Appendix 1 – General Privacy Terms Abbreviated Version For Students

Terms:

Client of Public Health: Clients of this organization include any person who presents for health (mental or physical) treatment or advice and for whom a health care record has been created. This term includes:

- 1. Minors and adults receiving health care, social services, dental services and other services from Public Health
- 2. Minors and adults receiving services through Public Health care sites and/or programs
- 3. Deceased clients who have received care.

Data Use Agreement: An assurance between the covered entity and a researcher using a limited data set that the data will only be used for specific uses and disclosures.

De-Identified Data: See Protected Health Information definition

Disclosure – The release, transfer, provision of access to or divulging in any other manner of personally identifiable health information outside the covered entity holding the information (see Seattle and King County Department of Public Health definition below). This includes written, verbal, and electronic information. A transfer of information from Public Health to a Division or Section of Public Health is considered a use and authorization is not required. Transfers of information outside of PHSKC to other King County agencies within the King County covered entity will require authorization for the client or a data sharing agreement. Generally, information shared with entities outside Public Health (covered entity) require an authorization. Exceptions are noted in the Authorization Policy. See also incidental disclosure below.

Health care information: Any information, whether oral or recorded in any form or medium, that identifies or can readily be associated with the identity of a client and directly relates to the client's health care. It can relate to the past, present or future physical or mental health or condition of the client.

- 1. When this information can be linked to the client, it is individually identifiable health information and is protected under this policy and federal and statute. See definition for protected health information.
- 2. Excluded from this definition are education records covered under the Family Educational Right and Privacy Act (FERPA), as amended, 20 U.S.C. 1232g and employment records held by Public Health in its role as employer.

Health Care Record – any information relating to a client of Public Health that is used to make health care decisions, record results or observations about them. This would

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include information about services or supplies that relate to: "preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative care, and counseling, service, assessment, or procedure with respect to the physical or mental condition, or functional status, of an individual or that affects the structure or function of the body; and sale or dispensing of a drug, device, equipment, or other item in accordance with a prescription." (45 CFR §160.103).

Information in this record is subject to review by the client or their representative, unless a contravening law prevails. The health care record includes:

- 1. Records created by Public Health for the provision of care or recording of results or observations, including screening or pre-procedure forms filled out by the client
- 2. Results from outside providers
- 3. Correspondence
- 4. Secondary records, such as SKIIS, SKRTS or other data bases that have abstracted information
- 5. Audio records, such as dictations, phone conversations
- 6. Video records, such as tapes of procedures or photographs for identification purposes.
- 7. "Shadow records", which are duplicate records (partial or total) kept by staff

Excluded from this definition are:

- 1. Psycho-therapy notes, see definition under "psycho therapy notes".
- 2. Records that are compiled in the process of performing mandated public health reporting and investigation. They are exempted under RCW 42.17.310(e) and can include:
 - b. Case reports for HIV, STD, Communicable Diseases
 - c. Case/contact investigations for STD, CD, TB, police investigations, death investigations
 - d. Isolation/quarantine notes
- 3. Information gathered in the course of Public Health operations i.e., to defend themselves in a lawsuit, peer review, quality improvement activities.

Limited Data Set – is PHI that excludes direct identifiers, with the following exceptions: dates related to a client, geographic designations except street or postal address and other unique identifiers not specifically listed in protected health information (definition below). These are generally used for research, public health or health care operations and can be released without a client's authorization.

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Minimum Necessary – "reasonable steps" will be taken to limit the use and disclosure of and requests for PHI to the minimum necessary to accomplish the intended purpose. This would apply to uses within the Department as well as uses outside the Department. This is a HIPAA standard and does *not* apply in the following situations:

- 1. When release and disclosure of information has been requested by the client via a valid authorization
- 2. When required by the secretary of Health and Human Services (HHS) to investigate or determine compliance with HIPAA.
- 3. Disclosures to or requests by a healthcare provider for treatment uses
- 4. Disclosures made to the secretary of HHS in accordance with subpart C of 160 for enforcement purposes
- 5. Disclosures and uses that are required by other state or federal laws
- 6. Uses or disclosures required to comply with the HIPAA administrative simplification rules

Protected Health Information (PHI): under HIPAA means *individually identifiable* health information. *Identifiable* refers not only to data that is explicitly linked to a particular individual. It also includes health information with data items which reasonably could be expected to allow individual identification. This definition excludes health information contained in employment and Family Educational Right and Privacy Act (FERPA) records. The following grid defines the difference between PHI that "links" health information to an individual and limited data sets (see definition under limited data set)

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Elements in Protected Health Information

Per 45 CFR § 164.514

Item No.	Individually identifiable data (PHI Elements that may not be included in de-identified data sets)	Elements that must be <i>removed</i> for a Limited Data Set	Elements <i>allowed</i> in a Limited Data Set
1	Names includes clients, employers, household members & relatives	X	
2	All geographic subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes ¹	Address information other than →	State, county, city, precinct and five digit zip code
3	All elements of dates for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 ²		Admission, dischg & service dates Birth date Date of death Age (including age 90 or over)
4	Telephone numbers	X	
5	Fax numbers	X	
6	Electronic mail addresses	X	
7	Social Security numbers	X	
8	Medical record numbers	X	
9	Health plan beneficiary numbers	X	
10	Account numbers	X	
11	Certificate/license numbers	X	
12	Vehicle identifiers and serial numbers, including license plate numbers	X	
13	Device identifiers and serial numbers	X	

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¹ except for the initial three digits of a zip code if, according to the current publicly 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. The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000.

² Re: birthdates - cannot use any combination (year, month and day, etc., except that such ages and elements may be aggregated into a single category of age 90 or older

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Item No.	Individually identifiable data	Elements that must be <i>removed</i>	Elements <i>allowed</i> in a Limited Data
18 total	(PHI Elements that may not be included in de-identified data sets)	for a Limited Data Set	Set
14	Web Universal Resource Locators		
	(URL)	X	
15	Internet Protocol (IP) address numbers	X	
16	Biometric identifiers, including finger and voice prints	X	
17	Full face photographic images and any comparable images	X	
18	Any other unique identifying number, characteristic, or code ³	Subject to review	Subject to review

If information is "de-identified" (i.e., is lacking the above elements and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual) it is not individually identifiable health information and not subject to special protection.

Research: "A systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge. This includes the development of research repositories and databases for research." (45 CFR, Part 46 – The Common Rule).

Treatment, Payment and Operations: (TPO)

- 1. *Treatment* means the provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider to another.
- 2. *Payment* means the activities undertaken by a health care provider or health plan to obtain or provide reimbursement for the provision of health care; and determinations of eligibility or coverage (including coordination of benefits or the determination of cost sharing amounts), billing, claims management, collection activities, obtaining payment under a contract for reinsurance (including stop-loss

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³ except a code assigned by SKCDPH for re-identification purposes (used for Research)

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insurance and excess of loss insurance), and related health care data processing; review of health care services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges; utilization review activities, including pre-certification and pre-authorization of services, concurrent and retrospective review of services; and disclosure to consumer reporting agencies relating to reimbursement.

- 3. *Operations* means any of the following activities of Public Health:
 - a. Conducting <u>quality</u> assessment and improvement activities, including outcomes evaluation and development of clinical guidelines, provided that the obtaining of generalizable knowledge is not the primary purpose of any studies resulting from such activities; population-based activities relating to improving health or reducing health care costs, protocol development, case management and care coordination, contacting of health care providers and patients with information about treatment alternatives; and related functions that do not include treatment;
 - b. Reviewing the competence or qualifications of health care professionals, evaluating practitioner and provider performance, health plan performance, conducting training programs in which students, trainees, or practitioners in areas of health care learn under supervision to practice or improve their skills as health care providers, training of non-health care professionals, accreditation, certification, licensing, or credentialing activities;
 - c. Conducting or arranging for <u>medical review</u>, <u>legal services</u>, <u>and auditing</u> functions, including fraud and abuse detection and compliance programs;
 - d. Business planning and development, such as conducting cost-management and planning-related analyses related to managing and operating the entity, including formulary development and administration, development or improvement of methods of payment or coverage policies; and
 - e. Business management and general administrative activities, including, but not limited to:
 - (i) Management activities relating to implementation of and compliance
 - (ii) Customer service, including the provision of data analyses for policy holders, plan sponsors, or other customers, provided that protected health information is not disclosed to such policy holder, plan sponsor, or customer.

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- (iii) Resolution of internal grievances;
- (iv) The sale, transfer, merger, or consolidation of all or part of Public Health with another organization where due diligence related to this activity is needed.

Workforce: Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity. Other categories of persons may be included, but this definition is not limited to: contract employees, students, work study students.

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