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[1] of this title, as added by section 13101,[1] 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[1] of this title, as added by section 13101,[1] 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 300jj–13 of this title, referred to in text, which related to the establishment of the HIT Standards Committee, was repealed by Pub. L. 114–255, div. A, title IV, § 4003(e)(1), Dec. 13, 2016, 130 Stat. 1168.

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

(B) the development and use of health information technologies and other complementary fields.

(4) Research areas

Research areas may include—

(A) interfaces between human information and communications technology systems;

(B) voice-recognition systems;

(C) software that improves interoperability and connectivity among health information systems;

(D) software dependability in systems critical to health care delivery;

(E) measurement of the impact of information technologies on the quality and productivity of health care;

(F) health information enterprise management;

(G) health information technology security and integrity; and

(H) relevant health information technology to reduce medical errors.

(5) Applications

An institution of higher education (or a consortium thereof) seeking funding under this subsection shall submit an application to the Director of the National Institute of Standards and Technology at such time, in such manner, and containing such information as the Director may require. The application shall include, at a minimum, a description of—

(A) the research projects that will be undertaken by the Center established pursuant to assistance under paragraph (1) and the respective contributions of the participating entities;

(B) how the Center will promote active collaboration among scientists and engineers from different disciplines, such as information technology, biologic sciences, management, social sciences, and other appropriate disciplines;

(C) technology transfer activities to demonstrate and diffuse the research results, technologies, and knowledge; and

(D) how the Center will contribute to the education and training of researchers and other professionals in fields relevant to health information enterprise integration.

(b) National information technology research and development program

The Networking and Information Technology Research and Development Program established by section 5511 of title 15 shall include Federal research and development programs related to health information technology.

(Pub. L. 111–5, div. A, title XIII, § 13202, Feb. 17, 2009, 123 Stat. 245; Pub. L. 114–329, title I, § 105(s), Jan. 6, 2017, 130 Stat. 2985.)

AMENDMENTS

2017—Subsec. (b). Pub. L. 114–329 substituted ''Networking and Information Technology Research and Development Program'' for ''National High-Performance Computing Program''.

[1] See References in Text note below.

SUBCHAPTER III—PRIVACY

§ 17921. Definitions

In this subchapter, except as specified otherwise:

(1) Breach

(A) In general

The term ''breach'' means the unauthorized acquisition, access, use, or disclosure of protected health information which compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information.

(B) Exceptions

The term ''breach'' does not include—

(i) any unintentional acquisition, access, or use of protected health information by an employee or individual acting under the authority of a covered entity or business associate if—

(I) such acquisition, access, or use was made in good faith and within the course and scope of the employment or other professional relationship of such employee or individual, respectively, with the covered entity or business associate; and

(II) such information is not further acquired, accessed, used, or disclosed by any person; or

(ii) any inadvertent disclosure from an individual who is otherwise authorized to access protected health information at a facility operated by a covered entity or business associate to another similarly situated individual at[1] same facility; and

(iii) any such information received as a result of such disclosure is not further acquired, accessed, used, or disclosed without authorization by any person.

(2) Business associate

The term ''business associate'' has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

(3) Covered entity

The term ''covered entity'' has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

(4) Disclose

The terms ''disclose'' and ''disclosure'' have the meaning given the term ''disclosure'' in section 160.103 of title 45, Code of Federal Regulations.

(5) Electronic health record

The term ''electronic health record'' means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff.

(6) Health care operations

The term ''health care operation'' has the meaning given such term in section 164.501 of title 45, Code of Federal Regulations.

(7) Health care provider

The term ''health care provider'' has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

(8) Health plan

The term ''health plan'' has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

(9) National Coordinator

The term ''National Coordinator'' means the head of the Office of the National Coordinator for Health Information Technology established under section 300jj–11(a) of this title, as added by section 13101.[2]

(10) Payment

The term ''payment'' has the meaning given such term in section 164.501 of title 45, Code of Federal Regulations.

(11) Personal health record

The term ''personal health record'' means an electronic record of PHR identifiable health information (as defined in section 17937(f)(2) of this title) on an individual that can be drawn from multiple sources and that is managed, shared, and controlled by or primarily for the individual.

(12) Protected health information

The term ''protected health information'' has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

(13) Secretary

The term ''Secretary'' means the Secretary of Health and Human Services.

(14) Security

The term ''security'' has the meaning given such term in section 164.304 of title 45, Code of Federal Regulations.

(15) State

The term ''State'' means each of the several States, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.

(16) Treatment

The term ''treatment'' has the meaning given such term in section 164.501 of title 45, Code of Federal Regulations.

(17) Use

The term ''use'' has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

(18) Vendor of personal health records

The term ''vendor of personal health records'' means an entity, other than a covered entity (as defined in paragraph (3)), that offers or maintains a personal health record.

(Pub. L. 111–5, div. A, title XIII, § 13400, Feb. 17, 2009, 123 Stat. 258.)

REFERENCES IN TEXT

This subchapter, referred to in text, was in the original ''this subtitle'', meaning subtitle D (§ 13400 et seq.)

[1] So in original. Probably should be followed by ''the''.

[2] See References in Text note below.