

118TH CONGRESS
2D SESSION

S. 4862

To ensure that new advances in artificial intelligence are ethically adopted to improve the health of all individuals, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JULY 30, 2024

Mr. ROUNDS (for himself and Mr. HEINRICH) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To ensure that new advances in artificial intelligence are ethically adopted to improve the health of all individuals, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. GOVERNING ETHICAL AI USE AND INNOVATION**

4 **FOR HEALTH CARE DEVELOPMENT.**

5 (a) NATIONAL INSTITUTES OF HEALTH.—Part A of
6 title IV of the Public Health Service Act is amended by
7 inserting after section 403D (42 U.S.C. 283a–3) the fol-
8 lowing:

1 **“SEC. 403E. ARTIFICIAL INTELLIGENCE.**

2 “(a) IN GENERAL.—The Director of NIH shall—

3 “(1) develop computational resources and
4 datasets necessary to use artificial intelligence ap-
5 proaches for health and health care research;

6 “(2) provide expertise in biomedical research
7 and the use of artificial intelligence;

8 “(3) develop and maintain federated resources
9 that provide unified access to data from funda-
10 mental biomedical research and the clinical care en-
11 vironment;

12 “(4) provide education and ongoing support to
13 a nationwide user community to foster scientifically
14 sound, ethical, and inclusive research using artificial
15 intelligence that addresses the health needs of all in-
16 dividuals; and

17 “(5) extend the clinical research capabilities of
18 the National Institutes of Health to address signifi-
19 cant gaps in evidence to guide clinical care and to
20 serve the needs of every community.

21 “(b) AUTHORIZATION OF APPROPRIATIONS.—There
22 is authorized to be appropriated to the Director of NIH
23 to carry out this section \$400,000,000 for fiscal year
24 2025.”.

25 (b) OFFICE OF THE NATIONAL COORDINATOR FOR
26 HEALTH INFORMATION TECHNOLOGY.—Subtitle C of title

1 XXX of the Public Health Service Act (42 U.S.C. 300jj–
2 51 et seq.) is amended by adding at the end the following:

3 **“SEC. 3023. ARTIFICIAL INTELLIGENCE.**

4 “(a) IN GENERAL.—The National Coordinator
5 shall—

6 “(1) carry out activities to engage in health re-
7 search by—

8 “(A) utilizing the electronic health record
9 as a data collection tool; and

10 “(B) requiring that individuals are offered
11 an opportunity to direct the use of their health
12 data for health care research; and

13 “(2) establish data and interoperability stand-
14 ards for access, exchange, and use of clinical and ad-
15 ministrative data from the clinical care environment
16 through a National Artificial Intelligence Research
17 Resource, in alignment with—

18 “(A) the United States Core Data for
19 Interoperability;

20 “(B) the Fast Health Interoperability Re-
21 sources; and

22 “(C) the Trusted Exchange Framework
23 and Common Agreement.

1 “(b) AUTHORIZATION OF APPROPRIATIONS.—There
2 are authorized to be appropriated to the National Coordi-
3 nator for fiscal year 2025—

4 “(1) \$10,000,000 to carry out subsection
5 (a)(1); and

6 “(2) \$50,000,000 to carry out subsection
7 (a)(2).”.

8 (c) MEDICARE REQUIREMENT FOR HOSPITALS RE-
9 LATING TO USE OF ELECTRONIC HEALTH RECORDS
10 DATA FOR BIOMEDICAL RESEARCH PURPOSES.—Section
11 1866(a)(1) of the Social Security Act (42 U.S.C.
12 1395cc(a)(1)) is amended—

13 (1) by moving the indentation of subparagraph
14 (W) 2 ems to the left;

15 (2) in subparagraph (X)—

16 (A) by moving the indentation 2 ems to
17 the left; and

18 (B) by striking “and” at the end;

19 (3) in subparagraph (Y), by striking the period
20 at the end and inserting “; and”; and

21 (4) by inserting after subparagraph (Y) the fol-
22 lowing new subparagraph:

23 “(Z) in the case of a hospital, with respect
24 to each individual who is admitted to the hos-
25 pital on or after the date that is 1 year after

1 the date of enactment of this subparagraph,
2 to—

3 “(i) request permission of the indi-
4 vidual to share the health data of the indi-
5 vidual for health-related research purposes
6 in accordance with section 3023(a)(1) of
7 the Public Health Service Act; and

8 “(ii) in the case where the individual
9 grants permission to the sharing of such
10 data, share the electronic health record of
11 the individual for such purposes in accord-
12 ance with such section.”.

13 (d) SENSE OF THE SENATE.—It is the sense of the
14 Senate that any steering subcommittee (or similar entity)
15 for a National Artificial Intelligence Research Resource
16 established in the Interagency Committee established
17 under section 5103 of the William M. (Mac) Thornberry
18 National Defense Authorization Act for Fiscal Year 2021
19 (15 U.S.C. 9413) shall include an officer or employee of
20 the National Institutes of Health.

21 (e) NATIONAL LIBRARY OF MEDICINE.—

22 (1) IN GENERAL.—Section 465(b) of the Public
23 Health Service Act (42 U.S.C. 286(b)) is amended—

24 (A) in paragraph (7), by striking “and”
25 after the semicolon;

1 (B) by redesignating paragraph (8) as
2 paragraph (10); and

3 (C) by inserting after paragraph (7) the
4 following:

5 “(8) establish facilities so that the Library
6 serves as the central exchange center of federated
7 data sharing;

8 “(9) establish a core data science program to
9 guide and enable a diverse and comprehensive com-
10 munity of health-related research data users; and”.

11 (2) AUTHORIZATION OF APPROPRIATIONS.—
12 Subpart 1 of part D of title IV of the Public Health
13 Service Act (42 U.S.C. 286 et seq.) is amended by
14 adding at the end the following:

15 **“SEC. 468. AUTHORIZATION OF APPROPRIATIONS.**

16 “There are authorized to be appropriated to the Sec-
17 retary for fiscal year 2025—

18 “(1) \$100,000,000 to carry out section
19 465(b)(8); and

20 “(2) \$100,000,000 to carry out section
21 465(b)(9).”.

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