HIPAA DATA REFERENCE CHART

Protected Health Information	Limited Data Set	De-identified Data Set
Protected Health Information (Identifiable Data) Protected health information (PHI) includes all individually identifiable health information relating to the past, present or future health status, provision of health care, or payment for health care of/for an individual that is created or received by a Covered Entity or Business Associate. Health information is individually identifiable if it contains any of the following identifiers: Names Geographic subdivisions smaller than a state Dates (except year only) directly related to an individual, including birth date, date of death, admission date, discharge date; and all ages over 89 (except ages may be aggregated into a single category of age 90 or older) Telephone and faxes numbers Email addresses Social security numbers (SSN) Medical Record Numbers (MRN) Health plan beneficiary numbers Account numbers Certificate/driver's license numbers Vehicle identifiers and serial numbers, including license plate numbers Device identifiers and serial numbers Web Universal Resource Locators 	 A limited data set is a data set that is stripped of certain direct identifiers specified in the Privacy Rule. A limited data set may be disclosed to an outside party without a patient's authorization only if certain conditions are met. <i>First</i>, the purpose of the disclosure must be for research, public health, or health care operations purposes. <i>Second</i>, the person or entity receiving the information must sign a data use agreement (DUA) with the covered entity or its business associate. Limited Data Sets may include only the following identifiers: ✓ Dates, such as admission, discharge, service, and date of birth (DOB) ✓ City, state, and zip code (not street address) ✓ Any other unique code or identifier. This means that in order for a data set to be considered a limited data set, all of the following direct identifiers as they relate to the individual or his/her relatives, employers, or household members <i>must</i> be removed: Names Street addresses(other than town, city, state, and zip code) Telephone and fax numbers Email addresses 	De-identified Data Set The Privacy Rule permits a covered entity or its business associate to release data that have been de-identified without obtaining an Authorization and without further restrictions upon use or disclosure because de-identified data is not PHI and not subject to the Privacy Rule. A covered entity or business associate may deidentify a data set in one of two methods. The first method, (the "Safe Harbor" method) involves the removal all 18 HIPAA identifiers. In the second method the covered entity formally determines that there is no reasonable basis to believe the data can be used to identify an individual. The second method is the "Expert Determination" method. A qualified statistician—using generally accepted statistical and scientific principles and methods—determines that the risk of re-identification of the individual that is the subject of the information is low. The qualified statistician must document the methods and analysis that justify his/her determination. The two de-identification methods are illustrated below.
Internet Protocol (IP) addresses	Social security numbersMedical record numbers	
 Biometric identifiers (including 	 Medical record numbers Health plan beneficiary numbers 	
finger and voice prints)	Account numbers	

 Full face photographic images and any comparable images Any other unique identifying number, characteristic, or code. *A Business Associate Agreement (BAA) is required to be entered into between a Covered Entity and/or Business Associate and any downstream Subcontractor(s) that create, maintain, receive, access or store PHI on behalf of a Covered Entity/Business Associate prior to use or disclosure of any PHI. **Consult the privacy group within the Office of Management (privacyandcompliance@umassmed.edu) to determine whether your project requires a BAA. 	 Certificate/driver's license numbers Vehicle identifiers and serial numbers, including license plate numbers Device identifiers and serial numbers URLs and IP addresses Biometric identifiers Full face photographic images and any comparable images. *A Covered Entity or Business Associate <i>must</i> enter into a Data Use Agreement (DUA) with a third-party that will receive a Limited Data Set <i>before</i> disclosing the Limited Data Set to the third party. **Consult the privacy group within the Office of Management (privacyandcompliance@umassmed.edu) to determine whether your project requires a DUA. 	HIPAA Privacy Rule De-identification Methods Expert Safe Harbor Bited.514(b)(1) Safe Harbor Apply statistical or Safe Harbor scientific principles No actual knowledge Very small risk that No actual knowledge could identify individual No actual knowledge *Figure from the Office for Civil Rights guidance available here: http://www.hhs.gov/hipaa/for-professionals/privacy/special-topics/de-identification/index.html. **Consult the privacy group within the Office of Management (privacyandcompliance@umassmed.edu) if you have questions about how to de-identify your data set.
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For more information, please contact the privacy group within the Office of Management at (508) 856-8326 or privacyandcompliance@umassmed.edu.