



DE-IDENTIFICATION Reference

HIPAA Expert Determination De-Identification Method

This document is intended to provide a quick reference for the HIPAA Privacy Rule’s Expert Determination de-identification method.

A person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable:

1. Applying such principles and methods, 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
2. Documents the methods and results of the analysis that justify such determination.



HIPAA Privacy Rule. 45 CFR §164.514(b)(1).

Covered entities may draw experts from a variety of fields including statistics, mathematics and science. The Expert Determination method provides for an individual to be determined an expert in de-identification through professional experience, academic or other training and actual experience, using health information de-identification methodologies.

There is no uniform or set standard for what defines a “very small” risk. Risk is dependent on a variety of factors including the data set and the environment; it is the role of the expert to define the risk level within the parameter of very small. While the regulations do not specify any sort of time limitation for the expert’s

certification, some de-identification experts may impose a time limit given that risks change over time. There are a series of steps that the expert must undertake to thoroughly execute a risk of identification assessment:

1. The expert must evaluate the extent to which the health information is identifiable to the anticipated recipients.
2. The expert will coordinate with the data manager as to the methods – statistical or scientific - to be applied to the data, to mitigate the privacy risk.
3. The expert will execute on the agreed upon methods. As the expert evaluates risk, she will “often consider the degree to which a data set can be ‘linked’ to a data source that reveals the identity of the corresponding individuals.” The expert uses her discretion and may calculate a variety of risk assessments from different perspectives.

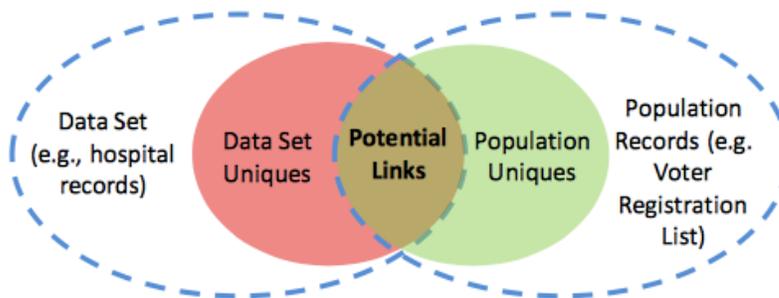


Figure 4. Relationship between uniques in the data set and the broader population, as well as the degree to which linkage can be achieved.

4. The expert will test the result to “confirm that the risk is no more than very small when disclosed to the anticipated recipients.”

Finally, the expert must document the methods and results, justifying the determination that the resulting data set meets the very small risk specification requirement.

See, Guidance on De-identification of Protected Health Information (November 26, 2012), https://www.hhs.gov/sites/default/files/ocr/privacy/hipaa/understanding/coveridentities/De-identification/hhs_deid_guidance.pdf (source for additional information, direct quotations and figure).

SUPPORTERS

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