



ODMAP: Geolocation of Overdose Incident

In rural or tribal areas or areas with low population density, how likely is geolocation data to reveal someone's identity?

Response

There is a *remote* chance that an ODMAP user with National Map access could use the location of an overdose incident occurring in a sparsely populated area to determine the identity of an actual or suspected overdose victim. Actual identification, however, would ALSO require information from other sources (discussed in more detail below). Several aspects of ODMAP's operation serve to greatly limit these concerns:

- The general public cannot access ODMAP.
- Only a subset of ODMAP users have access to the National Map feature.
- There is restricted ability to zoom in on the National Map.
- The overdose victim may have no ties to the incident location.
- ODMAP's participation agreement clearly states how participating agencies must limit access to, and use of, ODMAP.
- Washington/Baltimore HIDTA (W/B HIDTA) or the participating agency can remove a user's access for violating policies, procedures, or applicable laws.

Additional Discussion

ODMAP users report overdose incident location to ODMAP in one of three ways: (1) by using the GPS location of the user's mobile device; (2) by entering GPS coordinates; or (3) by manually entering and geocoding the nearest address to the location. Once the information is entered, overdose location information appears as a data point on the National Map.¹ ODMAP limits how far National Map users can zoom in to the map. No additional information about the location of the actual or suspected overdose incident is provided to a user.

In dense, urban areas, the zoom limitation combined with population density provides a level of de-identification sufficient to eliminate the possibility of victim identification. However, in rural or tribal areas, the number of buildings in a block (or on a large piece of land) and population density may be low enough that a data point narrows the list of possible victims to a few homes or less. This conclusion, however, requires two things to be true: (1) the overdose incident occurred in or near a residence; and (2) the victim has a direct tie to the owner or tenant of that residence. Based on the limited information available to National Map users, the identification of an individual who suffered an actual or suspected overdose would require substantial effort and additional information beyond what is available on ODMAP.

As mentioned above, several additional aspects of ODMAP help to greatly limit the concerns regarding potential victim identification. Most important, the general public does not have access to ODMAP data, including the National Map. Access to the application is restricted to authorized users only. Moreover, participating agencies must agree to a set of policies and procedures that clearly require the agencies to limit access to, and use of, ODMAP information.² Finally, W/B HIDTA, or the user's participating agency, can remove a user's access to ODMAP for violating policies and procedures. Participating agencies are



responsible for overseeing the use of ODMAP by their employees and dealing with any penalties that result from any violations of the applicable law.³

Implicit in the scenario is the question of whether reporting overdose incident information to ODMAP violates Health Insurance Portability and Accountability Act (HIPAA) provisions governing the disclosure of protected health information (PHI). The answer is no. For more information on the HIPAA implications of data reported to ODMAP, see the response to ODMAP: Emergency Medical Services Providers.

Definitions

HIPAA-Covered Entity [45 C.F.R. § 160.103]—Health plan, health care clearinghouse, or health care provider who transmits any health information in electronic form in connection with a transaction covered by HIPAA.

National Map—The data visualization area of ODMAP where overdose incident information is plotted on a nationwide electronic map. The area was called Level 2 prior to the release of ODMAP Version 4.0 in January 2021. Not all ODMAP users can access this area.

Participating agency—An agency registered with the Washington/Baltimore HIDTA to use ODMAP. Participation in ODMAP is available at no cost to federal, state, local, and tribal law enforcement, other licensed first responders, criminal justice personnel, emergency rooms and hospital personnel, and other public health entities serving the interests of public safety and public health.

Protected Health Information (PHI) [45 C.F.R. § 160.103]—Subject to a few exceptions, PHI is individually identifiable health information that is maintained or transmitted in any form or media. In the context of HIPAA-protected information, PHI does not include information about a person deceased for more than 50 years.

¹ Readers who are unfamiliar with the National Map can view it in an ODMAP training video uploaded by W/B HIDTA on January 19, 2021 (<https://youtu.be/plDmTBPysPc>). The data shown in the video is fictional data used for demonstration purposes.

² Washington/Baltimore High Intensity Drug Trafficking Areas Overdose Detection Mapping Application Program, *ODMAP Policies and Procedures*, at 3 (revised March 2021), <http://www.odmap.org/Content/docs/training/general-info/ODMAP-Policies-and-Procedures.pdf> (users granted National Map access must have both a need to know and a right to access the map in performing their duties).

³ “Register a New User,” ODMAP, accessed June 10, 2021, <https://odmap.hidta.org/Account/Register>.