



Oklahoma State University

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| Title: Requirements for De-Identification of Protected Health Information | Policy #: PRV-07.01 |
| Category: HIPAA Compliance | Authority: 45 CFR § HIPAA SECTION: 164.514(a) |
| Standard: De-Identification of Protected Health Information | Responsibility: Health Care Components |
| Effective Date: 4/14/2003 | Page 1 of 3 |
| Approved By: OSU Legal Counsel | Revised: 7/1/2013 |

PURPOSE:

To establish what requirements OSU must follow in regards to De-Identification of protected health information.

POLICY:

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 is not individually identifiable health information. §164.514(a)

OSU may determine that health information is not individually identifiable health information only if: §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: §164.514(b)(1)
 - a. Applying such 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 an individual who is a subject of the information; and §164.514(b)(1)(i)
 - b. Documents the methods and results of the analysis that justify such determination; or §164.514(b)(1)(ii)
2. The following identifiers of the individual or of relatives, employers, or household members of the individual, are removed: §164.514(b)(2)(i)
 - a. Names §164.514(b)(2)(i)(A)
 - 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: §164.514(b)(2)(i)(B)
 - i. The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; and §164.514(b)(2)(i)(B)(1)



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- ii. The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000. *§164.514(b)(2)(i)(B)(2)*
 - 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; *§164.514(b)(2)(i)(C)*
 - d. Telephone numbers; *§164.514(b)(2)(i)(D)*
 - e. Fax numbers; *§164.514(b)(2)(i)(E)*
 - f. Electronic mail addresses; *§164.514(b)(2)(i)(F)*
 - g. Social security numbers; *§164.514(b)(2)(i)(G)*
 - h. Medical record numbers; *§164.514(b)(2)(i)(H)*
 - i. Health plan beneficiary numbers; *§164.514(b)(2)(i)(I)*
 - j. Account numbers; *§164.514(b)(2)(i)(J)*
 - k. Certificate/license numbers; *§164.514(b)(2)(i)(K)*
 - l. Vehicle identifiers and serial numbers, including license plate numbers; *§164.514(b)(2)(i)(L)*
 - m. Device identifiers and serial numbers; *§164.514(b)(2)(i)(M)*
 - n. Web Universal Resource Locators (URLs); *§164.514(b)(2)(i)(N)*
 - o. Internet Protocol (IP) address numbers; *§164.514(b)(2)(i)(O)*
 - p. Biometric identifiers, including finger and voice prints; *§164.514(b)(2)(i)(P)*
 - q. Full face photographic images and any comparable images; and *§164.514(b)(2)(i)(Q)*
 - r. Any other unique identifying number, characteristic, or code, except as permitted by the PRV-07.02 Re-Identification Policy; and *§164.514(b)(2)(i)(R)*
3. OSU does not have actual knowledge that the information could be used alone or in combination with other information to identify an individual who is a subject of the information.
§164.514(b)(2)(ii)

PROCEDURE:

In the course of needing to de-identify protected health information, OSU and its agents shall utilize either one of the following methods:

1. Use Expert Determination as mentioned in paragraph 1 of this policy. This method will also apply statistical or scientific principles in the process. This method, in theory, will allow a very small risk that anticipated recipient could identify an individual.



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2. Meet the Safe Harbor requirements as identified in paragraph 2 of this policy. All 18 types of identifiers shall be removed and No actual knowledge of residual information can be used to identify an individual.

Once information has been “de-identified” it is no longer considered “Protected Health Information” and may be used and disclosed without any authorization or without worry for any recourse. As long as the information remains in a de-identified state, the information may be disseminated and used or disclosed according to the need of the OSU agent who has de-identified the data.

Any information that is disclosed that has not been properly de-identified should be considered possibly inappropriate and the breach notification rules need to be followed to make an official determination.

REFERENCE:

Guidance Regarding Methods for De-Identification of Protected Health Information in Accordance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule; Sept 4, 2012.