



## NV-PIC Document Privacy Procedure

The NV-PIC procedure for the storage and future use of psychological assessments and other protected health information requires the following (Office of Civil Rights, 2012):

1. Assessment reports will remain deidentified by client name until they are in the final stage.
2. Interns cannot have protected health information (PHI) stored on their personal devices.
3. Prior to internship ending, interns who want to use work samples for future job applications are required to check with their supervisor of record to make sure that the documents were properly de-identified.
4. After the supervisor and/or the psychologist supervising the report approves the de-identified version using the checklist below, they will convert the file to PDF ensuring that the document meets security standards.

The NV-PIC procedure for the redaction of psychological assessments and other protected health information follows the HIPAA Privacy Rule.

The HIPAA Privacy Rule protects most individually identifiable health information held or transmitted by a covered entity or its business associate, in any form or medium, whether electronic, on paper, or oral. The Privacy Rule calls this information *protected health information* (PHI). Protected health information is information, including demographic information, which relates to: the individual's past, present, or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual. Protected health information includes many common identifiers (e.g., name, address, birth date, Social Security Number) when they can be associated with the health information listed above. (OCR, 2012, p.4)

NV-PIC uses the Safe Harbor Method for the deidentification of protected health information.

In the context of the Safe Harbor method, actual knowledge means clear and direct knowledge that the remaining information could be used, either alone or in combination with other information, to identify an individual who is a subject of the information. This means that a covered entity has actual knowledge if it concludes that the remaining information could be used to identify the individual. The covered entity, in other words, is aware that the information is not actually de-identified information. See the citation for example scenarios.

In §164.514(b), the Safe Harbor method for de-identification is defined as follows (partial list below on relevance – see citation for full list):

(1) The following identifiers of the individual or of relatives, employers, or household members of the individual, are removed:

(A) Names

(i) All geographic subdivisions smaller than a state, including street address, city, county, precinct, last two ZIP code numbers of client's address

(ii) All elements of dates (except year) for dates that are directly related to an individual, including birth date, admission date, discharge date, death date, and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older. Number of days for hospitalization or outpatient treatment is acceptable.

(B) Telephone numbers (client)

(C) Fax numbers (client)

(D) Email addresses (client)

(E) Social security numbers

(F) Medical record numbers

(G) Health plan beneficiary numbers

(H) Any information that is potentially identifiable (e.g., high-profile situations, unique job title).

(2) The covered entity does not have actual knowledge that the information could be used alone or in combination with other information to identify an individual who is a subject of the information.

*Note: names of agency staff do NOT have to be removed.*

References:

Office of Civil Rights (2012). *Guidance Regarding Methods for De-identification of Protected Health Information in Accordance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule*. Retrieved from:

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