

Partners in Recovery

POLICY AND
STANDARDS

Applicable Arizona Department of Health Services Behavioral Health Rule(s):

R9-20-211 Client Records and R9-21-209 Records

Policy Name: Limited Data Set and De-identification of Protected Health Information (PHI)

Policy Number: REC - 0009

H.M. Gilbert Jr., Executive Directory, PIR

Date

Cross Reference(s)

None

Policy Statement

Partners in Recovery Direct Care Clinics (DCC) may in accordance with state and federal law use or disclose a limited data set for specific activities without authorization from the member. Wherever possible, DCC use de-identified information in place of information containing individual identifiers.

Purpose

The purpose of this policy is to describe DCC's positions on the use of limited data sets and de-identified information.

Scope

Partners in Recovery Direct Care Clinics.

Key Terms

Should the reader need to inquire as to the definition of a term used in this policy, the Partners in Recovery Key Term Glossary can be found in the back of the Policy and Procedure Manual.

Standards

- I. Limited Data Sets
 - A. A limited data set is PHI that excludes the following direct identifiers of the member or of relatives, employers, or household members of the member:
 - 1. Names;
 - 2. Postal address information, other than town or city, state, and zip code;
 - 3. Telephone numbers;
 - 4. Fax numbers;
 - 5. Electronic mail addresses;
 - 6. Social security numbers;
 - 7. Medical record numbers;
 - 8. Health plan beneficiary numbers;
 - 9. Account numbers;
 - 10. Certificate/license numbers;
 - 11. Vehicle identifiers and serial numbers, including license plate numbers;
 - 12. Device identifiers and serial numbers;
 - 13. Web Universal Resource Locators (URLs);

14. Internet Protocol (IP) address numbers;
 15. Biometric identifiers, including finger and voice prints; and
 16. Full face photographic images and any comparable images.
- B. DCC may use or disclose a limited data set only for the purposes of research, public health, or health care operations.
- C. DCC may use PHI to create a limited data set, or discloses PHI only to a Business Associate (BA) for such purpose, whether or not the limited data set is to be used by DCC.
- D. DCC may use or disclose a limited data set only if DCC obtains satisfactory assurance, in the form of a data use agreement, that the limited data set recipient will only use or disclose the PHI for limited purposes. A data use agreement between DCC and the limited data set recipient must:
1. Establish the permitted uses and disclosures of PHI by the recipient, consistent with Standard I.C. above;
 2. The data use agreement may not authorize the recipient of the limited data set to use or further disclose the information in a manner that would violate federal HIPAA privacy requirements, if done by DCC;
 3. Establish who is permitted to use or receive the limited data set; and
 4. Provide that the limited data set recipient will:
 - a) Not use or further disclose the information other than as permitted by the data use agreement or as otherwise required by law;
 - b) Use appropriate safeguards to prevent use or disclosure of the information other than as provided for by the data use agreement;
 - c) Report to DCC any use or disclosure of the information not provided for by its data use agreement of which it becomes aware;
 - d) Ensure that any agents, including a subcontractor, to whom it provides the limited data set agrees to the same restrictions and conditions that apply to the limited data set recipient with respect to such information; and
 - e) Not re-identify the information or contact the members.
- E. If DCC know of a pattern of activity or practice of the limited data set recipient that constitutes a material breach or violation of the data use agreement, DCC takes reasonable steps to cure the breach or end the violation, as applicable, and, if such steps are unsuccessful:
1. Discontinues disclosure of PHI to the recipient; and
 2. Reports the problem to the Secretary of the Department of Health and Human Services.

II. De-identified Information

- A. DCC may determine that health information which does not identify a member and with respect to which there is no reasonable basis to believe it can be used to identify a member is not individually identifiable health information, and therefore is not PHI. The following conditions must be present for DCC to make such a determination:
1. A person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable:
 - a) Applying these principles and methods, determines that the risk is very small that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify a member who is a subject of the information; and,
 - b) Documents the methods and results of the analysis that justify the determination; or,
 2. All identifiers of the member or relatives, employers, or household members of the member are removed, including those listed in Standard I.A. above in addition to the following:
 - a) All geographic subdivisions smaller than a state, including street address, city, county, precinct, zip code, and their equivalent geo-codes, 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 geographic units containing 20,000 or fewer people are changed to 000.
 - b) 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 age, except that such ages and elements may be aggregated into a single category of age 90 or older;
 - c) Any other unique identifying number, characteristic, or code; and
 3. DCC do not have actual knowledge that the information could be used alone or in combination with other information to identify a member who is a subject of the information.
- B. Arizona law permits disclosure of information to human rights committees established pursuant to Title 41, chapter 35 provided that the information has been de-identified as described in this policy. If the human rights committee requires unredacted PHI for the official purposes of the human rights committee, and demonstrates that the information is necessary to perform a function related to the oversight of the behavioral health

system, the PHI may be disclosed pursuant to the *Uses & Disclosures Requiring No Permission From the Member* policy regarding health oversight agencies.

- III. DCC may assign a code or other means of record identification to allow information de-identified under this section to be re-identified by DCC, provided that:
 - A. The code or other means of record identification is not derived from or related to information about the member and is not otherwise capable of being translated so as to identify the member; and
 - B. DCC does not use or disclose the code or other means of record identification for any other purpose, and does not disclose the mechanism for re-identification.
- IV. Disclosure of a code or other means of record identification designed to enable coded or otherwise de-identified information to be re-identified constitutes disclosure of PHI.
- V. If de-identified information is re-identified, DCC may use or disclose re-identified information only as permitted or required by Partners in Recovery policies.

Associated Partners in Recovery Direct Care Clinics Forms & Attachments

None

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