

	<b>Ethics &amp; Compliance Department</b>	
	<b>Policy No.: 1</b>	<b>Created:</b> 01/2018
		<b>Reviewed:</b> 06/2025
		<b>Revised:</b> 06/2025

**HIPAA: GENERAL STANDARDS**

**SCOPE:**

All Envision Healthcare teammates. For purposes of this policy, all references to “teammate” or “teammates” include temporary, part-time and full-time employees, independent contractors, clinicians, officers and directors.

**PURPOSE:**

Envision Healthcare Operating, Inc. and its subsidiaries and affiliates (“Envision” or “the Company”) has adopted this General Standards policy as a foundation for the Company’s Privacy Program and to define the term “Protected Health Information” (“PHI”) for use in these policies, and to define the data elements considered to classify patient data as “identifiable.”

**POLICY AND PROCEDURE:**

The Company will only use and disclose information in the most appropriate fashion, defined by the limitations of job function and “need to know” basis, as referenced in Policy 4 - Minimum Necessary/Need to Know.

The Company will verify the identity of all individuals prior to the release of PHI.

**Definition of PHI**

Protected Health Information or PHI, (also known as “individually identifiable information”), as used in these policies, is defined as a subset (record or transmission) of health information, including demographic information collected from an individual. It is created or received by a health care provider (including the Company), health plan, employer, or health care clearinghouse. It relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual. Additionally, the information identifies the individual or can be used to identify the individual.

The following is a list of data elements that are considered to be an identifier of an individual

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(the data elements listed below may relate to relatives, employers, or household members of the individual):

- Names;
- All geographic subdivisions smaller than a state, including street address, city, county, precinct, zip code;
- All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; 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;
- Telephone numbers;
- Fax numbers;
- Electronic mail addresses;
- Social security numbers;
- Medical record numbers;
- Health plan beneficiary numbers;
- Account numbers;
- Certificate/license numbers;
- Vehicle identifiers and serial numbers, including license plate numbers;
- Device identifiers and serial numbers;
- Web Universal Resource Locators (URLs);
- Internet Protocol (IP) address numbers;
- Biometric identifiers, including finger and voice prints;
- Full face photographic images and any comparable images;
- Any other unique identifying number, characteristic, or code.

Health information that does not identify a patient is not PHI and does not need to be treated consistent with the principles set forth in these policies. Health information does not identify the patient if:

- 1) The identifiers listed in the above-referenced definition are removed from the record or transmission of health information; or
- 2) A person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods for rendering information not individually identifiable:
  - a. determines that the risk is very small that the information could be used,

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alone or in combination, with other reasonably available information by an anticipated recipient to identify a patient who is a subject of the information; and

- b. documents the methods and results of the analysis that justify such determination.

**POLICY REVIEW**

The Ethics & Compliance Department will review and update this Policy, when necessary, in the normal course of its review of the Company’s Ethics & Compliance Program.