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**HIPAA Policy 5039****Use and Disclosure of De-Identified Information and of Limited Data Sets**

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<b>Responsible Office</b>	Provost's Office	<b>Effective Date</b>	April 14, 2003
<b>Responsible Official</b>	Privacy Officer	<b>Last Revision</b>	Feb 10, 2003

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**Scope**

This policy applies to the University's Covered Components, designated as such for purposes of complying with the privacy provisions of the Health Insurance Portability and Accountability Act of 1996. The Covered Components are: (1) the Group Health Plan Component; and (2) the Covered Health Care Component, comprised of the School of Medicine, School of Nursing, Department of Psychology clinics and Yale University Health Services.

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**Policy Statement**

While HIPAA imposes many restrictions on the use and disclosure of protected health information, HIPAA does not regulate the use or disclosure of de-identified information and imposes lesser restrictions on the use and disclosure of Limited Data Sets. It is therefore the policy of Yale University to use and/or disclose de-identified information or Limited Data Sets where appropriate, in accordance with the procedures set forth below. De-identified information and/or limited data sets may still be subject to other confidentiality requirements (e.g., because the information is proprietary) and should be marked confidential when appropriate.

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**Reason for the Policy**

To establish procedures for creating and using/disclosing de-identified information and Limited Data Sets.

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**Definitions**

- [Confidential Communications](#)
- [Covered Entity](#)
- [Designated record set](#)
- [Disclosure](#)
- [HIPAA](#)
- [Legally Authorized Representative](#)
- [PHI](#)
- [TPO \(Treatment, Payment, Operations\)](#)
- [Use of Information](#)

(See [HIPAA Glossary](#) for complete list of terms)

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**Procedures**

[5033 PR1](#): Disclosure of PHI to Business Associates

[5037 PR.1](#): Minimum Necessary Uses, Disclosures, and Requests

[5039 PR.1](#) - Use and Disclosure of De-Identified Information and of Limited Data Sets

## Forms and Exhibits

[Form 5039](#) - De-identification Checklist

[Form 5039](#) - Limited Date Set Checklist

[Form 5039](#) – Data Use Agreement

[Form 5039](#) – Data Use Agreement for Internal Research Uses

## Related Information

Policy [5032](#): Institutional Statement of Policy on Use and Disclosure of Protected Health Information for Research Purposes

Policy [5033](#): Disclosures of Protected Health Information to Business Associate

Policy [5037](#): Minimum Necessary Uses, Disclosures, and Requests

## Contacts

Subject	Contact	Phone
HIPAA Compliance	Chief HIPAA Privacy Officer	436-3650
	Deputy Privacy Officer, YSM	737-6085
	Deputy Privacy Officer, YSN	737-5700
	Deputy Privacy Officer, Psychology	436-3650
	Deputy Privacy Officer, UHS	432-0076
Information Security	University Information Security Officer	432-1248
	YSM Information Security Officer	785-5204
Research Compliance	Human Investigation Committee (YSM)	785-4688
	Human Subjects Committee (FAS)	436-3650
	Human Subjects Research Review Committee (YSN)	737-2371

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## Roles and Responsibilities

### Office of the Provost

responsible for University compliance issues including HIPAA

### Office of General Counsel

interprets HIPAA regulations; reviews and approves all HIPAA related contracts including contracts with Business Associates or for research contracts

### University Information Security Officer

individual responsible for overseeing information security and ensuring compliance with security requirements of HIPAA

### Chief HIPAA Privacy Officer

individual responsible for overseeing and ensuring HIPAA compliance throughout Yale University; coordinates compliance related activities through the following deputies in each of the covered schools, departments, or other entities:

- Deputy Privacy Officer, School of Medicine
- Deputy Privacy Officer, School of Nursing
- Deputy Privacy Officer, Yale Health Services
- Deputy Privacy Officer, Yale Health Plan/Benefits Office
- Deputy Privacy Officer, Department of Psychology Clinics

### Procurement Office

identifies Business Associates and ensures appropriate contracts in place

### Grants & Contracts Administration

Responsible for negotiating data use agreements and research related contracts.

### Institutional Review Boards (HIC, HSC, HSRR)

Responsible for review and approval of waivers of authorization for research purposes.

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