

Appendix E: Glossary

APPENDIX E: GLOSSARY

Like any technical topic, discussions of privacy and security can use jargon that makes them difficult to understand. This glossary is provided to help ensure that other documents included in the toolkit can be clearly understood, even by those not completely familiar with the terminology used. The glossary explains key terms and phrases used when discussing privacy and security solutions to interoperability. We have made every attempt to ensure that the explanations are concise and do not use additional jargon to explain terms and phrases.

Access Controls

Hardware, software, or policies that control access to data by controlling access to facilities, networks, computer devices, computer applications, and programs.

Aggregated Data

A set of data compiled for activities such as research, trending, and marketing that is not identifiable down to the individual health record (identified or de-identified).

AHRQ

Agency for Healthcare Research and Quality, a part of the US Department of Health and Human Services, with the mission to improve the quality of health care, the interoperability of health care information, and the development of national health care standards.

Appropriate Practices

Examples of successful field-based activities, operational procedures, or capacity-building approaches—often standardized across an industry or industries, sustainable in social and environmental terms, and readily adopted by other individuals or organizations.

Audit Logs

Generally electronic identifiers generated by hardware (network servers, firewalls, etc) or software (electronic health records, databases, claims processing systems, etc) that are used to track when data are created, modified, destroyed, or transmitted and to identify the individual or entity who creates, modifies, destroys, or transmits the data.

Authentication

Method or methods employed to prove that the person or entity accessing information has the proper authorization. Generally used to protect confidential information by limiting access to networks or applications to authorized personnel.

Authorization

A system established to grant access to generally confidential information. Authorization also establishes the level of access an individual or entity has to a data set and includes a management component—an individual or individuals designated to authorize access and manage access once approved.

Barriers

Practices, policies, or laws that impede, prohibit, or impose conditions on health information exchange—without judgment during variations assessment regarding the degree of appropriateness of the barrier.

Business Associate

An agent of a health care organization generally with access to individually identifiable health information that assists the health care organization in conducting business. Refers to a business associate as defined in the HIPAA Security and Privacy Rules.

Business Practices

Organizational practices that are implemented to address the needs of the business in meeting organizational goals, meeting legal requirements, meeting the needs of customers, and remaining profitable.

CMS

The Centers for Medicare & Medicaid Services. Responsible for the management of Medicare and for enforcing and providing guidance on HIPAA Administrative Simplification Provisions, except privacy.

Collaborative Governance

Collaborative governance is the process by which the health care industry, government, associations, and consumers partner to develop interstate and intrastate solutions to barriers or perceived barriers to interoperability presented by current governance practices. Government agencies and organizations take an active role in developing successful business and legal practices that allow the sharing of health information in the context of standard privacy and security practices. Government agencies and commissions move beyond the individual silos in which they operate to address the broad scope of electronic health information exchange. Collaborative governance does not mean it is necessary to amend existing state statute. It may require the amendment of some existing state rules.

Consumer

A consumer of health care services. Can include patients, health plan members, or personal representatives of the patient or health plan member. Can also represent an organization formed to address consumer needs and protect consumer rights.

Contract

A legal document that defines a relationship between two or more individuals or entities. Defines working relationships, legal requirements, deliverables, services or products to be exchanged or provided, etc.

Database

A repository of data that is generally searchable, can be used to generate reports, can be manipulated for research purposes, etc.

Data Set

A data repository or specifically defined collection of data such as a health care record, electronic medical record, claims record, research data, etc.

De-identified Health Information

Individual health records with redacted or edited data that prevents data from being associated with a specific individual. See the HIPAA Privacy Rule for de-identification guidelines.

Domains

The 9 privacy and security domains outlined in the AHRQ/ONC request for proposal (RFP) that formed the basis for addressing existing business practices, legal issues, barriers, and recommended solutions.

Electronic Health Record (EHR)

A data set that includes all or part of a patient's medical record in electronic form. EHRs have yet to be standardized, and the data sets are usually defined by EHR software vendors.

Electronic Protected Health Information

Electronic individually identifiable health information specifically protected under the HIPAA Privacy and Security Rules.

Encryption

A mathematical formula used to “scramble” data so it cannot be viewed by unauthorized individuals at rest or in transit.

Health Care Clearinghouse

An organization that receives non-HIPAA standard transactions, translates the nonstandard transactions into HIPAA standard transactions, and forwards the translated files to a provider or health plan. Also, an organization that receives HIPAA standard transactions, translates standard transactions into proprietary transactions, and transfers the file to a provider or health plan.

Health Information Exchange (HIE)

Health information exchanged between health plans, providers, health care clearinghouses, etc, for the purpose of conducting treatment, payment, and health care operations.

Health Plan

A health insurance carrier who provides varying levels of health care service payments for a fee (individual or employer-sponsored).

HIPAA

The Health Insurance Portability and Accountability Act of 1996 (HIPAA), specifically the HIPAA Administrative Simplification Provisions. Includes the Privacy and Security Rules.

Identifiers

Numbers or characters used to identify providers, employers, health plan members, etc. Also refers to identifiers defined under the HIPAA Administrative Simplification Provisions (employer identifier, national provider identifier, national health plan identifier, and national patient identifier).

Individually Identifiable Health Information

Medical records, clinical files, health plan claims data, etc, that include health information that is identifiable by individual.

Information Use and Disclosure Policies

Policies that define what data can be disclosed, what it can be used for, and who it can be disclosed to.

Laws

State and federal statute and rule/regulation that defines requirements for conducting business, sharing information, protecting information, reporting authorities, etc.

MOU

Memorandum of understanding. Generally not as formal as a contract but defines the relationship between 2 or more individuals or organizations. Commonly used by governmental entities.

NGA

National Governors Association, which represents all state governors and serves as a political and policy forum to assist state governors.

Network

More than one computer generally connected to a server that supports an organization's information technology operations.

OCR

Office of Civil Rights. Responsible for enforcing the HIPAA Privacy Rule.

ONC

Office of the National Coordinator for Health Information Technology, the agency within the US Department of Health and Human Services responsible for coordinating and directing efforts to create a national standard health information infrastructure.

Organized Health Care Arrangement

As defined under HIPAA, a group of providers who have adopted like security and privacy policies as well as common documentation such as the notice of privacy practices, common practices to file a privacy or security complaint, etc.

Policy

A high-level statement of an organization's requirements concerning security, privacy, and other business-related practices.

Privacy

The process of ensuring that confidential information is not disclosed inappropriately and only the minimum amount of confidential information is disclosed to serve a legally defined purpose.

Procedure

Specifically defines how a policy is to be implemented and the steps required to adhere to established policy.

Protected Health Information (PHI)

Individually identifiable health information specifically protected under the HIPAA Privacy and Security Rules. Strictly defined as any information, in oral, hard-copy, or electronic form, that (a) is created or received by or on behalf of a Covered Entity; (b) identifies or can be used to identify any individual; or (c) “relates to” the past, present, or future physical or mental health or condition of, provision of health care to, or payment for health care for the individual.

Provider

An individual or group of individuals who directly (primary care physicians, psychiatrists, nurses, surgeons, etc) or indirectly (laboratories, radiology clinics, etc) provide health care to patients.

Public Health

Health care provided by governmental entities or organizations on contract with governmental agencies.

Regulatory Agencies

Generally governmental and often reporting to the Executive Branch (state and federal). Regulate activity of organizations and individuals generally outlined in rule/regulation (Medicaid agencies, public health authorities, Board of Medical Examiners, insurance commissions, consumer protection agencies, etc).

RFP

Request for proposal, which defines the deliverables for a given project and outlines the requirements for submitting a proposed scope of work that is evaluated against other submissions.

RHIO

Regional health information organization. An inter- or intrastate organization formed to improve the quality, security, and privacy of health information exchange.

Secure Transmission

A method of securely transmitting generally confidential data from one point to another. Includes e-mail, wireless communication, virtual private networks, secure websites, secure file transfer protocol, etc.

Security

Administrative, physical, and technical processes, practices, software, etc, that secure confidential or privileged information from unauthorized access, reasonably ensure data integrity, and reasonably ensure accessibility to confidential information when needed by authorized entities or individuals.

Solutions

National and state-identified processes, practices, legal documents, etc, that successfully address identified barriers to health information exchange.

Stakeholder

For the purpose of assessing variations in business practices and identifying and addressing barriers to health information exchange while continuing to provide appropriate privacy and security protections, stakeholders include health care providers, payers, public health agencies, medical researchers, health technology and information experts, consumers, employers, attorneys, and others.

Vendors

Organizations that provide services and supplies to organizations.

Web Portal

A web portal is a website that provides a gateway to other resources on the intranet or Internet and a common or shared environment for participants.

WEDI

The Workgroup for Electronic Data Interchange. Designated under HIPAA statute as a designated standards maintenance organization (DSMO) responsible for formally advising the US Department of Health and Human Services on electronic transmission of health information, privacy of health information, and security of health information, as well as the implementation and enforcement of the HIPAA Administrative Simplification Provisions.