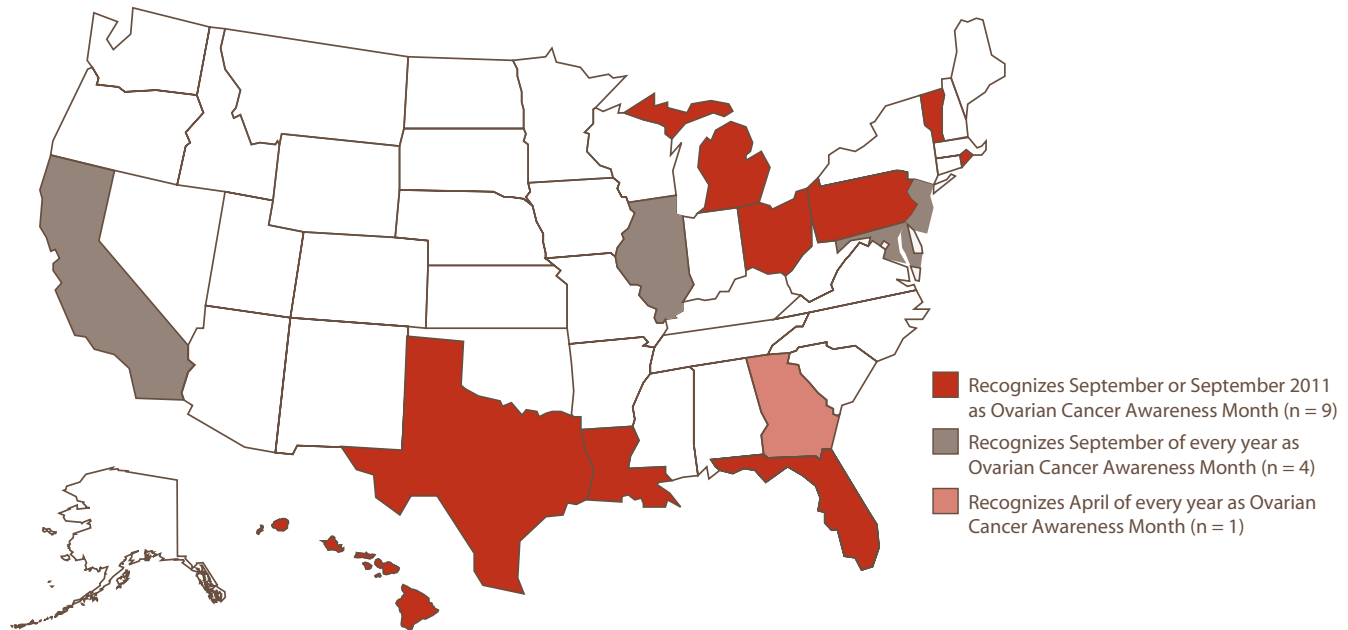
State	Measure No.	Content Area
California	A.B. 426	Tobacco Use/Smoke-Free Air
	A.C.R. 81	Ovarian Cancer/Awareness
	S.B. 332	Cancer—General/Awareness
		Tobacco Use/Smoke-Free Air
	S.B. 559	Genetics/Employment Discrimination
	S.B. 796	Tobacco Use/Smoke-Free Air
	S.C.R. 17	Health Disparities/Awareness and Acknowledgment
		Prostate Cancer/Awareness
Connecticut	S.B. 10 and S.B. 18	Breast Cancer/Screening and Treatment Reimbursement
	S.B. 21	State-of-the-Art Treatment/Clinical Trials
	S.B. 396	Prostate Cancer/Screening and Treatment Reimbursement
	S.B. 923	Colorectal Cancer/Screening and Treatment Reimbursement
District of Columbia	L.B. 144	Health Disparities/Research and Prevention
		Obesity Prevention/Competitive Foods
		Obesity Prevention/Food Environment
		Obesity Prevention/Nutrition Education
		Obesity Prevention/Reimbursable Meals
		Tobacco Use/Smoke-Free Air
Illinois	H.B. 1191	State-of-the-Art Treatment/Clinical Trials
	H.B. 1825	Cancer—General/Screening and Treatment Reimbursement
	S.B. 1852	Obesity Prevention/Food Environment
		Obesity Prevention/State Capacity
	S.B. 673	Tobacco Use/Treatment Reimbursement
Iowa	S.F. 509	Obesity Prevention/Food Environment
		Obesity Prevention/State Capacity
Michigan	H.R. 123	Ovarian Cancer/Awareness
Minnesota	H.F. 25a	Health Disparities/Research and Prevention
		Tobacco Use/Public/Professional Education
Missouri	H.B. 344	Obesity Prevention/Awareness
		Obesity Prevention/Food Environment
		Obesity Prevention/Nutrition Education
		Obesity Prevention/Research
		Obesity Prevention/State Capacity
New Jersey	S.R. 129	Breast Cancer/Awareness
New Mexico	S.J.M. 3a	Cancer—General/Awareness
New York	A.B. 5516	Tobacco Use/Smoke-Free Air
	A.B. 6037	Tobacco Use/Tobacco Access by Minors
	S.B. 3988	Cancer—General/Screening and Treatment Reimbursement
	S.B. 5800	Breast Cancer/Screening and Treatment Reimbursement
		Cervical Cancer/Screening and Treatment Reimbursement
	S.B. 614	Health Disparities/Research and Prevention
		Obesity Prevention/Food Environment
Oregon	H.B. 2800	Health Disparities/Research and Prevention
		Obesity Prevention/Food Environment
		Obesity Prevention/Nutrition Education
		Obesity Prevention/Reimbursable Meals
		Obesity Prevention/State Capacity
	H.B. 3650	Health Disparities/Research and Prevention
	H.B. 5045	Tobacco Use/Settlement Funds
Pennsylvania	H.R. 368/S.R. 188	Cancer—General/Awareness
	H.R. 401	Ovarian Cancer/Awareness
	H.R. 404	Health Disparities/Awareness and Acknowledgment
		Prostate Cancer/Awareness
	S.R. 178	Health Disparities/Awareness and Acknowledgment
		Obesity Prevention/Awareness
	S.R. 185	Health Disparities/Awareness and Acknowledgment
		Prostate Cancer/Awareness
	S.R. 186	Breast Cancer/Awareness
		Health Disparities/Awareness and Acknowledgment

Legislative Abbreviations

A.B.	Assembly Bill	H.R.	House Resolution	S.F.	Senate File
A.C.R.	Assembly Concurrent Resolution	L.B.	Legislative Bill	S.J.M.	Senate Joint Memorial
H.B.	House Bill	S.B.	Senate Bill	S.R.	Senate Resolution
H.F.	House File	S.C.R.	Senate Concurrent Resolution		

Legislative Data Byte

States with Measures Recognizing Ovarian Cancer Awareness Month (adopted/enacted as of September 30, 2011)



Ovarian cancer is the fifth leading cause of cancer-related death among women in the United States and accounts for more deaths than any other cancer of the female reproductive system.¹ It is estimated that in 2011, there will be 21,990 new cases diagnosed and 15,460 deaths caused by ovarian cancer.²

Postmenopausal women are most often affected by ovarian cancer, with approximately half of all women diagnosed over the age of 63.³ Several factors increase a woman's risk for developing ovarian cancer, including: a family history of ovarian cancer; a personal history of cancer of the breast, uterus, colon, or rectum; increasing age; or not having children.^{4,5} Some studies indicate that factors such as hormonal therapy and obesity may also increase risk. White women have higher incidence and mortality rates than women of other racial and ethnic groups.¹

Currently there is a lack of adequate ovarian cancer screening tests. As a result, patients often are diagnosed at an advanced stage.¹ On September 1, 2011 a Presidential proclamation declared September 2011 National Ovarian Cancer Awareness Month. The proclamation aims to raise awareness about ovarian cancer and to advance screening and treatment capabilities.⁶

Awareness has also been increased on the state level by the adoption of ovarian cancer related resolutions. As of September 30, 2011, nine states — **Florida, Hawaii, Louisiana, Michigan, Ohio, Pennsylvania, Rhode Island, Texas, and Vermont** — had passed

resolutions designating September as Ovarian Cancer Awareness Month. Some states have designated one month of every year as Ovarian Cancer Awareness Month. For example, **California** and **Maryland** designate September, and **Georgia** designates April, as annual ovarian cancer awareness months. Although most states adopt resolutions to raise awareness, two states—**Illinois** and **New Jersey**—have enacted laws designating annual ovarian cancer awareness months. In addition, legislators in **Hawaii** and **New Mexico** have adopted resolutions that designate gynecological cancer awareness months.

1. National Cancer Institute. A Snapshot of Ovarian Cancer. <http://www.cancer.gov/aboutnci/servingpeople/snapshots/ovarian.pdf>
2. National Cancer Institute. Ovarian Cancer. <http://www.cancer.gov/cancertopics/types/ovarian>
3. American Cancer Society. Ovarian Cancer Overview. <http://www.cancer.org/Cancer/OvarianCancer/DetailedGuide/ovarian-cancer-risk-factors>
4. National Cancer Institute. What You Need to Know About Ovarian Cancer. <http://www.cancer.gov/cancertopics/wyntk/ovary/page4>
5. American Cancer Society. Ovarian Cancer: What are the Risk Factors? <http://www.cancer.org/Cancer/OvarianCancer/DetailedGuide/ovarian-cancer-risk-factors>
6. The White House. Office of the Press Secretary. Presidential Proclamation--National Ovarian Cancer Awareness Month. <http://www.whitehouse.gov/the-press-office/2011/09/01/presidential-proclamation-national-ovarian-cancer-awareness-month>

The SCLD contains information synthesized from state-level laws and resolutions. The SCLD does not contain state-level regulations; executive orders; measures implemented by counties, cities, or other localities; opinions of Attorneys General; or data addressing the implementations of state laws—all of which may vary from the laws reported herein.

ABOUT SCLD

The SCLD Program maintains a database of state cancer-related legislation and serves as an important resource for research and analysis of cancer-related health policy. The SCLD Program also monitors the role of state legislation in public health and the application of cancer control science. Because of the volume of enacted laws, minor amendments to laws are not reported. Information about state legislative actions related to cancer prevention and control is provided through the *SCLD Update*, the SCLD Program Web site, and the National Cancer Institute's Cancer Information Service (1-800-4-CANCER).

VISIT THE SCLD WEB SITE

Visit the SCLD Program Web site at www.sclد-nci.net and select "Search Databases" to access more than 8,000 abstracts of enacted laws and adopted resolutions. While you are there, view additional Web site features and sign up for e-mail notification of Web site updates.

The SCLD Program Web site also includes a brief overview of the SCLD Program; access to fact sheets and current and archived editions of the *SCLD Update*; data and information related to the tobacco ratings project; copies of SCLD presentations; and contacts and e-mail addresses for additional information. In addition, links are provided to the Web sites of the National Institutes of Health, the National Cancer Institute (NCI), and NCI's Office of Government and Congressional Relations.

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