

## Privacy: De-identified Data

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**KEY TERMS:** Authorization, De-identified Data, HIPAA, PHI

### **I. PURPOSE:**

This policy outlines the process to properly de-identify protected health information for use and disclosure without patient authorization, in accordance with applicable state and federal laws and regulations, ensuring there is no reasonable basis to believe that the information can be used to identify patients.

### **II. SCOPE:**

This policy applies to all Carilion Clinic entities that maintain protected health information and their workforces. This policy does not apply to the following entities and their associated workforces: Carilion Wellness, MedKey and associated revenue agents.

### **III. DEFINITIONS:**

**Access:** The ability or means necessary to read, write, modify or communicate protected health information.

**Authorization:** Permission granted by a patient, or authorized representative, to use or disclose the patient's protected health information.

**De-identified Data:** Health information that does not identify an individual and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual. HIPAA defines which data must be excluded to be considered de-identified.

**Disclosure:** The release, transfer, provision of access to, or divulgence in any other manner of protected health information outside of Carilion Clinic.

**HIPAA:** The federal Health Insurance Portability and Accountability Act of 1996, as amended, and its implementing regulations, including, but not limited to, its Privacy and Security Rules.

**Individual:** The person who is the subject of the protected health information.

**Protected Health Information (PHI):** Individually identifiable health information created, received, or maintained by Carilion Clinic. This includes information related to the past, present, or future physical or mental health/condition of an individual; the provision of health care to an individual; and the past, present or future payment for the provision of health care to an individual.

**Use:** The sharing, employment, application, utilization, examination or analysis of PHI within Carilion Clinic.

#### **IV. PROCEDURE:**

**A. Use and Disclosure of De-identified Protected Health Information (PHI):** PHI that is fully de-identified in accordance with HIPAA may be accessed, used and disclosed without patient authorization.

**B. De-identification Requirements:** The following two (2) methods of de-identification are the *only* acceptable methods of de-identifying PHI:

##### **1. Method 1: De-identification of PHI by meeting the Safe-Harbor requirements**

De-identifying PHI by means of the Safe Harbor method requires **ALL** of the following eighteen (18) identifiers of the individual or of relatives, employers, or household members of the individual, to be removed in their entirety prior to the access, use and disclosure of the information:

- a. Names;
- b. All geographic subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code if, according to the current publicly available data from the Bureau of the Census:
  - i. The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; and
  - ii. The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000.
- c. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older;
- d. Telephone numbers;
- e. Fax numbers;

- f. Electronic mail addresses;
- g. Social security numbers;
- h. Medical record numbers;
- i. Health plan beneficiary numbers;
- j. Account numbers;
- k. Certificate/license numbers;
- l. Vehicle identifiers and serial numbers, including license plate numbers;
- m. Device identifiers and serial numbers;
- n. Web Universal Resource Locators (URLs);
- o. Internet Protocol (IP) address numbers;
- p. Biometric identifiers, including finger and voice prints;
- q. Full face photographic images and any comparable images; and
- r. Any other unique identifying number, characteristic, or code.

## 2. **Method 2: De-identification of PHI by Expert Determination**

In order to de-identify PHI by means of the Expert Determination method the following process must be followed:

A member of the Carilion Clinic health analytics team with appropriate education, knowledge, skills and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable, does the following:

- a. Applies appropriate statistical and scientific principles and methods, determining that the risk is very small that the information could be used, alone or in combination with other reasonably available information to identify the individual; and
- b. Documents the methods and results of the analysis that justify such determination

**C. Re-Identification of De-identified Data**

A code or other means of record identification may be assigned to allow previously de-identified information to be re-identified, provided that:

1. **Derivation.** The code or mechanism used to re-identify information may not be derived from information related to the individual or otherwise information that could be translated to identify the individual; and
2. **Security.** Carilion Clinic is prohibited from using or disclosing the code or other means of record identification (i.e. tables, codes or algorithms) for any purpose other than to re-identify the de-identified data.

Once de-identified data has been re-identified, the health information reverts back to PHI status and is subject to the privacy and security protections of applicable federal and state laws and regulations.

- D. **Review of De-identified Data:** The Carilion Clinic Privacy and Information Security Office should review all planned external access, use and disclosure of PHI that is considered de-identified prior to implementing the plans to ensure the data meets the de-identification standards.

**V. OTHER ISSUES / CONCERNS:**

References:

1. 45 CFR § 160.103 - Definitions
2. 45 CFR § 164.514 - Other requirements relating to uses and disclosures of protected health information

**Approvals**

Name	Title	Dept./Committee	Date
Vicki Clevenger	VP, Compliance & Audit, Chief Compliance & Privacy Officer	Organizational Integrity & Compliance	1/23/19