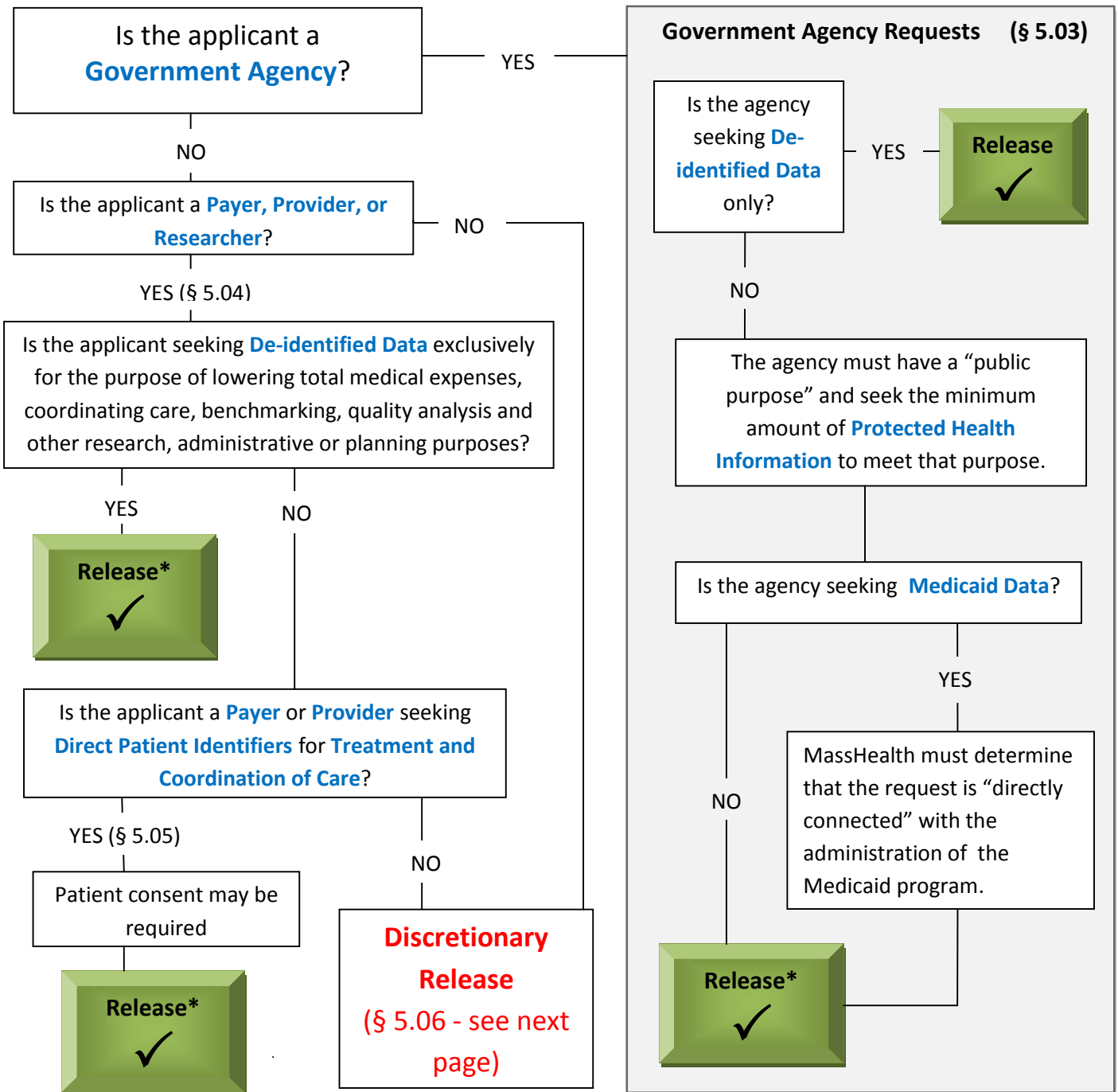




# 957 CMR 5.00: Health Care Claims, Case Mix, and Charge Data Release Procedures

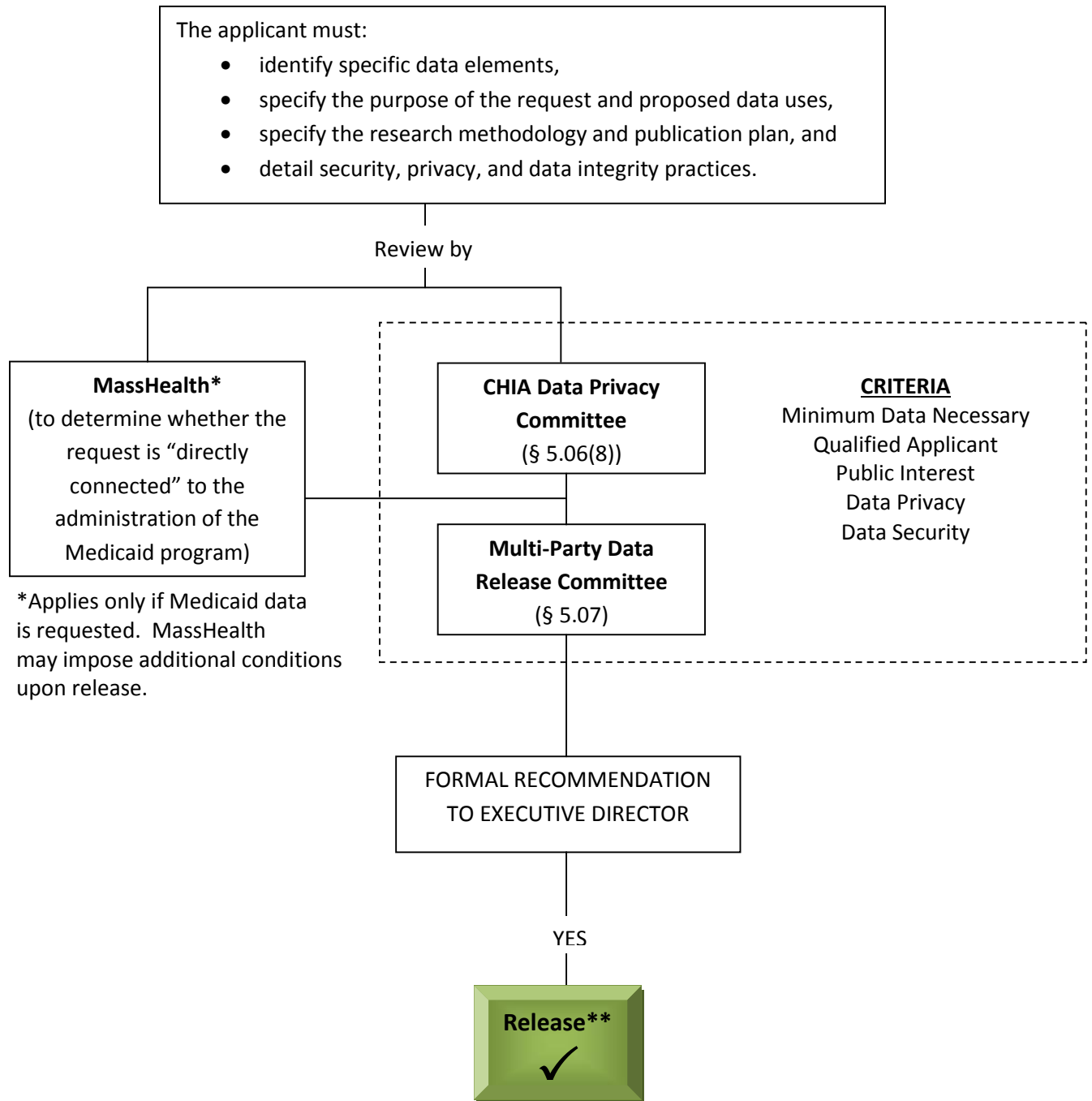
(Revised January 21, 2014)

This chart provides a reference for the data release procedures defined in CHIA regulations. Applicants should consult the regulations and the CHIA website for full details. Terms in **Blue** are defined in 957 CMR 5.02 (also see page 3).



\*Government Agencies, Payers, Providers, and Researchers will be required to execute a data use agreement prior to release of data. Special terms and conditions may apply to the release of Medicare or Medicaid data.

## DISCRETIONARY RELEASE PROCESS (§ 5.06)



\*\* Applicants will be required to execute a data use agreement prior to release of data. Special terms and conditions may apply to the release of Medicare or Medicaid data. The Executive Director may impose additional conditions upon release.

## Health Care Claims, Case Mix, and Charge Data Release Procedures

**Defined Terms (957 CMR 5.02)**

(Selected definitions provided here for convenience. Other terms are defined in the regulation.)

- **De-identified Data** – Information that does not identify an individual patient and with respect to which there is no reasonable basis to believe the data can be used to identify an individual patient. CHIA shall de-identify Data using the standards and methods required by the Health Insurance Portability and Accountability Act of 1996, 42 U.S.C. § 1320d-1320d-8, and its implementing regulations, including 45 C.F.R. Parts 160, 162 and 164, as amended from time to time. Level 1 data in CHIA's APCD and Acute Hospital Case Mix Databases include only De-identified Data.
- **Direct Patient Identifiers** – Personal information such as name, social security number, and date of birth, that uniquely identifies an individual or that can be combined with other readily available information to uniquely identify an individual.
- **Government Agency** – For purposes of this regulation, Government Agency shall mean any state agency, department or authority of the Commonwealth of Massachusetts, as well as federal agencies and departments of the United States of America and excludes the governments of other states as well as other political subdivisions of the Commonwealth of Massachusetts. Data requests from Government Agencies shall be reviewed pursuant to 957 CMR 5.03, while data requests from other governmental bodies shall be reviewed pursuant to 957 CMR 5.06.
- **Payer** – An entity that submits health care claims data to CHIA pursuant to M.G.L. c. 12C, § 10.
- **Provider** – A health care provider that submits data to CHIA pursuant to M.G.L. c. 12C § 8 and/or M.G.L. c. 12C § 9.
- **Protected Health Information** – Protected Health Information includes any individually identifiable health information (including any combination of data elements) that relates to the past, present, or future physical or mental health or condition of an individual; or the past, present or future payment for the provision of health care to an individual; and (a) identifies an individual, or (b) with respect to which there is a reasonable basis to believe that the information can be used to identify an individual patient.
- **Researchers** – Academic researchers, including those affiliated with public and private universities and medical schools, as well as other organizations and researchers undertaking health care research or health care-related projects funded by CMS, the National Institute of Health, Government Agencies and other governmental bodies.
- **Treatment and Coordination of Care** – Treatment and Coordination of Care means the provision, coordination or management of health care services to a specific, directly identifiable patient.