

	PCHP HIPAA Privacy and Confidentiality Piedmont Community Health Plan	
	Name:	PCHP.PV.108 De-Identification of Protected Health Information PHI
	ID Number:	PCHP.PV.108
	Start Date:	02/01/2016
	Approval Date:	07/15/2016
	Review Date:	07/15/2018
	Approved By:	Garland Morton/CentraNotes

Body

Policy Name: De-Identification of Protected Health Information

Scope: Entire Piedmont workforce

Purpose: To provide a process to convert individually identifiable Protected Health Information (PHI) into information that no longer reveals the identity of any beneficiary.

Definitions & Acronyms:

CMS: Centers for Medicare & Medicaid

CFR: Code of Federal Regulations

PBM: Pharmacy Benefit Manager

HIPAA: Health Insurance Portability and Accountability Act of 1996

HITECH: Health Information Technology for Economic and Clinical Health Act

PHI: Protected Health Information

DRS: Designated Record Set

De-identification Process: The conversion process by which protected health information is converted into a format that does not identify the individual. De-Identification is required when individual PHI is used or disclosed for purposes other than treatment, payment or health care operation and/or without member or personal representative authorization. The HIPAA Privacy Rule does not apply to de-identified health information.

Piedmont: "Piedmont" collectively refers to Piedmont Community Health Plan (PCHP), Piedmont Community HealthCare (PCHC) and any future entities that are owned, affiliated with and/or operated by Piedmont.

Policy:

1. Piedmont will convert PHI into a format that does not identify the member (de-identify) when:
 - A. PHI is used or shared for purposes other than treatment, payment or health care operations, or
 - B. Information is used or shared without member authorization.
2. When necessary, Piedmont will have methods in place to re-identify PHI that has been de-identified.

Procedures:

1. Piedmont will de-identify the PHI by one of the following Methods
 - A. Elimination of all identifiers (Safe Harbor Method §164.514(b)(2))
 - 1). Names.
 - 2). 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 the

geographic area contains more than 20,000 people. If less than 20,000 people are found to be in this area based on the first 3 digits of the zip code, the code must be changed to 000.

- 3). All elements of dates (except year) for date directly related to a member 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.
- 4). Telephone numbers.
- 5). Fax numbers.
- 6). Email addresses.
- 7). Social security numbers.
- 8). Medical Record numbers.
- 9). Health plan beneficiary numbers.
- 10). Account numbers.
- 11). Certificate/license numbers.
- 12). Vehicle identifiers and serial numbers, including license plate numbers.
- 13). Device identifiers and serial numbers.
- 14). Web Universal Resource Locators (URLs)
- 15). Internet protocol (IP) address numbers.
- 16). Biometric identifiers, including finger and voiceprints.
- 17). Full face photographic images and any comparable images.
- 18). Any other unique identifying number, characteristic or code.

NOTE: In addition to removing the above identifiers, Piedmont must 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. Statistical De-identification (Expert Determination Method §164.514(b)(1))

A person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable applies such principles and determines that the risk is very small that the information could be used to identify the member. The method and the results of the analysis must be documented.

2. Re-Identification: Piedmont may assign a code that would allow the information to be re-identified by Piedmont as long as the code 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. Piedmont must not use or disclose the code or any other means of record identification for any other purpose and must not disclose the mechanism for re-identification.

Equipment: None

Forms and Letters: None

Reference(s): 45 CFR §164.514(a), (b) and (c)(1/25/13); The De-Identification Standard (hhs.gov 1/23/14)

Interdisciplinary Review: None

Policy History:

Date	Revision No.	Reason for Change	Sections Affected
09/23/2013	NEW		All
02/01/2016	1.1	Converted to Centra Format	

07/05/2016	2.0	<ul style="list-style-type: none">• Reviewed for compliance with phase 2 audit protocol• Added a re-identification policy statement	
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