

HIPAA PRIVACY RULE: DISCLOSURES OF DE-IDENTIFIED INFORMATION

I. Policy

- A. The University of Southern California (USC)¹ may use or disclose de-identified health information without obtaining a patient's authorization. De-identified health information is 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. Health information shall be considered de-identified only if one of the two de-identification procedures set forth in this policy is followed.
- B. USC may use health information to create de-identified health information or disclose health information to a Business Associate to create de-identified health information so long as USC and the Business Associate execute a Business Associate agreement in accordance with USC HIPAA Policy BUS - 701.

II. Procedures

- A. Health information is de-identified only if it complies with one of the following two de-identification procedures:

1. *Statistical methods.*

Health information is considered de-identified if a person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable:

¹ For purposes of the HIPAA Privacy Rule, USC includes USC Norris Cancer Hospital, Keck Hospital of USC, USC's employed physicians, nurses and other clinical personnel, those units of USC that provide clinical services within the School of Pharmacy, the Herman Ostrow School of Dentistry, Physical and Occupational Therapy as well as the Keck Doctors of USC, those units that support clinical and clinical research functions, including the Offices of the General Counsel, Audit and Compliance.

Issued by: Elizabeth Garrett
Provost and Senior Vice President,
Academic Affairs

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Senior Vice President, Administration

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- a. 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
 - b. documents the methods and results of the analysis to justify such determination.
2. *Removal of identifiers.*

Health information is considered de-identified if all eighteen (18) of the following identifiers of the patient or relatives, employers, or household members of the patient are removed and USC does not have any actual knowledge that the information could be used alone or in combination with other information to identify a patient:

- a. names
- b. geographic subdivisions smaller than a state (e.g., 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 currently available data from the Bureau of the Census, the geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; if such geographic units contain 20,000 people or less, then the initial three digits of the zip codes must be changed to 000 and thus treat them as a single geographic area)
- c. all elements of dates, except year, directly related to an individual including birth date, admission date, discharge date, date of death; and for all ages over 89, all elements of date including year indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older; note, however, that for research or other studies relating to young children or infants, USC's policy does not prohibit age of an individual from being expressed in months, days or hours
- d. telephone numbers
- e. fax numbers
- f. email addresses

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- g. social security numbers
- h. medical record numbers
- i. health plan beneficiary numbers
- j. account numbers
- k. certificate/license numbers
- l. vehicle identifiers and serial numbers, including license plate numbers
- m. device identifiers and serial numbers
- n. web universal resource locators (URLs)
- o. internet protocol (IP) address numbers
- p. biometric identifiers including finger and voice prints
- q. full face photographic images and any comparable images
- r. any other unique identifying number, characteristic or code, except as otherwise permitted for re-identification purposes in Section II.B below

B. Re-identification

1. USC may assign a code or other means of record identification to allow information de-identified under this policy to be re-identified by USC, provided that:
 - a. The code or other means of record identification is not derived from or related to information about the patient and is not otherwise capable of being translated so as to identify the patient; and
 - b. USC does not use or disclose the code or other means of record identification for any other purpose, and does not disclose the mechanism for re-identification.

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2. A code or other means of record identification designed to enable coded or otherwise de-identified information to be re-identified may not be disclosed except as provided above.
3. De-identified health information that has been re-identified may not be disclosed or used except as otherwise permitted under USC's policies for disclosure and use of Protected Health Information².

Additional References

45 CFR §§ 164.502(d), 164.514(a)-(c)

Responsible Office: Office of Compliance
[http://ooc.usc.edu/
complian@usc.edu](http://ooc.usc.edu/complian@usc.edu)
(213) 740-8258

² Protected Health Information is identifiable information that relates to an individual's past, present or future physical or mental condition or to payment for health care.

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