



Los Angeles County Department of Health Services

Policy & Procedure Title:		De-Identification of Protected Health Information/Limited Data Sets	
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Distribution: DHS-wide <input checked="" type="checkbox"/>		If not DHS-wide, other distribution:	

PURPOSE:

To protect the privacy of patient health information by removing information that is individually identifiable when it is not necessary for the purpose in which the information is being used or disclosed.

To establish requirements for de-identification and re-identification of Protected Health Information (PHI) as well as the creating and use of limited data sets.

POLICY:

It is the policy of DHS to set forth requirements for de-identification and re-identification of PHI. PHI is de-identified when the identifiers listed below (Procedure: Section I-A-B) have been removed and there is no basis to believe the information can be used to re-identify the individual. De-identified information is not PHI.

Unless otherwise restricted or prohibited by other federal or state law, DHS can use an share information as appropriate for work of DHS, without further restriction, if DHS or another entity has taken steps to de-identify the information consistent with the requirements and restrictions this policy.

DHS may use or disclose a limited data set that meets the requirements of this Policy, if DHS enters into a data use agreement with the limited data set recipient (or with data source, if DHS will be the recipient of the limited data set) in accordance with the requirements of this Policy.

The mission of the Los Angeles County Department of Health Services is to ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

PROCEDURES:**I. Requirements for De- Identification of PHI**

A. PHI may be de-identified by removing nineteen (19) specific identifiers of the individual or of the relatives, employers or household members of the individual, provided the entity does not have knowledge that the information could be used alone or in combination with other information to identify the individual, who is the subject of the information. The nineteen (19) specific identifiers are:

1. Names
2. All geographic subdivisions smaller than a state including:
 - a. Street Address
 - b. City
 - c. County
 - d. Precinct
 - e. Zip code and equivalent geocode except if the initial 3 digits of a zip code:
 - i. Represents a geographic unit in which combining all zip codes with the same initials contains more than 20,000 people, and
 - ii. The initial 3 digits of a zip code for all such geographic units containing 20,000 or fewer people are changed to "000"
3. All elements of dates (except year) directly related to an individual including:
 - a. Birth date
 - b. Admission date
 - c. Discharge date
 - d. Date of death, and
 - e. All ages over 89 (including data elements indicative of such age (including year), except when all ages of 90 or older can be aggregated into a single category).
4. Telephone numbers
5. Fax numbers
6. E-mail 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 plant numbers)
13. Device identifiers and serial numbers
14. Web Universal Resource Locators (URLs)
15. Internal Protocol (IP) Address numbers

16. Biometric identifiers, including finger/voice prints
17. Full face photographic images and any comparable images
18. Any other unique identifying number, characteristic or code, except for a code or other means of re-identification as described in Section II below
19. Genetic Information, and

- B. DHS has no actual knowledge that the information could be used alone or in combination with other information to identify an individual who is the subject of the information.
- C. A facility may also demonstrate that health information is not individually identifiable if a person with appropriate knowledge and experience applying generally accepted statistical and scientific methods for rendering information not individual identifiable:
 1. Applies such principles/methods, determines that the risk is very small that the information could be used alone or in combination with other available information to identify an individual, and
 2. Documents the methods/results that justify the determination.

II. Re-identification Requirements

- A. DHS may assign a code or other means of record identification to allow de-identified information to be re-identified provided the following conditions are met:
 1. The code or other means of record identification is not derived from or related to information about the individual,
 2. DHS does not use or disclose the code or other means of record identification for any other purpose, and does not disclose the mechanism used for re-identification, and
 3. DHS determines how and where these codes for re-identification are located and kept secure.
- B. Disclosure of the code or other means of record identification is considered a disclosure of PHI.

III. Requirements for a limited data set

- A. A limited data set is PHI that excludes the following direct identifiers of the individual, or of relatives, employers or household members of the individual:
 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 (such as Medi-Cal numbers)
9. Account numbers;
10. Certificate/license numbers;
11. Vehicle identifiers and serial numbers, including license plate numbers;
12. Web Universal Resource Locators (URLs);
13. Internet Protocol (IP) address numbers
14. Biometric identifiers, including finger and voice prints; and
15. Full face photographic images and any comparable images.

B. A limited data set may retain the following identifies of the individual, or of the relatives, employers or household members of the individual:

1. Town or city, State, and zip code; and
2. Any element of dates directly related to an individual, including birth date, admission date, discharge date, and date of death.

C. A limited data set may be used or disclosed only for the purposes of research, public health or health care operations.

D. DHS need not track or account for disclosures of limited data sets in an accounting of disclosures requested by an individual.

IV. Contents of a Data Use Agreement

A. DHS may disclose a limited data set only if the entity receiving the limited data set enters into a written agreement with DHS, in accordance with subsection (IV.)(B.) immediately below, that such entity will use or disclose the protected health information only as specified in the written agreement.

B. A **Data Use Agreement** between DHS and the recipient of the limited data set must:

1. Specify the permitted uses and disclosures of such information by the limited data set recipient. DHS may not use the agreement to authorize the limited data set recipient to use or further disclose the information in a manner that would violate the requirements of this Policy if done by DHS.
2. Specify who is permitted to use or receive the limited data set; and
3. Specify that the limited data set recipient will:

- a. Not use or further disclose the information other than as specified in 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 specified in the data use agreement;
 - c. Report to DHS, if DHS is the source of limited data set, if the recipient becomes aware of any use or disclosure of the information not specified in its data use agreement with DHS;
 - d. Ensure that any agent, 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 identify the information or contact the individual whose data is being disclosed.
4. If DHS knows 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, DHS will take reasonable steps to cure the breach or end the violation, as applicable, and if such steps are unsuccessful, DHS will:
- a. Discontinue disclosure of PHI to the recipient; and
 - b. Report the problem to the Secretary of the United States Department of Health and Human Services.
5. If DHS receives a limited data set from another covered entity, DHS must abide by the terms of a data use agreement.
6. Records Retention. All documents required to be created or complete under this policy and procedure will be retained for a period of at least six years from the date of its creation or the date when it was last in effect, whichever is later.

ATTACHMENTS/FORMS:

Forms referenced in this policy may be obtained through the DHS Sharepoint intranet website, under Forms.

Data Use Agreement

REFERENCES/AUTHORITY:

Code of Federal Regulations 45 Part 160 and 164; Section 164.514(a)-(c), (e) "Other Requirements Relating to Uses and Disclosures of Protected Health Information"

Code of Federal Regulation 45 Part 160 and 164; Section 164.502(d) “Uses and Disclosures of Protected Health Information: General Rules, Uses and Disclosures of De-Identified Protected Health Information”