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2 **7009 DE-IDENTIFICATION - PROTECTED HEALTH**
3 **INFORMATION**

4 EFFECTIVE DATE: xx/xx/2023

5 REFERENCES: 45 C.F.R. § 164.502; 45 C.F.R. § 164.514

6 **PURPOSE**

7 This policy applies to all Division of Developmental Disabilities (the Division)
8 staff. This policy outlines the de-identification of protected health
9 information as required by the Health Insurance Portability and
10 Accountability Act of 1996 "HIPAA".

11 **DEFINITIONS**

- 12 1. "Disclosure" means the release, transfer, or provision of access
13 to or divulgence in any other manner of PHI to parties outside
14 the entity holding the information.
- 15 2. "Health Insurance Portability and Accountability Act (HIPAA)
16 Privacy Rule" means the Federal Regulation that establishes
17 national standards to protect individuals' medical records and
18 other individual health information that applies to health plans,
19 health care clearinghouses, and those health care providers that

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21 conduct certain health care transactions electronically. The Rule
22 requires appropriate safeguards to protect the privacy of
23 individual health information and sets limits and conditions on
24 the Uses and Disclosures that may be made of such information
25 without authorization from the Responsible Person. The Rule also
26 gives Members rights over their health information, including
27 rights to examine and obtain a copy of their health records, and
28 to request corrections.

29 3. "Member" means the same as "client" as defined in A.R.S. §
30 36-551.

31 4. "Protected Health Information" or "PHI" means individually
32 identifiable health information about a Member that is
33 transmitted or maintained in any medium where the information
34 is:

- 35 a. Created or received by a:
- 36 i. Health care provider,
 - 37 ii. Health plan,
 - 38 iii. Employer, or
 - 39 iv. Health care clearinghouse.

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- 41 b. Relates to the:
- 42 i. Past, present, or future physical or mental health
- 43 condition of a Member;
- 44 ii. Provision of health care to a Member; or
- 45 iii. Payment for the provision of health care to a
- 46 Member.
- 47 c. PHI excludes information in:
- 48 i. Education records covered by the Family Educational
- 49 Rights and Privacy Act as amended, 20 U.S.C.
- 50 1232g;
- 51 ii. Records described at 20 USC 1232g(a)(4)(B)(IV);
- 52 iii. Employment records held by a Covered Entity in its
- 53 role as an employer; or
- 54 iv. Regarding a person who has been deceased for more
- 55 than 50 years.
- 56 5. “Responsible Person” means the parent or guardian of a minor
- 57 with a developmental disability, the guardian of an adult with a
- 58 developmental disability or an adult with a developmental

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60 disability who is a Member or an applicant for whom no guardian
61 has been appointed.

62 6. "Use" means the sharing, employment, application, utilization,
63 examination, or analysis of PHI within the entity that maintains
64 such information.

65 **POLICY**

66 **A. DE-IDENTIFIED PHI IS CREATED BY REMOVING IDENTIFIERS**

67 1. The Division shall determine when Protected Health Information
68 (PHI) is subject to de-identification by ensuring all of the
69 identifiers defined as PHI are removed from the documents
70 regarding the Member.

71 2. The Division shall ensure that the following identifiers of the
72 Member, the Member's relatives, employers, or individuals living
73 in the same household, are removed from the documents:

74 a. Names

75 b. All geographic subdivisions smaller than a State, including:

76 i. Street address,

77 ii. City,

78 iii. County,

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- iv. Precinct,
 - v. Zip code, and
 - vi. Their equivalent geocodes.
- c. All elements of dates, except year for dates directly related to an individual, including:
- i. Birth date,
 - ii. Admission date,
 - iii. Discharge date,
 - iv. Date of death, and
 - v. All elements of dates that identify an individual to be age 90 or older are aggregated into a single category.
- d. Telephone numbers.
- e. Fax Numbers.
- f. Electronic mail addresses.
- g. Social Security Numbers.
- h. Medical record numbers.
- i. Health plan beneficiary numbers.
- j. Account numbers.

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- 82 k. Certificate/license numbers.
- 83 l. Vehicle identifiers and serial numbers, including license
- 84 plate numbers.
- 85 m. Device identifiers and serial numbers.
- 86 n. Web Universal Resource Locators (URLs).
- 87 o. Internet Protocol (IP) address numbers.
- 88 p. Biometric identifiers, including finger and voice prints.
- 89 q. Full face photographic images and any comparable images.
- 90 r. Any other unique identifying number, characteristics, or
- 91 code that can be re-identified.

92 **B. ACTUAL KNOWLEDGE THAT INFORMATION CAN BE USED TO**

93 **IDENTIFY AN INDIVIDUAL**

- 94 1. If the Division has actual knowledge that any information
- 95 remaining after de-identification could be used alone or in
- 96 combination with other information to identify the Member, then
- 97 the Division shall consider the information to be individually
- 98 identifiable and not use or disclose without proper authorization.

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100 2. If an employee of the Division has knowledge of any remaining
101 identifiable information, the employee shall consult with the
102 Division's Privacy Officer prior to releasing the information.

103 **C. CODED DATA**

- 104 1. The Division shall assign a code to health information or use
105 some other similar means of identifying PHI to allow otherwise
106 de-identified information to be re-identified provided that:
- 107 a. The code or other means of identification do not come
108 from or are related to the Member's identifying
109 information.
 - 110 b. The code shall not be capable of being translated so as to
111 identify the Member by an outside entity.
- 112 2. The Division shall document the codes in writing and record all
113 analyses and information used to re-identify health information.
- 114 3. The Division shall not use or disclose the code or other means of
115 record identification for any other purpose, and shall not disclose
116 the mechanism for re-identification.