

**(2) Report**

Not later than 2 years after February 17, 2009, the Secretary of Health and Human Services shall submit to the appropriate committees of jurisdiction of the House of Representatives and the Senate a report on the study carried out under paragraph (1).

**(c) Aging services technology study and report****(1) In general**

The Secretary of Health and Human Services shall carry out, or contract with a private entity to carry out, a study of matters relating to the potential use of new aging services technology to assist seniors, individuals with disabilities, and their caregivers throughout the aging process.

**(2) Matters to be studied**

The study under paragraph (1) shall include—

**(A) an evaluation of—**

(i) methods for identifying current, emerging, and future health technology that can be used to meet the needs of seniors and individuals with disabilities and their caregivers across all aging services settings, as specified by the Secretary;

(ii) methods for fostering scientific innovation with respect to aging services technology within the business and academic communities; and

(iii) developments in aging services technology in other countries that may be applied in the United States; and

**(B) identification of—**

(i) barriers to innovation in aging services technology and devising strategies for removing such barriers; and

(ii) barriers to the adoption of aging services technology by health care providers and consumers and devising strategies to removing such barriers.

**(3) Report**

Not later than 24 months after February 17, 2009, the Secretary shall submit to the appropriate committees of jurisdiction of the House of Representatives and of the Senate a report on the study carried out under paragraph (1).

**(4) Definitions**

For purposes of this subsection:

**(A) Aging services technology**

The term “aging services technology” means health technology that meets the health care needs of seniors, individuals with disabilities, and the caregivers of such seniors and individuals.

**(B) Senior**

The term “senior” has such meaning as specified by the Secretary.

(Pub. L. 111–5, div. A, title XIII, §13113, Feb. 17, 2009, 123 Stat. 243.)

SUBCHAPTER II—TESTING OF HEALTH  
INFORMATION TECHNOLOGY

**§ 17911. National Institute for Standards and Technology testing****(a) Pilot testing of standards and implementation specifications**

In coordination with the HIT Standards Committee established under section 300jj–13 of this title, as added by section 13101,<sup>1</sup> with respect to the development of standards and implementation specifications under such section, the Director of the National Institute for Standards and Technology shall test such standards and implementation specifications, as appropriate, in order to assure the efficient implementation and use of such standards and implementation specifications.

**(b) Voluntary testing program**

In coordination with the HIT Standards Committee established under section 300jj–13 of this title, as added by section 13101,<sup>1</sup> with respect to the development of standards and implementation specifications under such section, the Director of the National Institute of Standards and Technology shall support the establishment of a conformance testing infrastructure, including the development of technical test beds. The development of this conformance testing infrastructure may include a program to accredit independent, non-Federal laboratories to perform testing.

(Pub. L. 111–5, div. A, title XIII, §13201, Feb. 17, 2009, 123 Stat. 244.)

REFERENCES IN TEXT

Section 13101, referred to in text, means section 13101 of div. A of Pub. L. 111–5.

**§ 17912. Research and development programs****(a) Health Care Information Enterprise Integration Research Centers****(1) In general**

The Director of the National Institute of Standards and Technology, in consultation with the Director of the National Science Foundation and other appropriate Federal agencies, shall establish a program of assistance to institutions of higher education (or consortia thereof which may include nonprofit entities and Federal Government laboratories) to establish multidisciplinary Centers for Health Care Information Enterprise Integration.

**(2) Review; competition**

Grants shall be awarded under this subsection on a merit-reviewed, competitive basis.

**(3) Purpose**

The purposes of the Centers described in paragraph (1) shall be—

(A) to generate innovative approaches to health care information enterprise integration by conducting cutting-edge, multidisciplinary research on the systems challenges to health care delivery; and

<sup>1</sup> See References in Text note below.