

<b>POLICY REGARDING USE OR DISCLOSURE OF DE-IDENTIFIED INFORMATION</b>
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**Purpose:** To set forth the policy of WVU Physicians of Charleston (WVUPC) regarding the use or disclosure of de-identified health information and to identify the procedures by which health information is de-identified.

**Standard:** A patient's health information is "de-identified" if it does not identify the patient or if WVUPC has no reasonable basis to believe that the information can be used to identify the patient.

**Policy:** WVUPC may use a patient's health information to create de-identified information or disclose a patient's health information to a business associate for the purpose of creating de-identified information. Information that is de-identified in accordance with this policy is not subject to WVUPC's privacy and security protections afforded to individually identifiable health information, unless the de-identified information is re-identified.

**Procedure:** A. WVUPC may determine that a patient's health information is de-identified by using one of the following methods:

1. Statistical Analysis

A patient's health information is de-identified if a person with appropriate knowledge and experience, who applies generally accepted statistical and scientific principles and methods for rendering information not individually identifiable, determines that the risk is very small that the information could be used, either alone or in combination with other available information, by anticipated recipients to identify the individual who is the subject of the information. (WVUPC will maintain documentation of the methods used in conducting its analysis and the resulting final determination.)

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**Policy regarding use or disclosure of de-identified information (continued)**

2. Safe Harbor

A patient's health information is de-identified if the following eighteen (18) identifiers are removed from the patient's health information, including identifiers that pertain to the patient or the patient's relatives, household members, or employer:

- a. Names
- b. Addresses
- c. Telephone numbers
- d. Fax numbers
- e. E-mail addresses
- f. Social Security numbers
- g. Medical record numbers
- h. Health plan beneficiary numbers
- i. Any and all account numbers
- j. Any certificate / license numbers
- k. All elements of dates, with the exception of the year, including birth date, admission dates, discharge dates, date of death (all elements of date, including year, must be removed for individuals over the age of 89)
- l. Vehicle identifiers
- m. Device identifiers
- n. Web universal resource locators (URLs)
- o. Internet protocol (IP) address numbers
- p. Biometric identifiers, including finger and voice prints (identifiers such as age, race, gender, and ethnicity do not have to be removed; however, if the identifier is so unique to the Patient that it could reasonably be used to identify the Patient, then the identifier should be removed)
- q. Full face photo image(s), if any
- r. Any other unique identifying number or code

AND

WVUPC does not have actual knowledge that the information, alone or in combination with other information, could be used to identify the patient who is the subject of the information.

**Policy regarding use or disclosure of de-identified information (continued)**

If a patient who is the subject of the information is age 89 or older, all identifiers related to the patient's age (including the year of the patient's birth), must be removed.

- B. Prior to disclosing a patient's de-identified information, WVUPC staff who is responsible for handling the disclosure shall be responsible for:
1. Determining that the information has been de-identified in accordance with one of the methods specified above
  2. Verifying that the process of de-identification has been documented
  3. Confirming that the information cannot be used alone or in combination with other information to identify the patient

Any code or other means of record identification designed to enable re-identification of de-identified information may not be disclosed, except as otherwise permitted by WVUPC's policies or as required by law.

In the event that de-identified information becomes re-identified, WVUPC's policies and procedures regarding the uses or disclosures of individually identifiable health information will govern.

**REFERENCES:**  
45 C.F.R. § 164.514

**WVU Physicians of Charleston  
HIPAA Policies and Procedures**

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