Policy:

- The Division may create de-identified Protected Health Information (PHI) in response to a request for such information. Some examples are:

  - Utilization Reviews
  - Program Evaluations
  - Individual Case Studies
  - Training Purposes

- Qualified program evaluation personnel or designee must closely supervise any PHI de-identification process. To qualify, the individual supervising the process, shall have appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable.

- The Division will not use or disclose the code or other means of record identification or mechanism used to re-identify PHI for any other purpose than the following within the Division internal operations:

  - Facilities Directories
  - Master List

- The Division will not disclose de-identified PHI if the employees responsible for the de-identification process have actual knowledge the information could be used alone or in combination with other information to identify an individual who is a subject of the information.

Purpose:

Federal law allows certain health care organizations that use or disclose PHI to create de-identified PHI. That is, information which has been stripped of any elements that may identify the individual, such as name, birth date, or social security number. Occasionally, the Division may use de-identified PHI for various purposes such as utilization research, while ensuring administrative and technical processes are in place to de-identity PHI properly, as well as to secure any methods of re-identification.

Procedures:

I. The program evaluation personnel or designee in conjunction with the HIPAA Compliance Officer will make decisions as to whether PHI should be de-identified.

II. Document and retain records, including the reason for the request, any time PHI is de-identified and distributed.

III. Ensure a Limited Data Set Use Agreement has been signed by all relevant parties.

IV. To create de-identified PHI, ensure the following individually identifying elements are removed from the data:

A. Names;

B. All elements of dates (except year) for dates directly related to an individual, including:
   1. Birth date
   2. Admission date
   3. Discharge date
   4. Date of death
   5. All ages over 89
   6. All elements of dates (including year) indicative of age 89, except that such ages and elements may be aggregated into a single category of age 90 or older;

C. Telephone numbers;

D. Fax numbers;

E. Electronic mail addresses;

F. Social security numbers;

G. Medical record numbers;

H. Health plan beneficiary numbers;

I. Account numbers;

J. Certificate/license numbers;

K. Vehicle identifiers and serial numbers, including license plate numbers;

L. Device identifiers and serial numbers;

M. Web Universal Resource Locators (URLs);

N. Internet Protocol (IP) address numbers;

O. Biometric identifiers, including finger and voiceprints;

P. Full-face photographic images and any comparable images;

Q. All geographic subdivisions smaller than a State, including
   1. Street address
   2. City
   3. County
   4. Precinct
   5. Zip code, and their equivalent geocodes

R. Any other unique identifying number, characteristic, or code; other than a code assigned to a record to permit the Division to re-identify the PHI;

S. The initial three digits of a zip code may be used if, according to the current publicly available data from the Bureau of the Census:
   1. The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; and
   2. The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people are changed to 000).

V. Use the following process for the purposes of removing identifying elements from PHI:

A. Technical Specifications

VI. In order to disclose PHI where any of the above listed identifiers remain, program evaluation personnel must:

A. Determine the risk is very small that the information could be used, alone or in combination with other reasonably available information, by someone receiving it, to identify an individual who is a subject of the information; and

B. Document the methods and results of the analysis that justify such determination.

VII. The code or other means of record identification used to re-identify information, will not be derived from or related to information about the individual and should not otherwise be capable of being translated so as to identify the individual.

VIII. Each Division agency shall develop specific written procedures to implement the provisions of this policy or shall incorporate this policy into their agency policies.

Administrator

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Date Approved by MHDS Commission: