A Case Example: CHHS Data De-Identification Guidelines

Improving Public Health Data Dissemination through Policy and Tools

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A Case Example from California

- California Health and Human Services Agency (CHHS) includes 12 departments and 3 offices
 - □ Diverse services
 - □ Diverse laws affecting data sharing
 - □ Diverse practices
- CHHS Open Data Portal Driving Change
 - □ Increased availability of data
 - □ Data side by side from multiple departments
 - □ Building consistency across programs

Data De-identification Guidelines (DDG) Workgroup

- Convened in April 2015
 - Included representation from all CHHS departments and offices
 - Included training in current practices for deidentification
- Considerations
 - California Information Practices Act
 - □ CHHS Information Governance Structure
 - □ HIPAA Impacted Programs



A Starting Point

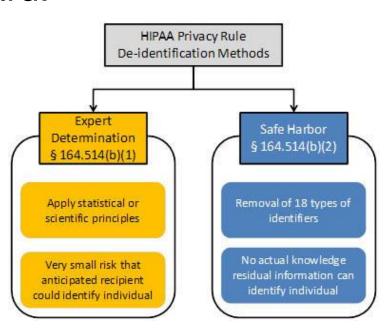
Public Aggregate Reporting for Department of Health Care Services (DHCS) Business Reports

- ☐ Finalized August 2014
- Serve as de-identification guidelines to support public reporting for DHCS
- Developed through department-wide workgroup that reviewed current practices throughout the country
- □ Based on HIPAA standard for data de-identification
- □ http://www.dhcs.ca.gov/dataandstats/Pages/PublicRe
 portingGuidelines.aspx



DHCS Public Data De-identification

- Data must be de-identified in accordance with law
- DHCS is a HIPAA Covered Entity
- HIPAA provides two methods to achieve the de-identification standard:
 - Expert Determination
 - □ Safe Harbor



What Usually Leads to Expert Determination?

- Time
 - ☐ The time period is less than a year
 - □ As of a specific delivery date
- Geography
 - □ Less than statewide
- Other
 - □ Rare diagnosis
 - □ Specific combinations of variables

A stepwise decision tree to assess aggregate data for deidentification

Serves as a tool and guideline for the Expert **Determination**

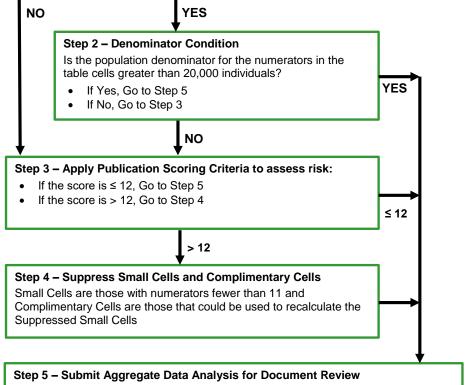
Figure 3: Reporting Assessment Decision Tree

Assesses risk for data release of aggregate data through a stepwise process. Aggregate data may be derived from record level data with identifiers, record level data without identifiers or previously aggregated data.

Step 1 - Numerator Condition

Have the Numerators (the table cells) been derived from greater than 10 members (beneficiaries)?

- If Yes, Go to Step 2
- If No. Go to Step 3



- Program Management Review
- Expert Determination Review*
- OLS Review for legal risk
- **OPA Review**

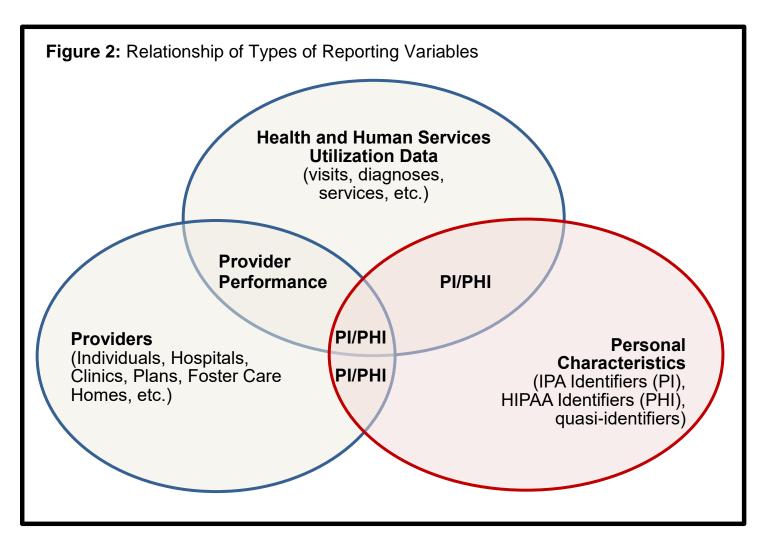
^{*} I Review for Expert Determination will be performed by individuals who have been qualified as experts by OLS and who meet the HIPAA Privacy Rule implementation specifications: "A person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable." [45 CFR Section 164.514(b)(1)]



CHHS DDG Process

- DDG Workgroup was convened in April 2015 with representation of all departments / offices in CHHS
- A series of drafts of the DDG reviewed by departments and offices and the Risk Management Subcommittee
- NORC provided an external review of draft version 0.3
- Draft versions 0.4 through 0.8 have been the result of
 - Feedback from NORC
 - □ DDG Workgroup reviews
 - □ CHHS Governance reviews

Personal Characteristics of Individuals





Next Steps

- Continuing to learn a shared language
- Finalizing the CHHS DDG
- CHHS departments and offices will adopt the CHHS DDG for each department and office
- Creates a shared conversation within CHHS and with stakeholders
- Continue to support CHHS Open Data Portal



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