

tee on Homeland Security, the Committee on Financial Services, the Permanent Select Committee on Intelligence, and the Committee on the Judiciary of the House of Representatives.

(Pub. L. 114–113, div. N, title IV, § 403, Dec. 18, 2015, 129 Stat. 2979.)

§ 1532. Enhancement of emergency services

(a) Collection of data

Not later than 90 days after December 18, 2015, the Secretary of Homeland Security, acting through the center established under section 148 of this title, in coordination with appropriate Federal entities and the Director for Emergency Communications, shall establish a process by which a Statewide Interoperability Coordinator may report data on any cybersecurity risk or incident involving any information system or network used by emergency response providers (as defined in section 101 of this title) within the State.

(b) Analysis of data

Not later than 1 year after December 18, 2015, the Secretary of Homeland Security, acting through the Director of the National Cybersecurity and Communications Integration Center, in coordination with appropriate entities and the Director for Emergency Communications, and in consultation with the Secretary of Commerce, acting through the Director of the National Institute of Standards and Technology, shall conduct integration and analysis of the data reported under subsection (a) to develop information and recommendations on security and resilience measures for any information system or network used by State emergency response providers.

(c) Best practices

(1) In general

Using the results of the integration and analysis conducted under subsection (b), and any other relevant information, the Director of the National Institute of Standards and Technology shall, on an ongoing basis, facilitate and support the development of methods for reducing cybersecurity risks to emergency response providers using the process described in section 272(e) of title 15.

(2) Report

The Director of the National Institute of Standards and Technology shall submit to Congress a report on the result of the activities of the Director under paragraph (1), including any methods developed by the Director under such paragraph, and shall make such report publicly available on the website of the National Institute of Standards and Technology.

(d) Rule of construction

Nothing in this section shall be construed to—

(1) require a State to report data under subsection (a); or

(2) require a non-Federal entity (as defined in section 1501 of this title) to—

(A) adopt a recommended measure developed under subsection (b); or

(B) follow the result of the activities carried out under subsection (c), including any methods developed under such subsection.

(Pub. L. 114–113, div. N, title IV, § 404, Dec. 18, 2015, 129 Stat. 2980.)

§ 1533. Improving cybersecurity in the health care industry

(a) Definitions

In this section:

(1) Appropriate congressional committees

The term “appropriate congressional committees” means—

(A) the Committee on Health, Education, Labor, and Pensions, the Committee on Homeland Security and Governmental Affairs, and the Select Committee on Intelligence of the Senate; and

(B) the Committee on Energy and Commerce, the Committee on Homeland Security, and the Permanent Select Committee on Intelligence of the House of Representatives.

(2) Business associate

The term “business associate” has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations (as in effect on the day before December 18, 2015).

(3) Covered entity

The term “covered entity” has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations (as in effect on the day before December 18, 2015).

(4) Cybersecurity threat; cyber threat indicator; defensive measure; Federal entity; non-Federal entity; private entity

The terms “cybersecurity threat”, “cyber threat indicator”, “defensive measure”, “Federal entity”, “non-Federal entity”, and “private entity” have the meanings given such terms in section 1501 of this title.

(5) Health care clearinghouse; health care provider; health plan

The terms “health care clearinghouse”, “health care provider”, and “health plan” have the meanings given such terms in section 160.103 of title 45, Code of Federal Regulations (as in effect on the day before December 18, 2015).

(6) Health care industry stakeholder

The term “health care industry stakeholder” means any—

(A) health plan, health care clearinghouse, or health care provider;

(B) advocate for patients or consumers;

(C) pharmacist;

(D) developer or vendor of health information technology;

(E) laboratory;

(F) pharmaceutical or medical device manufacturer; or

(G) additional stakeholder the Secretary determines necessary for purposes of subsection (b)(1), (c)(1), (c)(3), or (d)(1).

(7) Secretary

The term “Secretary” means the Secretary of Health and Human Services.