

Meeting Notes Project 2016-03 Cyber Security Supply Chain Risk Management Standards Drafting Team

March 30, 2017 | 3:30 - 4:45 p.m. Eastern

Conference Call 1-415-655-0002 (US Toll) 1-416-915-8942 (Canada Toll)

Access Code: 8656-5311

Administrative

1. Introductions

The meeting was brought to order by the Chair at 3:30 p.m. eastern on March 30, 2017. The following SDT members and staff observers were on the conference call. Various stakeholder observers were also on the call:

First Name	Last Name	Company	<u>M</u> ember/ <u>O</u> bserver
Christina	Alston	Georgia Transmission	М
James	Chuber	Duke Energy	М
Norm	Dang	IESO	М
Shamai	Elstein	NERC	0
Chris	Evans	Southwest Power Pool	М
Brian	Gatus	SCE	М
David	Gayle	Dominion Resources	М
Rusty	Griffin	CPS Energy	М
Christine	Hasha	ERCOT	0
JoAnn	Murphy	PJM Interconnection	М
Mark	Olson	NERC	0



First Name	Last Name	Company	<u>M</u> ember/ <u>O</u> bserver
Skip	Peeples	Salt River Project	М
David	Revill	GSOC	0
Corey	Sellers	Southern Company	М
Simon	Slobodnik	FERC	0
Jason	Witt	East Kentucky Power Cooperative	М

2. Determination of Quorum

The rule for NERC Standard Drafting Team (SDT or team) states that a quorum requires two-thirds of the voting members of the SDT. Quorum was achieved as 11 of 11 members were present.

3. NERC Antitrust Compliance Guidelines and Public Announcement

NERC Antitrust Compliance Guidelines and public announcement were reviewed by Mark Olson. There were no questions raised.

- **4. Chair remarks.** Corey Sellers stated that the objective of the call was to bring everyone up to speed on developments since the March 14-16 in-person meeting and address any SDT concerns with the direction. He recapped the overview of changes to CIP-013 that the SDT discussed at the March 14-16 in-person meeting. He updated the SDT on the actions to coordinate with the Project 2016-02 CIP Modifications SDT to develop proposed changes to approved CIP standards that could replace the operational requirements in CIP-013 as suggested by stake holders. The attached slide shows the standards involved and mapping of draft 1 CIP-013 requirements.
- **5. Discussion of proposed changes to approved CIP Standards.** Participants viewed initial drafts of proposed CIP-010-3, CIP-005-6, and CIP-008-6. Christine Hasha, David Revill, and Scott Saunders from the Project 2016-02 SDT provided an overview of the recommended revisions. Mark Olson advised participants that the drafts would be sent to the email list after the meeting.
- **6. Discussion of next steps.** The SDT agreed to review the three CIP standards again at the next call on April 6 and discuss if wording changes are needed to address the directives. The objective is for CIP-013, CIP-003, and any other standards needed for the 2nd posting to be finalized by the conclusion of the April 11-12 in-person meeting.

7. Future meeting(s)

- a. April 6, 2017 | 3:30 p.m. 4:45 p.m. SDT Web Meeting
- **b.** April 11-12, 2017 | in-person meeting NERC Atlanta
- 8. The meeting adjourned at 4:40 p.m. eastern on March 30, 2017

All sessions in Eastern Daylight Time (New York, GMT-04:00) Session detail for 'NERC Meeting Room':

	tall for NERC Meeting Roof		Data
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Proposed Changes to CIP Standards

Original	Modified CIP-013	Other CIP Standards
R1	R1 – develop plan(s) for high and medium impact BES Cyber Systems R2 – execute plan(s) from R1	 CIP-003-8 (low impact BES Cyber Systems) R1 Part 1.2.7 added R2 Attachment 1 Section 6 added
R2	R3 – review plan(s) every 15 months	*Review covered under existing CIP-003 R1 process
R3	Removed	CIP-010-3 ("integrity and authenticity")Table R1 Part 1.6 added
R4	Removed	 CIP-005-6 ("logging and monitoring") Table R1 Part 1.6 added Table R2 Part 2.4 added CIP-008-6 ("incident response") Table R1 Part 1.4 modified
R5	Removed	No changes

A. Introduction

- **1. Title:** Cyber Security Configuration Change Management and Vulnerability Assessments
- **2.** Number: CIP-010-2
- **3. Purpose:** To prevent and detect unauthorized changes to BES Cyber Systems by specifying configuration change management and vulnerability assessment requirements in support of protecting BES Cyber Systems from compromise that could lead to misoperation or instability in the Bulk Electric System (BES).

4. Applicability:

4.1. Functional Entities: For the purpose of the requirements contained herein, the following list of functional entities will be collectively referred to as "Responsible Entities." For requirements in this standard where a specific functional entity or subset of functional entities are the applicable entity or entities, the functional entity or entities are specified explicitly.

4.1.1 Balancing Authority

- **4.1.2 Distribution Provider** that owns one or more of the following Facilities, systems, and equipment for the protection or restoration of the BES:
 - **4.1.2.1** Each underfrequency Load shedding (UFLS) or undervoltage Load shedding (UVLS) system that:
 - **4.1.2.1.1** is part of a Load shedding program that is subject to one or more requirements in a NERC or Regional Reliability Standard; and
 - **4.1.2.1.2** performs automatic Load shedding under a common control system owned by the Responsible Entity, without human operator initiation, of 300 MW or more.
 - **4.1.2.2** Each Special Protection System (SPS) or Remedial Action Scheme (RAS) where the SPS or RAS is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.1.2.3** Each Protection System (excluding UFLS and UVLS) that applies to Transmission where the Protection System is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.1.2.4** Each Cranking Path and group of Elements meeting the initial switching requirements from a Blackstart Resource up to and including the first interconnection point of the starting station service of the next generation unit(s) to be started.
- 4.1.3 Generator Operator
- 4.1.4 Generator Owner
- 4.1.5 Interchange Coordinator or Interchange Authority

- 4.1.6 Reliability Coordinator
- 4.1.7 Transmission Operator
- 4.1.8 Transmission Owner
- **4.2. Facilities:** For the purpose of the requirements contained herein, the following Facilities, systems, and equipment owned by each Responsible Entity in 4.1 above are those to which these requirements are applicable. For requirements in this standard where a specific type of Facilities, system, or equipment or subset of Facilities, systems, and equipment are applicable, these are specified explicitly.
 - **4.2.1 Distribution Provider**: One or more of the following Facilities, systems and equipment owned by the Distribution Provider for the protection or restoration of the BES:
 - **4.2.1.1** Each UFLS or UVLS System that:
 - **4.2.1.1.1** is part of a Load shedding program that is subject to one or more requirements in a NERC or Regional Reliability Standard; and
 - **4.2.1.1.2** performs automatic Load shedding under a common control system owned by the Responsible Entity, without human operator initiation, of 300 MW or more.
 - **4.2.1.2** Each SPS or RAS where the SPS or RAS is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.2.1.3** Each Protection System (excluding UFLS and UVLS) that applies to Transmission where the Protection System is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.2.1.4** Each Cranking Path and group of Elements meeting the initial switching requirements from a Blackstart Resource up to and including the first interconnection point of the starting station service of the next generation unit(s) to be started.
 - 4.2.2 Responsible Entities listed in 4.1 other than Distribution Providers:

All BES Facilities.

- **4.2.3 Exemptions:** The following are exempt from Standard CIP-010-2:
 - **4.2.3.1** Cyber Assets at Facilities regulated by the Canadian Nuclear Safety Commission.
 - **4.2.3.2** Cyber Assets associated with communication networks and data communication links between discrete Electronic Security Perimeters.
 - **4.2.3.3** The systems, structures, and components that are regulated by the Nuclear Regulatory Commission under a cyber security plan pursuant to 10 C.F.R. Section 73.54.

- **4.2.3.4** For Distribution Providers, the systems and equipment that are not included in section 4.2.1 above.
- **4.2.3.5** Responsible Entities that identify that they have no BES Cyber Systems categorized as high impact or medium impact according to the CIP-002-5.1 identification and categorization processes.

5. Effective Dates:

See Implementation Plan for CIP-010-2.

6. Background:

Standard CIP-010 exists as part of a suite of CIP Standards related to cyber security, which require the initial identification and categorization of BES Cyber Systems and require a minimum level of organizational, operational and procedural controls to mitigate risk to BES Cyber Systems.

Most requirements open with, "Each Responsible Entity shall implement one or more documented [processes, plan, etc.] that include the applicable items in [Table Reference]." The referenced table requires the applicable items in the procedures for the requirement's common subject matter.

The term *documented processes* refers to a set of required instructions specific to the Responsible Entity and to achieve a specific outcome. This term does not imply any particular naming or approval structure beyond what is stated in the requirements. An entity should include as much as it believes necessary in its documented processes, but it must address the applicable requirements in the table.

The terms *program* and *plan* are sometimes used in place of *documented processes* where it makes sense and is commonly understood. For example, documented processes describing a response are typically referred to as *plans* (i.e., incident response plans and recovery plans). Likewise, a security plan can describe an approach involving multiple procedures to address a broad subject matter.

Similarly, the term *program* may refer to the organization's overall implementation of its policies, plans, and procedures involving a subject matter. Examples in the standards include the personnel risk assessment program and the personnel training program. The full implementation of the CIP Cyber Security Standards could also be referred to as a program. However, the terms *program* and *plan* do not imply any additional requirements beyond what is stated in the standards.

Responsible Entities can implement common controls that meet requirements for multiple high and medium impact BES Cyber Systems. For example, a single training program could meet the requirements for training personnel across multiple BES Cyber Systems.

Measures for the initial requirement are simply the documented processes themselves. Measures in the table rows provide examples of evidence to show

documentation and implementation of applicable items in the documented processes. These measures serve to provide guidance to entities in acceptable records of compliance and should not be viewed as an all-inclusive list.

Throughout the standards, unless otherwise stated, bulleted items in the requirements and measures are items that are linked with an "or," and numbered items are items that are linked with an "and."

Many references in the Applicability section use a threshold of 300 MW for UFLS and UVLS. This particular threshold of 300 MW for UVLS and UFLS was provided in Version 1 of the CIP Cyber Security Standards. The threshold remains at 300 MW since it is specifically addressing UVLS and UFLS, which are last ditch efforts to save the BES. A review of UFLS tolerances defined within regional reliability standards for UFLS program requirements to date indicates that the historical value of 300 MW represents an adequate and reasonable threshold value for allowable UFLS operational tolerances.

"Applicable Systems" Columns in Tables:

Each table has an "Applicable Systems" column to further define the scope of systems to which a specific requirement row applies. The CSO706 SDT adapted this concept from the National Institute of Standards and Technology ("NIST") Risk Management Framework as a way of applying requirements more appropriately based on impact and connectivity characteristics. The following conventions are used in the applicability column as described.

- High Impact BES Cyber Systems Applies to BES Cyber Systems categorized as high impact according to the CIP-002-5.1 identification and categorization processes.
- Medium Impact BES Cyber Systems Applies to BES Cyber Systems categorized as medium impact according to the CIP-002-5.1 identification and categorization processes.
- Electronic Access Control or Monitoring Systems (EACMS) Applies to each
 Electronic Access Control or Monitoring System associated with a referenced
 high impact BES Cyber System or medium impact BES Cyber System. Examples
 may include, but are not limited to, firewalls, authentication servers, and log
 monitoring and alerting systems.
- Physical Access Control Systems (PACS) Applies to each Physical Access
 Control System associated with a referenced high impact BES Cyber System or
 medium impact BES Cyber System with External Routable Connectivity.
- Protected Cyber Assets (PCA) Applies to each Protected Cyber Asset
 associated with a referenced high impact BES Cyber System or medium impact
 BES Cyber System.

B. Requirements and Measures

- **R1.** Each Responsible Entity shall implement one or more documented process(es) that collectively include each of the applicable requirement parts in CIP-010-2 Table R1 Configuration Change Management. [Violation Risk Factor: Medium] [Time Horizon: Operations Planning].
- **M1.** Evidence must include each of the applicable documented processes that collectively include each of the applicable requirement parts in *CIP-010-2 Table R1 Configuration Change Management* and additional evidence to demonstrate implementation as described in the Measures column of the table.

	CIP-010-2 Table R1 – Configuration Change Management			
Part	Applicable Systems	Requirements	Measures	
1.1	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA	Develop a baseline configuration, individually or by group, which shall include the following items: 1.1.1. Operating system(s) (including version) or firmware where no independent operating system exists; 1.1.2. Any commercially available or open-source application software (including version) intentionally installed; 1.1.3. Any custom software installed; 1.1.4. Any logical network accessible ports; and 1.1.5. Any security patches applied.	 Examples of evidence may include, but are not limited to: A spreadsheet identifying the required items of the baseline configuration for each Cyber Asset, individually or by group; or A record in an asset management system that identifies the required items of the baseline configuration for each Cyber Asset, individually or by group. 	

	CIP-010-2 Table R1 – Configuration Change Management			
Part	Applicable Systems	Requirements	Measures	
1.2	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA	Authorize and document changes that deviate from the existing baseline configuration.	 Examples of evidence may include, but are not limited to: A change request record and associated electronic authorization (performed by the individual or group with the authority to authorize the change) in a change management system for each change; or Documentation that the change was performed in accordance with the requirement. 	

	CIP-010-2 T	able R1 – Configuration Change Manager	nent
Part	Applicable Systems	Requirements	Measures
1.3	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA	For a change that deviates from the existing baseline configuration, update the baseline configuration as necessary within 30 calendar days of completing the change.	An example of evidence may include, but is not limited to, updated baseline documentation with a date that is within 30 calendar days of the date of the completion of the change.
	Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA		
1.4	High Impact BES Cyber Systems and their associated:	For a change that deviates from the existing baseline configuration:	An example of evidence may include, but is not limited to, a list of cyber
	 EACMS; PACS; and PCA 	1.4.1. Prior to the change, determine required cyber security controls in CIP-005 and CIP-007 that could be impacted by the change;	security controls verified or tested along with the dated test results.
	Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and	1.4.2. Following the change, verify that required cyber security controls determined in 1.4.1 are not adversely affected; and	
	3. PCA	1.4.3. Document the results of the verification.	

	CIP-010-2 Table R1 – Configuration Change Management			
Part	Applicable Systems	Requirements	Measures	
1.5	High Impact BES Cyber Systems	Where technically feasible, for each change that deviates from the existing baseline configuration: 1.5.1. Prior to implementing any change in the production environment, test the changes in a test environment or test the changes in a production environment where the test is performed in a manner that minimizes adverse effects, that models the baseline configuration to ensure that required cyber security controls in CIP-005 and CIP-007 are not adversely affected; and 1.5.2. Document the results of the testing and, if a test environment was used, the differences between the test environment, including a description of the measures used to account for any differences in operation between the test and production environments.	An example of evidence may include, but is not limited to, a list of cyber security controls tested along with successful test results and a list of differences between the production and test environments with descriptions of how any differences were accounted for, including of the date of the test.	

	CIP-010-2 Table R1 – Configuration Change Management			
Part	Applicable Systems	Requirements	Measures	
1.6	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA	For a change that deviates from the existing baseline configuration associated with baseline element Parts 1.1.1, Part 1.1.2 and Part 1.1.5, and when the means to do so is provided by the software publisher: 1.6.1. Verify the identity of the software publisher, and 1.6.2. Verify the integrity of the software obtained from the software publisher.	An example of evidence may include, but are not limited to a change request record that demonstrates the verification of identity of the software publisher and integrity of the software was performed during the baseline change.	

Note: Implementation of the Requirement R1, Part 1.6, does not require the Responsible Entity to renegotiate or abrogate existing contracts. Additionally, the following issues are beyond the scope of Requirement R1, Part 1.6: (1) the actual terms and conditions of a procurement contract; (2) contract performance and enforcement

- **R2.** Each Responsible Entity shall implement one or more documented process(es) that collectively include each of the applicable requirement parts in CIP-010-2 Table R2 Configuration Monitoring. [Violation Risk Factor: Medium] [Time Horizon: Operations Planning].
- **M2.** Evidence must include each of the applicable documented processes that collectively include each of the applicable requirement parts in *CIP-010-2 Table R2 Configuration Monitoring* and additional evidence to demonstrate implementation as described in the Measures column of the table.

	CIP-010-2 Table R2 – Configuration Monitoring			
Part	Applicable Systems	Requirements	Measures	
2.1	High Impact BES Cyber Systems and their associated: 1. EACMS; and 2. PCA	Monitor at least once every 35 calendar days for changes to the baseline configuration (as described in Requirement R1, Part 1.1). Document and investigate detected unauthorized changes.	An example of evidence may include, but is not limited to, logs from a system that is monitoring the configuration along with records of investigation for any unauthorized changes that were detected.	

- **R3.** Each Responsible Entity shall implement one or more documented process(es) that collectively include each of the applicable requirement parts in CIP-010-2 Table R3– Vulnerability Assessments. [Violation Risk Factor: Medium] [Time Horizon: Long-term Planning and Operations Planning]
- **M3.** Evidence must include each of the applicable documented processes that collectively include each of the applicable requirement parts in *CIP-010-2 Table R3 Vulnerability Assessments* and additional evidence to demonstrate implementation as described in the Measures column of the table.

	CIP-010-2 Table R3 – Vulnerability Assessments		
Part	Applicable Systems	Requirements	Measures

	CIP-010	-2 Table R3 – Vulnerability Assessments	
Part	Applicable Systems	Requirements	Measures
3.1	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA	At least once every 15 calendar months, conduct a paper or active vulnerability assessment.	 Examples of evidence may include, but are not limited to: A document listing the date of the assessment (performed at least once every 15 calendar months), the controls assessed for each BES Cyber System along with the method of assessment; or A document listing the date of the assessment and the output of any tools used to perform the assessment.

	CIP-010	-2 Table R3 – Vulnerability Assessments	
Part	Applicable Systems	Requirements	Measures
3.2	High Impact BES Cyber Systems	Where technically feasible, at least once every 36 calendar months: 3.2.1 Perform an active vulnerability assessment in a test environment, or perform an active vulnerability assessment in a production environment where the test is performed in a manner that minimizes adverse effects, that models the baseline configuration of the BES Cyber System in a production environment; and 3.2.2 Document the results of the testing and, if a test environment was used, the differences between the test environment and the production environment, including a description of the measures used to account for any differences in operation between the test and	An example of evidence may include, but is not limited to, a document listing the date of the assessment (performed at least once every 36 calendar months), the output of the tools used to perform the assessment, and a list of differences between the production and test environments with descriptions of how any differences were accounted for in conducting the assessment.

	CIP-010	-2 Table R3 – Vulnerability Assessments	
Part	Applicable Systems	Requirements	Measures
3.3	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PCA	Prior to adding a new applicable Cyber Asset to a production environment, perform an active vulnerability assessment of the new Cyber Asset, except for CIP Exceptional Circumstances and like replacements of the same type of Cyber Asset with a baseline configuration that models an existing baseline configuration of the previous or other existing Cyber Asset.	An example of evidence may include, but is not limited to, a document listing the date of the assessment (performed prior to the commissioning of the new Cyber Asset) and the output of any tools used to perform the assessment.
3.4	High Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA Medium Impact BES Cyber Systems and their associated: 1. EACMS; 2. PACS; and 3. PCA	Document the results of the assessments conducted according to Parts 3.1, 3.2, and 3.3 and the action plan to remediate or mitigate vulnerabilities identified in the assessments including the planned date of completing the action plan and the execution status of any remediation or mitigation action items.	An example of evidence may include, but is not limited to, a document listing the results or the review or assessment, a list of action items, documented proposed dates of completion for the action plan, and records of the status of the action items (such as minutes of a status meeting, updates in a work order system, or a spreadsheet tracking the action items).

- **R4.** Each Responsible Entity, for its high impact and medium impact BES Cyber Systems and associated Protected Cyber Assets, shall implement, except under CIP Exceptional Circumstances, one or more documented plan(s) for Transient Cyber Assets and Removable Media that include the sections in Attachment 1. [Violation Risk Factor: Medium] [Time Horizon: Long-term Planning and Operations Planning]
- M4. Evidence shall include each of the documented plan(s) for Transient Cyber Assets and Removable Media that collectively include each of the applicable sections in Attachment 1 and additional evidence to demonstrate implementation of plan(s) for Transient Cyber Assets and Removable Media. Additional examples of evidence per section are located in Attachment 2. If a Responsible Entity does not use Transient Cyber Asset(s) or Removable Media, examples of evidence include, but are not limited to, a statement, policy, or other document that states the Responsible Entity does not use Transient Cyber Asset(s) or Removable Media.

C. Compliance

1. Compliance Monitoring Process:

1.1. Compliance Enforcement Authority:

As defined in the NERC Rules of Procedure, "Compliance Enforcement Authority" (CEA) means NERC or the Regional Entity in their respective roles of monitoring and enforcing compliance with the NERC Reliability Standards.

1.2. Evidence Retention:

The following evidence retention periods identify the period of time an entity is required to retain specific evidence to demonstrate compliance. For instances where the evidence retention period specified below is shorter than the time since the last audit, the CEA may ask an entity to provide other evidence to show that it was compliant for the full time period since the last audit.

The Responsible Entity shall keep data or evidence to show compliance as identified below unless directed by its CEA to retain specific evidence for a longer period of time as part of an investigation:

- Each Responsible Entity shall retain evidence of each requirement in this standard for three calendar years.
- If a Responsible Entity is found non-compliant, it shall keep information related to the non-compliance until mitigation is complete and approved or for the time specified above, whichever is longer.
- The CEA shall keep the last audit records and all requested and submitted subsequent audit records.

1.3. Compliance Monitoring and Assessment Processes:

Compliance Audits

Self-Certifications

Spot Checking

Compliance Violation Investigations

Self-Reporting

Complaints

1.4. Additional Compliance Information:

None

2. Table of Compliance Elements

R #	Time	VRF		Violation Severi	ty Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
R1	Operations Planning	Medium	The Responsible Entity has documented and implemented a configuration change management process(es) that includes only four of the required baseline items listed in 1.1.1 through 1.1.5. (1.1)	The Responsible Entity has documented and implemented a configuration change management process(es) that includes only three of the required baseline items listed in 1.1.1 through 1.1.5. (1.1)	The Responsible Entity has documented and implemented a configuration change management process(es) that includes only two of the required baseline items listed in 1.1.1 through 1.1.5. (1.1)	The Responsible Entity has not documented or implemented any configuration change management process(es). (R1) OR The Responsible Entity has documented and implemented a configuration change management process(es) that includes only one of the required baseline items listed in 1.1.1 through 1.1.5. (1.1) OR The Responsible Entity does not have a process(es) that

R #	Time	VRF		Violation Severity	Levels (CIP-010-2)	
	Horizon	rizon	Lower VSL	Moderate VSL	High VSL	Severe VSL
						requires authorization and documentation of changes that deviate from the existing baseline configuration. (1.2) OR The Responsible Entity does not have a process(es) to update baseline configurations within 30 calendar days of completing a
						change(s) that deviates from the existing baseline configuration.(1.3)
						OR
						The Responsible Entity does not have a process(es) to determine required security controls in CIP-005 and CIP-007

R #	Time	VRF		Violation Severit	ty Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
						that could be impacted by a change(s) that deviates from the existing baseline configuration. (1.4.1) OR The Responsible Entity has a process(es) to determine required security controls in CIP-005 and CIP-007 that could be impacted by a change(s) that deviates from the existing baseline configuration but did not verify and document that the required controls were not adversely affected following the change. (1.4.2 & 1.4.3)

R #	Time	VRF		Violation Severity	y Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
						The Responsible Entity does not have a process for testing changes in an environment that models the baseline configuration prior to implementing a change that deviates from baseline configuration. (1.5.1) OR The Responsible Entity does not have a process to document the test
						results and, if using a test environment, document the differences between the test and production environments. (1.5.2)

R #	Time	VRF		Violation Severi	ty Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
R2	Operations Planning	Medium	N/A	N/A	N/A	The Responsible Entity has not documented or implemented a process(es) to monitor for, investigate, and document detected unauthorized changes to the baseline at least once every 35 calendar days. (2.1)
R3	Long-term Planning and Operations Planning	Medium	The Responsible Entity has implemented one or more documented vulnerability assessment processes for each of its applicable BES Cyber Systems, but has performed a vulnerability assessment more than 15 months, but less than 18 months,	The Responsible Entity has implemented one or more documented vulnerability assessment processes for each of its applicable BES Cyber Systems, but has performed a vulnerability assessment more than 18 months, but less than 21, months	The Responsible Entity has implemented one or more documented vulnerability assessment processes for each of its applicable BES Cyber Systems, but has performed a vulnerability assessment more than 21 months, but less than 24 months,	The Responsible Entity has not implemented any vulnerability assessment processes for one of its applicable BES Cyber Systems. (R3) OR The Responsible Entity has implemented one or more documented

R #	Time	Violation Severity Levels (CIP-010-2)			
	Horizon	Lower VSL	Moderate VSL	High VSL	Severe VSL
		since the last assessment on one of its applicable BES Cyber Systems. (3.1) OR The Responsible Entity has implemented one or more documented active vulnerability assessment processes for Applicable Systems, but has performed an active vulnerability assessment more than 36 months, but less than 39 months, since the last active assessment on one of its applicable BES Cyber Systems. (3.2)	since the last assessment on one of its applicable BES Cyber Systems. (3.1) OR The Responsible Entity has implemented one or more documented active vulnerability assessment processes for Applicable Systems, but has performed an active vulnerability assessment more than 39 months, but less than 42 months, since the last active assessment on one of its applicable BES Cyber Systems. (3.2)	since the last assessment on one of its applicable BES Cyber Systems. (3.1) OR The Responsible Entity has implemented one or more documented active vulnerability assessment processes for Applicable Systems, but has performed an active vulnerability assessment more than 42 months, but less than 45 months, since the last active assessment on one of its applicable BES Cyber Systems. (3.2)	vulnerability assessment processes for each of its applicable BES Cyber Systems, but has performed a vulnerability assessment more than 24 months since the last assessment on one of its applicable BES Cyber Systems. (3.1) OR The Responsible Entity has implemented one or more documented active vulnerability assessment processes for Applicable Systems, but has performed an active vulnerability assessment more than 45 months since the last active

R #	Time	VRF		Violation Severity	Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
						assessment on one of its applicable BES Cyber Systems.(3.2)
						OR
						The Responsible Entity has implemented and documented one or more vulnerability assessment processes for each of its applicable BES Cyber Systems, but did not perform the active vulnerability assessment in a manner that models an existing baseline configuration of its applicable BES Cyber Systems. (3.3)
						OR
						The Responsible Entity has implemented one or more documented

R #	Time	VRF		Violation Severi	ty Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
						vulnerability assessment processes for each of its applicable BES Cyber Systems, but has not documented the results of the vulnerability assessments, the action plans to remediate or mitigate vulnerabilities identified in the assessments, the planned date of completion of the action plan, and the execution status of the mitigation plans. (3.4)
R4	Long-term Planning and Operations Planning	Medium	The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to	The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to	The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to	The Responsible Entity failed to document or implement one or more plan(s) for Transient Cyber Assets and

R #	Time	VRF		Violation Severi	ity Levels (CIP-010-2)	
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
			manage its Transient Cyber Asset(s) according to CIP-010-2, Requirement R4, Attachment 1, Section 1.1. (R4)	implement the Removable Media sections according to CIP-010-2, Requirement R4, Attachment 1, Section 3. (R4)	authorize its Transient Cyber Asset(s) according to CIP-010-2, Requirement R4, Attachment 1, Section 1.2. (R4)	Removable Media according to CIP-010- 2, Requirement R4. (R4)
			OR	OR	OR	
			The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to document the Removable Media sections according to CIP-010-2,	The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media plan, but failed to document mitigation of software vulnerabilities, mitigation for the	The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to implement mitigation of software vulnerabilities,	
			Requirement R4, Attachment 1,	introduction of malicious code, or	mitigation for the introduction of	
			Section 3. (R4) OR	mitigation of the risk of unauthorized use for Transient Cyber	malicious code, or mitigation of the risk of unauthorized use	
			The Responsible Entity documented its plan(s) for	Assets managed by the Responsible Entity according to	for Transient Cyber Assets managed by the Responsible	

	Time	VRF	Violation Severity Levels (CIP-010-2)			
HC	orizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
			Transient Cyber Assets and Removable Media, but failed to document authorization for Transient Cyber Assets managed by the Responsible Entity according to CIP-010-2, Requirement R4, Attachment 1, Section 1.2. (R4)	CIP-010-2, Requirement R4, Attachment 1, Sections 1.3, 1.4, and 1.5. (R4) OR The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to document mitigation of software vulnerabilities or mitigation for the introduction of malicious code for Transient Cyber Assets managed by a party other than the Responsible Entity according to CIP-010- 2, Requirement R4, Attachment 1, Sections 2.1, 2.2, and	Entity according to CIP-010-2, Requirement R4, Attachment 1, Sections 1.3, 1.4, and 1.5. (R4) OR The Responsible Entity documented its plan(s) for Transient Cyber Assets and Removable Media, but failed to implement mitigation of software vulnerabilities or mitigation for the introduction of malicious code for Transient Cyber Assets managed by a party other than the Responsible Entity according to CIP- 010-2, Requirement	

R#	Time Horizon	VRF	Violation Severity Levels (CIP-010-2)			
			Lower VSL	Moderate VSL	High VSL	Severe VSL
				2.3. (R4)	R4, Attachment 1, Sections 2.1, 2.2, and 2.3. (R4)	

D. Regional Variances

None.

E. Interpretations

None.

F. Associated Documents

Guideline and Technical Basis (attached).

Version History

Version	Date	Action	Change Tracking
1	11/26/12	Adopted by the NERC Board of Trustees.	Developed to define the configuration change management and vulnerability assessment requirements in coordination with other CIP standards and to address the balance of the FERC directives in its Order 706.
1	11/22/13	FERC Order issued approving CIP-010-1. (Order becomes effective on 2/3/14.)	
2	11/13/14	Adopted by the NERC Board of Trustees.	Addressed two FERC directives from Order No. 791 related to identify, assess, and correct language and communication networks.
2	2/12/15	Adopted by the NERC Board of Trustees.	Replaces the version adopted by the Board on 11/13/2014. Revised version addresses remaining directives from Order No. 791 related to transient devices and low impact BES Cyber Systems.
2	1/21/16	FERC Order issued approving CIP-010-2. Docket No. RM15-14-000	

CIP-010-2 - Attachment 1

Required Sections for Plans for Transient Cyber Assets and Removable Media

Responsible Entities shall include each of the sections provided below in their plan(s) for Transient Cyber Assets and Removable Media as required under Requirement R4.

- **Section 1.** Transient Cyber Asset(s) Managed by the Responsible Entity.
 - 1.1. <u>Transient Cyber Asset Management</u>: Responsible Entities shall manage Transient Cyber Asset(s), individually or by group: (1) in an ongoing manner to ensure compliance with applicable requirements at all times, (2) in an on-demand manner applying the applicable requirements before connection to a BES Cyber System, or (3) a combination of both (1) and (2) above.
 - **1.2.** <u>Transient Cyber Asset Authorization</u>: For each individual or group of Transient Cyber Asset(s), each Responsible Entity shall authorize:
 - **1.2.1.** Users, either individually or by group or role;
 - **1.2.2.** Locations, either individually or by group; and
 - **1.2.3.** Uses, which shall be limited to what is necessary to perform business functions.
 - **1.3.** <u>Software Vulnerability Mitigation</u>: Use one or a combination of the following methods to achieve the objective of mitigating the risk of vulnerabilities posed by unpatched software on the Transient Cyber Asset (per Transient Cyber Asset capability):
 - Security patching, including manual or managed updates;
 - Live operating system and software executable only from read-only media;
 - System hardening; or
 - Other method(s) to mitigate software vulnerabilities.
 - **1.4.** <u>Introduction of Malicious Code Mitigation</u>: Use one or a combination of the following methods to achieve the objective of mitigating the introduction of malicious code (per Transient Cyber Asset capability):
 - Antivirus software, including manual or managed updates of signatures or patterns;
 - Application whitelisting; or
 - Other method(s) to mitigate the introduction of malicious code.
 - **1.5.** <u>Unauthorized Use Mitigation</u>: Use one or a combination of the following methods to achieve the objective of mitigating the risk of unauthorized use of Transient Cyber Asset(s):

- Restrict physical access;
- Full-disk encryption with authentication;
- Multi-factor authentication; or
- Other method(s) to mitigate the risk of unauthorized use.
- **Section 2.** Transient Cyber Asset(s) Managed by a Party Other than the Responsible Entity.
 - 2.1 <u>Software Vulnerabilities Mitigation</u>: Use one or a combination of the following methods to achieve the objective of mitigating the risk of vulnerabilities posed by unpatched software on the Transient Cyber Asset (per Transient Cyber Asset capability):
 - Review of installed security patch(es);
 - Review of security patching process used by the party;
 - Review of other vulnerability mitigation performed by the party; or
 - Other method(s) to mitigate software vulnerabilities.
 - 2.2 <u>Introduction of malicious code mitigation</u>: Use one or a combination of the following methods to achieve the objective of mitigating malicious code (per Transient Cyber Asset capability):
 - Review of antivirus update level;
 - Review of antivirus update process used by the party;
 - Review of application whitelisting used by the party;
 - Review use of live operating system and software executable only from readonly media;
 - Review of system hardening used by the party; or
 - Other method(s) to mitigate malicious code.
 - **2.3** For any method used to mitigate software vulnerabilities or malicious code as specified in 2.1 and 2.2, Responsible Entities shall determine whether any additional mitigation actions are necessary and implement such actions prior to connecting the Transient Cyber Asset.

Section 3. Removable Media

- **3.1.** Removable Media Authorization: For each individual or group of Removable Media, each Responsible Entity shall authorize:
 - **3.1.1.** Users, either individually or by group or role; and
 - **3.1.2.** Locations, either individually or by group.

- **3.2.** <u>Malicious Code Mitigation</u>: To achieve the objective of mitigating the threat of introducing malicious code to high impact or medium impact BES Cyber Systems and their associated Protected Cyber Assets, each Responsible Entity shall:
 - **3.2.1.** Use method(s) to detect malicious code on Removable Media using a Cyber Asset other than a BES Cyber System or Protected Cyber Assets; and
 - **3.2.2.** Mitigate the threat of detected malicious code on Removable Media prior to connecting the Removable Media to a high impact or medium impact BES Cyber System or associated Protected Cyber Assets.

CIP-010-2 - Attachment 2

Examples of Evidence for Plans for Transient Cyber Assets and Removable Media

- Section 1.1: Examples of evidence for Section 1.1 may include, but are not limited to, the method(s) of management for the Transient Cyber Asset(s). This can be included as part of the Transient Cyber Asset plan(s), part of the documentation related to authorization of Transient Cyber Asset(s) managed by the Responsible Entity or part of a security policy.
- Section 1.2: Examples of evidence for Section 1.2 may include, but are not limited to, documentation from asset management systems, human resource management systems, or forms or spreadsheets that show authorization of Transient Cyber Asset(s) managed by the Responsible Entity. Alternatively, this can be documented in the overarching plan document.
- Section 1.3: Examples of evidence for Section 1.3 may include, but are not limited to, documentation of the method(s) used to mitigate software vulnerabilities posed by unpatched software such as security patch management implementation, the use of live operating systems from read-only media, system hardening practices or other method(s) to mitigate the software vulnerability posed by unpatched software. Evidence can be from change management systems, automated patch management solutions, procedures or processes associated with using live operating systems, or procedures or processes associated with system hardening practices. If a Transient Cyber Asset does not have the capability to use method(s) that mitigate the risk from unpatched software, evidence may include documentation by the vendor or Responsible Entity that identifies that the Transient Cyber Asset does not have the capability.
- Section 1.4: Examples of evidence for Section 1.4 may include, but are not limited to, documentation of the method(s) used to mitigate the introduction of malicious code such as antivirus software and processes for managing signature or pattern updates, application whitelisting practices, processes to restrict communication, or other method(s) to mitigate the introduction of malicious code. If a Transient Cyber Asset does not have the capability to use method(s) that mitigate the introduction of malicious code, evidence may include documentation by the vendor or Responsible Entity that identifies that the Transient Cyber Asset does not have the capability.
- Section 1.5: Examples of evidence for Section 1.5 may include, but are not limited to, documentation through policies or procedures of the method(s) to restrict physical access; method(s) of the full-disk encryption solution along with the authentication protocol; method(s) of the multi-factor authentication solution; or documentation of other method(s) to mitigate the risk of unauthorized use.

- Section 2.1: Examples of evidence for Section 2.1 may include, but are not limited to, documentation from change management systems, electronic mail or procedures that document a review of installed security patch(es); memoranda, electronic mail, policies or contracts from parties other than the Responsible Entity that identify the security patching process or vulnerability mitigation performed by the party other than the Responsible Entity; evidence from change management systems, electronic mail, system documentation or contracts that identifies acceptance by the Responsible Entity that the practices of the party other than the Responsible Entity are acceptable; or documentation of other method(s) to mitigate software vulnerabilities for Transient Cyber Asset(s) managed by a party other than the Responsible Entity. If a Transient Cyber Asset does not have the capability to use method(s) that mitigate the risk from unpatched software, evidence may include documentation by the Responsible Entity or the party other than the Responsible Entity that identifies that the Transient Cyber Asset does not have the capability.
- Section 2.2: Examples of evidence for Section 2.2 may include, but are not limited to, documentation from change management systems, electronic mail or procedures that document a review of the installed antivirus update level; memoranda, electronic mail, system documentation, policies or contracts from the party other than the Responsible Entity that identify the antivirus update process, the use of application whitelisting, use of live of operating systems or system hardening performed by the party other than the Responsible Entity; evidence from change management systems, electronic mail or contracts that identifies the Responsible Entity's acceptance that the practices of the party other than the Responsible Entity are acceptable; or documentation of other method(s) to mitigate malicious code for Transient Cyber Asset(s) managed by a party other than the Responsible Entity. If a Transient Cyber Asset does not have the capability to use method(s) that mitigate the introduction of malicious code, evidence may include documentation by the Responsible Entity or the party other than the Responsible Entity that identifies that the Transient Cyber Asset does not have the capability.
- Section 2.3: Examples of evidence for Section 2.3 may include, but are not limited to, documentation from change management systems, electronic mail, or contracts that identifies a review to determine whether additional mitigations are necessary and that they have been implemented prior to connecting the Transient Cyber Asset managed by a party other than the Responsible Entity.
- Section 3.1: Examples of evidence for Section 3.1 may include, but are not limited to, documentation from asset management systems, human resource management systems, forms or spreadsheets that shows authorization of Removable Media. The documentation must identify Removable Media, individually or by group of Removable Media, along with the authorized users,

either individually or by group or role, and the authorized locations, either individually or by group.

Section 3.2: Examples of evidence for Section 3.2 may include, but are not limited to, documented process(es) of the method(s) used to mitigate malicious code such as results of scan settings for Removable Media, or implementation of ondemand scanning. Documented process(es) for the method(s) used for mitigating the threat of detected malicious code on Removable Media, such as logs from the method(s) used to detect malicious code that show the results of scanning and that show mitigation of detected malicious code on Removable Media or documented confirmation by the entity that the Removable Media was deemed to be free of malicious code.

Guidelines and Technical Basis

Section 4 – Scope of Applicability of the CIP Cyber Security Standards

Section "4. Applicability" of the standards provides important information for Responsible Entities to determine the scope of the applicability of the CIP Cyber Security Requirements.

Section "4.1. Functional Entities" is a list of NERC functional entities to which the standard applies. If the entity is registered as one or more of the functional entities listed in Section 4.1, then the NERC CIP Cyber Security Standards apply. Note that there is a qualification in Section 4.1 that restricts the applicability in the case of Distribution Providers to only those that own certain types of systems and equipment listed in 4.2.

Section "4.2. Facilities" defines the scope of the Facilities, systems, and equipment owned by the Responsible Entity, as qualified in Section 4.1, that is subject to the requirements of the standard. As specified in the exemption section 4.2.3.5, this standard does not apply to Responsible Entities that do not have High Impact or Medium Impact BES Cyber Systems under CIP-002-5.1's categorization. In addition to the set of BES Facilities, Control Centers, and other systems and equipment, the list includes the set of systems and equipment owned by Distribution Providers. While the NERC Glossary term "Facilities" already includes the BES characteristic, the additional use of the term BES here is meant to reinforce the scope of applicability of these Facilities where it is used, especially in this applicability scoping section. This in effect sets the scope of Facilities, systems, and equipment that is subject to the standards.

Requirement R1:

Baseline Configuration

The concept of establishing a Cyber Asset's baseline configuration is meant to provide clarity on requirement language found in previous CIP standard versions. Modification of any item within an applicable Cyber Asset's baseline configuration provides the triggering mechanism for when entities must apply change management processes.

Baseline configurations in CIP-010 consist of five different items: Operating system/firmware, commercially available software or open-source application software, custom software, logical network accessible port identification, and security patches. Operating system information identifies the software and version that is in use on the Cyber Asset. In cases where an independent operating system does not exist (such as for a protective relay), then firmware information should be identified. Commercially available or open-source application software identifies applications that were intentionally installed on the cyber asset. The use of the term "intentional" was meant to ensure that only software applications that were determined to be necessary for Cyber Asset use should be included in the baseline configuration. The SDT does not intend for notepad, calculator, DLL, device drivers, or other applications included in an operating system package as commercially available or open-source application software to be included. Custom software installed may include scripts developed for local entity functions or other custom software developed for a specific task or function for the entity's use. If

additional software was intentionally installed and is not commercially available or open-source, then this software could be considered custom software. If a specific device needs to communicate with another device outside the network, communications need to be limited to only the devices that need to communicate per the requirement in CIP-007-6. Those ports which are accessible need to be included in the baseline. Security patches applied would include all historical and current patches that have been applied on the cyber asset. While CIP-007-6 Requirement R2, Part 2.1 requires entities to track, evaluate, and install security patches, CIP-010 Requirement R1, Part 1.1.5 requires entities to list all applied historical and current patches.

Further guidance can be understood with the following example that details the baseline configuration for a serial-only microprocessor relay:

Asset #051028 at Substation Alpha

- R1.1.1 Firmware: [MANUFACTURER]-[MODEL]-XYZ-1234567890-ABC
- R1.1.2 Not Applicable
- R1.1.3 Not Applicable
- R1.1.4 Not Applicable
- R1.1.5 Patch 12345, Patch 67890, Patch 34567, Patch 437823

Also, for a typical IT system, the baseline configuration could reference an IT standard that includes configuration details. An entity would be expected to provide that IT standard as part of their compliance evidence.

Cyber Security Controls

The use of cyber security controls refers specifically to controls referenced and applied according to CIP-005 and CIP-007. The concept presented in the relevant requirement subparts in CIP-010 R1 is that an entity is to identify/verify controls from CIP-005 and CIP-007 that could be impacted for a change that deviates from the existing baseline configuration. The SDT does not intend for Responsible Entities to identify/verify all controls located within CIP-005 and CIP-007 for each change. The Responsible Entity is only to identify/verify those control(s) that could be affected by the baseline configuration change. For example, changes that affect logical network ports would only involve CIP-007 R1 (Ports and Services), while changes that affect security patches would only involve CIP-007 R2 (Security Patch Management). The SDT chose not to identify the specific requirements from CIP-005 and CIP-007 in CIP-010 language as the intent of the related requirements is to be able to identify/verify any of the controls in those standards that are affected as a result of a change to the baseline configuration. The SDT believes it possible that all requirements from CIP-005 and CIP-007 may be identified for a

major change to the baseline configuration, and therefore, CIP-005 and CIP-007 was cited at the standard-level versus the requirement-level.

Test Environment

The Control Center test environment (or production environment where the test is performed in a manner that minimizes adverse effects) should model the baseline configuration, but may have a different set of components. For instance, an entity may have a BES Cyber System that runs a database on one component and a web server on another component. The test environment may have the same operating system, security patches, network accessible ports, and software, but have both the database and web server running on a single component instead of multiple components.

Additionally, the Responsible Entity should note that wherever a test environment (or production environment where the test is performed in a manner that minimizes adverse effects) is mentioned, the requirement is to "model" the baseline configuration and not duplicate it exactly. This language was chosen deliberately in order to allow for individual elements of a BES Cyber System at a Control Center to be modeled that may not otherwise be able to be replicated or duplicated exactly; such as, but not limited to, a legacy map-board controller or the numerous data communication links from the field or to other Control Centers (such as by ICCP).

Software Integrity and Authenticity

The concept of verifying software integrity and authenticity is a key control in preventing the introduction of malware or counterfeit software. This objective is intended to reduce the likelihood that an attacker could exploit legitimate vendor patch management processes to deliver compromised software updates or patches to a BES Cyber System. The intent of the SDT is to provide controls for verifying the baseline elements that are updated by vendors. It is important to note that this is not limited to only security patches. That is why the requirement was not placed in CIP-007 security patch management.

NIST SP-800-161 includes a number of security controls, which, when taken together, reduce the probability of a successful "Watering Hole" or similar cyberattack in the industrial control system environment and thus could assist in addressing this objective. For example, in the System and Information Integrity (SI) control family, control SI-7 suggests that the integrity of information systems and obtaining software directly from the developer. In the Configuration Management (CM) control family, control CM-5(3) requires that the information system prevent the installation of firmware of software without the verification that the component has been digitally signed to ensure that the hardware and software components are genuine and valid. NIST SP-800-161, while not meant to be definitive, provides examples of controls for addressing this objective. Other controls also could meet this objective.

It is not the intent of the SDT to require a verification of each source or software update at the time it is obtained. It is sufficient to establish the reliable source and software update once. This will allow automated solutions to be implemented to obtain frequent updates such as patches. You can't trust your software if you don't trust your source. In reviewing the updates, the it is first imperativestep is to identify trustworthy vendors and then the sources for obtaining the updates. It is not the intent of the SDT to require a reviewverification of each source or update at the time it is obtained. It is sufficient to establish the reliable source once. This will allow automated solutions to be implemented to obtain frequent updates such as patches. Entities should remember that they are expected to be compliant with this requirement at all times. Entities should use care and review these automated solutions routinely to ensure that sources are still valid. Simply configuring the system once and forgetting about it should be avoided.

Requirement R2:

The SDT's intent of R2 is to require automated monitoring of the BES Cyber System. However, the SDT understands that there may be some Cyber Assets where automated monitoring may not be possible (such as a GPS time clock). For that reason, automated technical monitoring was not explicitly required, and a Responsible Entity may choose to accomplish this requirement through manual procedural controls.

Requirement R3:

The Responsible Entity should note that the requirement provides a distinction between paper and active vulnerability assessments. The justification for this distinction is well-documented in FERC Order No. 706 and its associated Notice of Proposed Rulemaking. In developing their vulnerability assessment processes, Responsible Entities are strongly encouraged to include at least the following elements, several of which are referenced in CIP-005 and CIP-007:

Paper Vulnerability Assessment:

- 1. Network Discovery A review of network connectivity to identify all Electronic Access Points to the Electronic Security Perimeter.
- 2. Network Port and Service Identification A review to verify that all enabled ports and services have an appropriate business justification.
- Vulnerability Review A review of security rule-sets and configurations including controls for default accounts, passwords, and network management community strings.
- 4. Wireless Review Identification of common types of wireless networks (such as 802.11a/b/g/n) and a review of their controls if they are in any way used for BES Cyber System communications.

Active Vulnerability Assessment:

- Network Discovery Use of active discovery tools to discover active devices and identify communication paths in order to verify that the discovered network architecture matches the documented architecture.
- 2. Network Port and Service Identification Use of active discovery tools (such as Nmap) to discover open ports and services.
- 3. Vulnerability Scanning Use of a vulnerability scanning tool to identify network accessible ports and services along with the identification of known vulnerabilities associated with services running on those ports.
- 4. Wireless Scanning Use of a wireless scanning tool to discover wireless signals and networks in the physical perimeter of a BES Cyber System. Serves to identify unauthorized wireless devices within the range of the wireless scanning tool.

In addition, Responsible Entities are strongly encouraged to review NIST SP800-115 for additional guidance on how to conduct a vulnerability assessment.

Requirement R4:

Because most BES Cyber Assets and BES Cyber Systems are isolated from external public or untrusted networks, Transient Cyber Assets and Removable Media are a means for cyberattack. Transient Cyber Assets and Removable Media are often the only way to transport files to and from secure areas to maintain, monitor, or troubleshoot critical systems. To protect the BES Cyber Assets and BES Cyber Systems, entities are required to document and implement a plan for how they will manage the use of Transient Cyber Assets and Removable Media. The approach of defining a plan allows the Responsible Entity to document the processes that are supportable within its organization and in alignment with its change management processes.

Transient Cyber Assets and Removable Media are those devices connected temporarily to: (1) a BES Cyber Asset, (2) a network within an ESP, or (3) a Protected Cyber Asset. Transient Cyber Assets and Removable Media do not provide BES reliability services and are not part of the BES Cyber Asset to which they are connected. Examples of these temporarily connected devices include, but are not limited to:

- Diagnostic test equipment;
- Packet sniffers;
- Equipment used for BES Cyber System maintenance;
- Equipment used for BES Cyber System configuration; or
- Equipment used to perform vulnerability assessments.

Transient Cyber Assets can be one of many types of devices from a specially-designed device for maintaining equipment in support of the BES to a platform such as a laptop, desktop, or tablet that may just interface with or run applications that support BES Cyber Systems and is capable of transmitting executable code. Removable Media in scope of this requirement can be in the

form of floppy disks, compact disks, USB flash drives, external hard drives, and other flash memory cards/drives that contain nonvolatile memory.

While the definitions of Transient Cyber Asset and Removable Media include a conditional provision that requires them to be connected for 30 days or less, Section 1.1 of Attachment 1 allows the Responsible Entity to include provisions in its plan(s) that allow continuous or ondemand treatment and application of controls independent of the connected state. Please note that for on-demand treatment, the requirements only apply when Transient Cyber Assets and Removable Media are being connected to a BES Cyber System or Protected Cyber Asset. Once the transient device is disconnected, the requirements listed herein are not applicable until that Transient Cyber Asset or Removable Media is to be reconnected to the BES Cyber Asset or Protected Cyber Asset.

The attachment was created to specify the capabilities and possible security methods available to Responsible Entities based upon asset type, ownership, and management.

With the list of options provided in Attachment 1 for each control area, the entity has the discretion to use the option(s) that is most appropriate. This includes documenting its approach for how and when the entity manages or reviews the Transient Cyber Asset under its control or under the control of parties other than the Responsible Entity. The entity should avoid implementing a security function that jeopardizes reliability by taking actions that would negatively impact the performance or support of the Transient Cyber Asset, BES Cyber Asset, or Protected Cyber Asset.

Vulnerability Mitigation

The terms "mitigate", "mitigating", and "mitigation" are used in the sections in Attachment 1 to address the risks posed by malicious code, software vulnerabilities, and unauthorized use when connecting Transient Cyber Assets and Removable Media. Mitigation in this context does not require that each vulnerability is individually addressed or remediated, as many may be unknown or not have an impact on the system to which the Transient Cyber Asset or Removable Media is connected. Mitigation is meant to reduce security risks presented by connecting the Transient Cyber Asset.

Per Transient Cyber Asset Capability

As with other CIP standards, the requirements are intended for an entity to use the method(s) that the system is capable of performing. The use of "per Transient Cyber Asset capability" is to eliminate the need for a Technical Feasibility Exception when it is understood that the device cannot use a method(s). For example, for malicious code, many types of appliances are not capable of implementing antivirus software; therefore, because it is not a capability of those types of devices, implementation of the antivirus software would not be required for those devices.

Requirement R4, Attachment 1, Section 1 - Transient Cyber Asset(s) Managed by the Responsible Entity

Section 1.1: Entities have a high level of control for the assets that they manage. The requirements listed herein allow entities the flexibility to either pre-authorize an inventory of

devices or authorize devices at the time of connection or use a combination of these methods. The devices may be managed individually or by group.

Section 1.2: Entities are to document and implement their process(es) to authorize the use of Transient Cyber Assets for which they have direct management. The Transient Cyber Assets may be listed individually or by asset type. To meet this requirement part, the entity is to document the following:

- 1.2.1 User(s), individually or by group/role, allowed to use the Transient Cyber Asset(s). This can be done by listing a specific person, department, or job function. Caution: consider whether these user(s) must also have authorized electronic access to the applicable system in accordance with CIP-004.
- 1.2.2 Locations where the Transient Cyber Assets may be used. This can be done by listing a specific location or a group of locations.
- 1.2.3 The intended or approved use of each individual, type, or group of Transient Cyber Asset. This should also include the software or application packages that are authorized with the purpose of performing defined business functions or tasks (e.g., used for data transfer, vulnerability assessment, maintenance, or troubleshooting purposes), and approved network interfaces (e.g., wireless, including near field communication or Bluetooth, and wired connections). Activities, and software or application packages, not specifically listed as acceptable should be considered as prohibited. It may be beneficial to educate individuals through the CIP-004 Security Awareness Program and Cyber Security Training Program about authorized and unauthorized activities or uses (e.g., using the device to browse the Internet or to check email or using the device to access wireless networks in hotels or retail locations).

Entities should exercise caution when using Transient Cyber Assets and ensure they do not have features enabled (e.g., wireless or Bluetooth features) in a manner that would allow the device to bridge an outside network to an applicable system. Doing so would cause the Transient Cyber Asset to become an unauthorized Electronic Access Point in violation of CIP-005, Requirement R1.

Attention should be paid to Transient Cyber Assets that may be used for assets in differing impact areas (i.e., high impact, medium impact, and low impact). These impact areas have differing levels of protection under the CIP requirements, and measures should be taken to prevent the introduction of malicious code from a lower impact area. An entity may want to consider the need to have separate Transient Cyber Assets for each impact level.

Section 1.3: Entities are to document and implement their process(es) to mitigate software vulnerabilities posed by unpatched software through the use of one or more of the protective measures listed. This needs to be applied based on the capability of the device. Recognizing there is a huge diversity of the types of devices that can be included as Transient Cyber Assets and the advancement in software vulnerability management solutions, options are listed that include the alternative for the entity to use a technology or process that effectively mitigates vulnerabilities.

- Security patching, including manual or managed updates provides flexibility to the Responsible Entity to determine how its Transient Cyber Asset(s) will be used. It is possible for an entity to have its Transient Cyber Asset be part of an enterprise patch process and receive security patches on a regular schedule or the entity can verify and apply security patches prior to connecting the Transient Cyber Asset to an applicable Cyber Asset. Unlike CIP-007, Requirement R2, there is no expectation of creating dated mitigation plans or other documentation other than what is necessary to identify that the Transient Cyber Asset is receiving appropriate security patches.
- Live operating system and software executable only from read-only media is
 provided to allow a protected operating system that cannot be modified to deliver
 malicious software. When entities are creating custom live operating systems, they
 should check the image during the build to ensure that there is not malicious
 software on the image.
- System hardening, also called operating system hardening, helps minimize security
 vulnerabilities by removing all non-essential software programs and utilities and only
 installing the bare necessities that the computer needs to function. While other
 programs may provide useful features, they can provide "back-door" access to the
 system, and should be removed to harden the system.
- When selecting to use other methods that mitigate software vulnerabilities to those listed, entities need to have documentation that identifies how the other method(s) meet the software vulnerability mitigation objective.

Section 1.4: Entities are to document and implement their process(es) to mitigate malicious code through the use of one or more of the protective measures listed. This needs to be applied based on the capability of the device. As with vulnerability management, there is diversity of the types of devices that can be included as Transient Cyber Assets and the advancement in malicious code protections. When addressing malicious code protection, the Responsible Entity should address methods deployed to deter, detect, or prevent malicious code. If malicious code is discovered, it must be removed or mitigated to prevent it from being introduced into the BES Cyber Asset or BES Cyber System. Entities should also consider whether the detected malicious code is a Cyber Security Incident.

- Antivirus software, including manual or managed updates of signatures or patterns, provides flexibility just as with security patching, to manage Transient Cyber Asset(s) by deploying antivirus or endpoint security tools that maintain a scheduled update of the signatures or patterns. Also, for devices that do not regularly connect to receive scheduled updates, entities may choose to scan the Transient Cyber Asset prior to connection to ensure no malicious software is present.
- Application whitelisting is a method of authorizing only the applications and processes that are necessary on the Transient Cyber Asset. This reduces the opportunity that malicious software could become resident, much less propagate, from the Transient Cyber Asset to the BES Cyber Asset or BES Cyber System.

- Restricted communication to limit the exchange of data to only the Transient Cyber Asset and the Cyber Assets to which it is connected by restricting or disabling serial or network (including wireless) communications on a managed Transient Cyber Asset can be used to minimize the opportunity to introduce malicious code onto the Transient Cyber Asset while it is not connected to BES Cyber Systems. This renders the device unable to communicate with devices other than the one to which it is connected.
- When selecting to use other methods that mitigate the introduction of malicious code to those listed, entities need to have documentation that identifies how the other method(s) meet the mitigation of the introduction of malicious code objective.

Section 1.5: Entities are to document and implement their process(es) to protect and evaluate Transient Cyber Assets to ensure they mitigate the risks that unauthorized use of the Transient Cyber Asset may present to the BES Cyber System. The concern addressed by this section is the possibility that the Transient Cyber Asset could be tampered with, or exposed to malware, while not in active use by an authorized person. Physical security of the Transient Cyber Asset is certainly a control that will mitigate this risk, but other tools and techniques are also available. The bulleted list of example protections provides some suggested alternatives.

- For restricted physical access, the intent is that the Transient Cyber Asset is maintained within a Physical Security Perimeter or other physical location or enclosure that uses physical access controls to protect the Transient Cyber Asset.
- Full disk encryption with authentication is an option that can be employed to protect a Transient Cyber Asset from unauthorized use. However, it is important that authentication be required to decrypt the device. For example, pre-boot authentication, or power-on authentication, provides a secure, tamper-proof environment external to the operating system as a trusted authentication layer. Authentication prevents data from being read from the hard disk until the user has confirmed they have the correct password or other credentials. By performing the authentication prior to the system decrypting and booting, the risk that an unauthorized person may manipulate the Transient Cyber Asset is mitigated.
- Multi-factor authentication is used to ensure the identity of the person accessing the device. Multi-factor authentication also mitigates the risk that an unauthorized person may manipulate the Transient Cyber Asset.
- In addition to authentication and pure physical security methods, other alternatives are available that an entity may choose to employ. Certain theft recovery solutions can be used to locate the Transient Cyber Asset, detect access, remotely wipe, and lockout the system, thereby mitigating the potential threat from unauthorized use if the Transient Cyber Asset was later connected to a BES Cyber Asset. Other low tech solutions may also be effective to mitigate the risk of using a maliciously-manipulated Transient Cyber Asset, such as tamper evident tags or seals, and executing procedural controls to verify the integrity of the tamper evident tag or seal prior to use.

• When selecting to use other methods that mitigate the risk of unauthorized use to those listed, entities need to have documentation that identifies how the other method(s) meet the mitigation of the risk of unauthorized use objective.

Requirement R4, Attachment 1, Section 2 - Transient Cyber Asset(s) Managed by a Party Other than the Responsible Entity

The attachment also recognizes the lack of control for Transient Cyber Assets that are managed by parties other than the Responsible Entity. However, this does not obviate the Responsible Entity's responsibility to ensure that methods have been deployed to deter, detect, or prevent malicious code on Transient Cyber Assets it does not manage. The requirements listed herein allow entities the ability to review the assets to the best of their capability and to meet their obligations.

To facilitate these controls, Responsible Entities may choose to execute agreements with other parties to provide support services to BES Cyber Systems and BES Cyber Assets that may involve the use of Transient Cyber Assets. Entities may consider using the Department of Energy Cybersecurity Procurement Language for Energy Delivery dated April 2014. ¹ Procurement language may unify the other party and entity actions supporting the BES Cyber Systems and BES Cyber Assets. CIP program attributes may be considered including roles and responsibilities, access controls, monitoring, logging, vulnerability, and patch management along with incident response and back up recovery may be part of the other party's support. Entities should consider the "General Cybersecurity Procurement Language" and "The Supplier's Life Cycle Security Program" when drafting Master Service Agreements, Contracts, and the CIP program processes and controls.

Section 2.1: Entities are to document and implement their process(es) to mitigate software vulnerabilities through the use of one or more of the protective measures listed.

- Conduct a review of the Transient Cyber Asset managed by a party other than the Responsible Entity to determine whether the security patch level of the device is adequate to mitigate the risk of software vulnerabilities before connecting the Transient Cyber Asset to an applicable system.
- Conduct a review of the other party's security patching process. This can be done either
 at the time of contracting but no later than prior to connecting the Transient Cyber
 Asset to an applicable system. Just as with reviewing the security patch level of the
 device, selecting to use this approach aims to ensure that the Responsible Entity has
 mitigated the risk of software vulnerabilities to applicable systems.
- Conduct a review of other processes that the other party uses to mitigate the risk of software vulnerabilities. This can be reviewing system hardening, application whitelisting, virtual machines, etc.

¹ http://www.energy.gov/oe/downloads/cybersecurity-procurement-language-energy-delivery-april-2014

 When selecting to use other methods to mitigate software vulnerabilities to those listed, entities need to have documentation that identifies how the other method(s) meet mitigation of the risk of software vulnerabilities.

Section 2.2: Entities are to document and implement their process(es) to mitigate the introduction of malicious code through the use of one or more of the protective measures listed.

- Review the use of antivirus software and signature or pattern levels to ensure that the level is adequate to the Responsible Entity to mitigate the risk of malicious software being introduced to an applicable system.
- Review the antivirus or endpoint security processes of the other party to ensure that their processes are adequate to the Responsible Entity to mitigate the risk of introducing malicious software to an applicable system.
- Review the use of application whitelisting used by the other party to mitigate the risk of introducing malicious software to an applicable system.
- Review the use of live operating systems or software executable only from read-only media to ensure that the media is free from malicious software itself. Entities should review the processes to build the read-only media as well as the media itself.
- Review system hardening practices used by the other party to ensure that unnecessary ports, services, applications, etc. have been disabled or removed. This will limit the chance of introducing malicious software to an applicable system.

Section 2.3: Determine whether additional mitigation actions are necessary, and implement such actions prior to connecting the Transient Cyber Asset managed by a party other than the Responsible Entity. The intent of this section is to ensure that after conducting the selected review from Sections 2.1 and 2.2, if there are deficiencies that do not meet the Responsible Entity's security posture, the other party is required to complete the mitigations prior to connecting their devices to an applicable system.

Requirement R4, Attachment 1, Section 3 - Removable Media

Entities have a high level of control for Removable Media that are going to be connected to their BES Cyber Assets.

Section 3.1: Entities are to document and implement their process(es) to authorize the use of Removable Media. The Removable Media may be listed individually or by type.

- Document the user(s), individually or by group/role, allowed to use the Removable Media. This can be done by listing a specific person, department, or job function. Authorization includes vendors and the entity's personnel. Caution: consider whether these user(s) must have authorized electronic access to the applicable system in accordance with CIP-004.
- Locations where the Removable Media may be used. This can be done by listing a specific location or a group/role of locations.

Section 3.2: Entities are to document and implement their process(es) to mitigate the introduction of malicious code through the use of one or more method(s) to detect malicious code on the Removable Media before it is connected to a BES Cyber Asset. When using the method(s) to detect malicious code, it is expected to occur from a system that is not part of the BES Cyber System to reduce the risk of propagating malicious code into the BES Cyber System network or onto one of the BES Cyber Assets. If malicious code is discovered, it must be removed or mitigated to prevent it from being introduced into the BES Cyber Asset or BES Cyber System. Entities should also consider whether the detected malicious code is a Cyber Security Incident. Frequency and timing of the methods used to detect malicious code were intentionally excluded from the requirement because there are multiple timing scenarios that can be incorporated into a plan to mitigate the risk of malicious code. The entities must use the method(s) to detect malicious code on Removable Media before it is connected to the BES Cyber Asset. The timing dictated and documented in the entity's plan should reduce the risk of introducing malicious code to the BES Cyber Asset or Protected Cyber Asset.

As a method to detect malicious code, entities may choose to use Removable Media with on-board malicious code detection tools. For these tools, the Removable Media are still used in conjunction with a Cyber Asset to perform the detection. For Section 3.2.1, the Cyber Asset used to perform the malicious code detection must be outside of the BES Cyber System or Protected Cyber Asset.

Rationale:

During development of this standard, text boxes were embedded within the standard to explain the rationale for various parts of the standard. Upon BOT approval, the text from the rationale text boxes was moved to this section.

Rationale for Requirement R1:

The configuration change management processes are intended to prevent unauthorized modifications to BES Cyber Systems.

Rationale for Requirement R2:

The configuration monitoring processes are intended to detect unauthorized modifications to BES Cyber Systems.

Rationale for Requirement R3:

The vulnerability assessment processes are intended to act as a component in an overall program to periodically ensure the proper implementation of cyber security controls as well as to continually improve the security posture of BES Cyber Systems.

The vulnerability assessment performed for this requirement may be a component of deficiency identification, assessment, and correction.

Rationale for R4:

Requirement R4 responds to the directive in FERC Order No. 791, at Paragraphs 6 and 136, to address security-related issues associated with Transient Cyber Assets and Removable Media used on a temporary basis for tasks such as data transfer, vulnerability assessment, maintenance, or troubleshooting. These tools are potential vehicles for transporting malicious code into a facility and subsequently into Cyber Assets or BES Cyber Systems. To mitigate the risks associated with such tools, Requirement R4 was developed to accomplish the following security objectives:

- Preventing unauthorized access or malware propagation to BES Cyber Systems through Transient Cyber Assets or Removable Media; and
- Preventing unauthorized access to BES Cyber System Information through Transient Cyber Assets or Removable Media.

Requirement R4 incorporates the concepts from other CIP requirements in CIP-010-2 and CIP-007-6 to help define the requirements for Transient Cyber Assets and Removable Media.

Summary of Changes: All requirements related to Transient Cyber Assets and Removable Media are included within a single standard, CIP-010. Due to the newness of the requirements and definition of asset types, the SDT determined that placing the requirements in a single standard would help ensure that entities were able to quickly identify the requirements for these asset types. A separate standard was considered for these requirements. However, the SDT determined that these types of assets would be used in relation to change management and vulnerability assessment processes and should, therefore, be placed in the same standard as those processes.

A. Introduction

1. Title: Cyber Security — Electronic Security Perimeter(s)

2. Number: CIP-005-5

3. Purpose: To manage electronic access to BES Cyber Systems by specifying a controlled Electronic Security Perimeter in support of protecting BES Cyber Systems against compromise that could lead to misoperation or instability in the BES.

4. Applicability:

4.1. Functional Entities: For the purpose of the requirements contained herein, the following list of functional entities will be collectively referred to as "Responsible Entities." For requirements in this standard where a specific functional entity or subset of functional entities are the applicable entity or entities, the functional entity or entities are specified explicitly.

4.1.1. Balancing Authority

- **4.1.2. Distribution Provider** that owns one or more of the following Facilities, systems, and equipment for the protection or restoration of the BES:
 - **4.1.2.1.** Each underfrequency Load shedding (UFLS) or undervoltage Load shedding (UVLS) system that:
 - **4.1.2.1.1.** is part of a Load shedding program that is subject to one or more requirements in a NERC or Regional Reliability Standard; and
 - **4.1.2.1.2.** performs automatic Load shedding under a common control system owned by the Responsible Entity, without human operator initiation, of 300 MW or more.
 - **4.1.2.2.** Each Special Protection System or Remedial Action Scheme where the Special Protection System or Remedial Action Scheme is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.1.2.3.** Each Protection System (excluding UFLS and UVLS) that applies to Transmission where the Protection System is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.1.2.4.** Each Cranking Path and group of Elements meeting the initial switching requirements from a Blackstart Resource up to and including the first interconnection point of the starting station service of the next generation unit(s) to be started.

4.1.3. Generator Operator

- 4.1.4. Generator Owner
- 4.1.5. Interchange Coordinator or Interchange Authority
- 4.1.6. Reliability Coordinator
- 4.1.7. Transmission Operator
- 4.1.8. Transmission Owner
- **4.2. Facilities:** For the purpose of the requirements contained herein, the following Facilities, systems, and equipment owned by each Responsible Entity in 4.1 above are those to which these requirements are applicable. For requirements in this standard where a specific type of Facilities, system, or equipment or subset of Facilities, systems, and equipment are applicable, these are specified explicitly.
 - **4.2.1. Distribution Provider**: One or more of the following Facilities, systems and equipment owned by the Distribution Provider for the protection or restoration of the BES:
 - **4.2.1.1.** Each UFLS or UVLS System that:
 - **4.2.1.1.1.** is part of a Load shedding program that is subject to one or more requirements in a NERC or Regional Reliability Standard; and
 - **4.2.1.1.2.** performs automatic Load shedding under a common control system owned by the Responsible Entity, without human operator initiation, of 300 MW or more.
 - **4.2.1.2.** Each Special Protection System or Remedial Action Scheme where the Special Protection System or Remedial Action Scheme is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.2.1.3.** Each Protection System (excluding UFLS and UVLS) that applies to Transmission where the Protection System is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.2.1.4.** Each Cranking Path and group of Elements meeting the initial switching requirements from a Blackstart Resource up to and including the first interconnection point of the starting station service of the next generation unit(s) to be started.
 - **4.2.2.** Responsible Entities listed in **4.1** other than Distribution Providers: All BES Facilities.
 - **4.2.3. Exemptions:** The following are exempt from Standard CIP-005-5:

- **4.2.3.1.** Cyber Assets at Facilities regulated by the Canadian Nuclear Safety Commission.
- **4.2.3.2.** Cyber Assets associated with communication networks and data communication links between discrete Electronic Security Perimeters.
- **4.2.3.3.** The systems, structures, and components that are regulated by the Nuclear Regulatory Commission under a cyber security plan pursuant to 10 C.F.R. Section 73.54.
- **4.2.3.4.** For Distribution Providers, the systems and equipment that are not included in section 4.2.1 above.
- **4.2.3.5.** Responsible Entities that identify that they have no BES Cyber Systems categorized as high impact or medium impact according to the CIP-002-5 identification and categorization processes.

5. Effective Dates:

- **5.1. 24 Months Minimum** CIP-005-5 shall become effective on the later of July 1, 2015, or the first calendar day of the ninth calendar quarter after the effective date of the order providing applicable regulatory approval.
- **5.2.** In those jurisdictions where no regulatory approval is required, CIP-005-5 shall become effective on the first day of the ninth calendar quarter following Board of Trustees' approval, or as otherwise made effective pursuant to the laws applicable to such ERO governmental authorities.
- **6. Background:** Standard CIP-005-5 exists as part of a suite of CIP Standards related to cyber security. CIP-002-5 requires the initial identification and categorization of BES Cyber Systems. CIP-003-5, CIP-004-5, CIP-005-5, CIP-006-5, CIP-007-5, CIP-008-5, CIP-009-5, CIP-010-1, and CIP-011-1 require a minimum level of organizational, operational and procedural controls to mitigate risk to BES Cyber Systems. This suite of CIP Standards is referred to as the *Version 5 CIP Cyber Security Standards*.

Most requirements open with, "Each Responsible Entity shall implement one or more documented [processes, plan, etc] that include the applicable items in [Table Reference]." The referenced table requires the applicable items in the procedures for the requirement's common subject matter.

The term *documented processes* refers to a set of required instructions specific to the Responsible Entity and to achieve a specific outcome. This term does not imply any particular naming or approval structure beyond what is stated in the requirements. An entity should include as much as it believes necessary in their documented processes, but they must address the applicable requirements in the table.

The terms *program* and *plan* are sometimes used in place of *documented processes* where it makes sense and is commonly understood. For example, documented processes describing a response are typically referred to as *plans* (i.e., incident response plans and recovery plans). Likewise, a security plan can describe an approach involving multiple procedures to address a broad subject matter.

Similarly, the term *program* may refer to the organization's overall implementation of its policies, plans and procedures involving a subject matter. Examples in the standards include the personnel risk assessment program and the personnel training program. The full implementation of the CIP Cyber Security Standards could also be referred to as a program. However, the terms *program* and *plan* do not imply any additional requirements beyond what is stated in the standards.

Responsible Entities can implement common controls that meet requirements for multiple high and medium impact BES Cyber Systems. For example, a single training program could meet the requirements for training personnel across multiple BES Cyber Systems.

Measures for the initial requirement are simply the documented processes themselves. Measures in the table rows provide examples of evidence to show documentation and implementation of applicable items in the documented processes. These measures serve to provide guidance to entities in acceptable records of compliance and should not be viewed as an all-inclusive list.

Throughout the standards, unless otherwise stated, bulleted items in the requirements and measures are items that are linked with an "or," and numbered items are items that are linked with an "and."

Many references in the Applicability section use a threshold of 300 MW for UFLS and UVLS. This particular threshold of 300 MW for UVLS and UFLS was provided in Version 1 of the CIP Cyber Security Standards. The threshold remains at 300 MW since it is specifically addressing UVLS and UFLS, which are last ditch efforts to save the Bulk Electric System. A review of UFLS tolerances defined within regional reliability standards for UFLS program requirements to date indicates that the historical value of 300 MW represents an adequate and reasonable threshold value for allowable UFLS operational tolerances.

"Applicable Systems" Columns in Tables: Each table has an "Applicable Systems" column to further define the scope of systems to which a specific requirement row applies. The CSO706 SDT adapted this concept from the National Institute of Standards and Technology ("NIST") Risk Management Framework as a way of applying requirements more appropriately based on impact and connectivity characteristics. The following conventions are used in the "Applicable Systems" column as described.

- **High Impact BES Cyber Systems** Applies to BES Cyber Systems categorized as high impact according to the CIP-002-5 identification and categorization processes.
- **High Impact BES Cyber Systems with Dial-up Connectivity** Only applies to high impact BES Cyber Systems with Dial-up Connectivity.
- High Impact BES Cyber Systems with External Routable Connectivity Only
 applies to high impact BES Cyber Systems with External Routable Connectivity. This
 also excludes Cyber Assets in the BES Cyber System that cannot be directly
 accessed through External Routable Connectivity.
- Medium Impact BES Cyber Systems Applies to each BES Cyber Systems categorized as medium impact according to the CIP-002-5 identification and categorization processes.
- Medium Impact BES Cyber Systems at Control Centers Only applies to medium impact BES Cyber Systems located at a Control Center.
- Medium Impact BES Cyber Systems with Dial-up Connectivity Only applies to medium impact BES Cyber Systems with Dial-up Connectivity.
- Medium Impact BES Cyber Systems with External Routable Connectivity Only
 applies to medium impact BES Cyber Systems with External Routable Connectivity.
 This also excludes Cyber Assets in the BES Cyber System that cannot be directly
 accessed through External Routable Connectivity.
- Protected Cyber Assets (PCA) Applies to each Protected Cyber Asset associated with a referenced high impact BES Cyber System or medium impact BES Cyber System.
- Electronic Access Points (EAP) Applies at Electronic Access Points associated with a referenced high impact BES Cyber System or medium impact BES Cyber System.

B. Requirements and Measures

- **R1.** Each Responsible Entity shall implement one or more documented processes that collectively include each of the applicable requirement parts in CIP-005-5 Table R1 Electronic Security Perimeter. [Violation Risk Factor: Medium] [Time Horizon: Operations Planning and Same Day Operations].
- **M1.** Evidence must include each of the applicable documented processes that collectively include each of the applicable requirement parts in *CIP-005-5 Table R1 Electronic Security Perimeter* and additional evidence to demonstrate implementation as described in the Measures column of the table.

	CIP-005-5 Table R1 – Electronic Security Perimeter						
Part	Applicable Systems	Requirements	Measures				
1.1	High Impact BES Cyber Systems and their associated: • PCA Medium Impact BES Cyber Systems and their associated: • PCA	All applicable Cyber Assets connected to a network via a routable protocol shall reside within a defined ESP.	An example of evidence may include, but is not limited to, a list of all ESPs with all uniquely identifiable applicable Cyber Assets connected via a routable protocol within each ESP.				
1.2	High Impact BES Cyber Systems with External Routable Connectivity and their associated: • PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated: • PCA	All External Routable Connectivity must be through an identified Electronic Access Point (EAP).	An example of evidence may include, but is not limited to, network diagrams showing all external routable communication paths and the identified EAPs.				

	CIP-005-5 Table R1 – Electronic Security Perimeter						
Part	Applicable Systems	Requirements	Measures				
1.3	Electronic Access Points for High Impact BES Cyber Systems Electronic Access Points for Medium Impact BES Cyber Systems	Require inbound and outbound access permissions, including the reason for granting access, and deny all other access by default.	An example of evidence may include, but is not limited to, a list of rules (firewall, access control lists, etc.) that demonstrate that only permitted access is allowed and that each access rule has a documented reason.				
1.4	High Impact BES Cyber Systems with Dial-up Connectivity and their associated: • PCA Medium Impact BES Cyber Systems with Dial-up Connectivity and their associated: • PCA	Where technically feasible, perform authentication when establishing Dialup Connectivity with applicable Cyber Assets.	An example of evidence may include, but is not limited to, a documented process that describes how the Responsible Entity is providing authenticated access through each dial-up connection.				

	CIP-005-5 Table R1 – Electronic Security Perimeter						
Part	Applicable Systems	Requirements	Measures				
1.5	Electronic Access Points for High Impact BES Cyber Systems Electronic Access Points for Medium Impact BES Cyber Systems at Control Centers	Have one or more methods for detecting known or suspected malicious communications for both inbound and outbound communications.	An example of evidence may include, but is not limited to, documentation that malicious communications detection methods (e.g. intrusion detection system, application layer firewall, etc.) are implemented.				
1.6	Electronic Access Points for High Impact BES Cyber Systems Electronic Access Points for Medium Impact BES Cyber Systems	Log inbound and outbound access connections to the Electronic Security Perimeter.	 Examples of evidence may include, but is not limited to: configuration from the Cyber Asset in which the Electronic Access Point resides (e.g. firewall, access control lists, etc.) that demonstrates that all inbound access attempts are logged; Paper or system generated listing of events that demonstrate the logging of inbound access attempts. [HC1] 				

- **R2.** Each Responsible Entity allowing Interactive Remote Access to BES Cyber Systems shall implement one or more documented processes that collectively include the applicable requirement parts, where technically feasible, in CIP-005-5 Table R2 Interactive Remote Access Management. [Violation Risk Factor: Medium] [Time Horizon: Operations Planning and Same Day Operations].
- **M2.** Evidence must include the documented processes that collectively address each of the applicable requirement parts in *CIP-*005-5 Table R2 Interactive Remote Access Management and additional evidence to demonstrate implementation as described in the Measures column of the table.

	CIP-005-5 Table R2 – Interactive Remote Access Management					
Part	Applicable Systems	Requirements	Measures			
2.1	High Impact BES Cyber Systems and their associated: • PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated: • PCA	Utilize an Intermediate System such that the Cyber Asset initiating Interactive Remote Access does not directly access an applicable Cyber Asset.	Examples of evidence may include, but are not limited to, network diagrams or architecture documents.			
2.2	High Impact BES Cyber Systems and their associated: • PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated: • PCA	For all Interactive Remote Access sessions, utilize encryption that terminates at an Intermediate System.	An example of evidence may include, but is not limited to, architecture documents detailing where encryption initiates and terminates.			

	CIP-005-5 Table R2 – Interactive Remote Access Management						
Part	Applicable Systems	Requirements	Measures				
2.3	High Impact BES Cyber Systems and their associated: • PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated: • PCA	Require multi-factor authentication for all Interactive Remote Access sessions.	An example of evidence may include, but is not limited to, architecture documents detailing the authentication factors used. Examples of authenticators may include, but are not limited to, • Something the individual knows such as passwords or PINs. This does not include User ID; • Something the individual has such as tokens, digital certificates, or smart cards; or • Something the individual is such as fingerprints, iris scans, or other biometric characteristics.				

CIP-005-5 Table R2 – Interactive Remote Access Management							
Applicable Systems	Requirements	Measures					
High Impact BES Cyber Systems and their associated: • PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated: • PCA	Log initiation of all Interactive Remote Access sessions.	Examples of evidence may include, but is not limited to: Configuration from the Intermediate System that demonstrate that all Interactive Remote Access sessions are logged. Paper or system generated listing of events that demonstrate the logging of the initiation of all Interactive					
	Applicable Systems High Impact BES Cyber Systems and their associated: • PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated:	Applicable Systems High Impact BES Cyber Systems and their associated: PCA Medium Impact BES Cyber Systems with External Routable Connectivity and their associated: Requirements Log initiation of all Interactive Remote Access sessions.					

C. Compliance

1. Compliance Monitoring Process:

- 1.1. Compliance Enforcement Authority: The Regional Entity shall serve as the Compliance Enforcement Authority ("CEA") unless the applicable entity is owned, operated, or controlled by the Regional Entity. In such cases the ERO or a Regional Entity approved by FERC or other applicable governmental authority shall serve as the CEA.
- **1.2. Evidence Retention:** The following evidence retention periods identify the period of time an entity is required to retain specific evidence to demonstrate compliance. For instances where the evidence retention period specified below is shorter than the time since the last audit, the CEA may ask an entity to provide other evidence to show that it was compliant for the full time period since the last audit

The Responsible Entity shall keep data or evidence to show compliance as identified below unless directed by its CEA to retain specific evidence for a longer period of time as part of an investigation:

- Each Responsible Entity shall retain evidence of each requirement in this standard for three calendar years.
- If a Responsible Entity is found non-compliant, it shall keep information related to the non-compliance until mitigation is complete and approved or for the time specified above, whichever is longer.
- The CEA shall keep the last audit records and all requested and submitted subsequent audit records.

1.3. Compliance Monitoring and Assessment Processes:

- Compliance Audit
- Self-Certification
- Spot Checking
- Compliance Investigation
- Self-Reporting
- Complaint

1.4. Additional Compliance Information:

None.

Violation Severity Levels

	Time	VRF	Violation Severity Levels (CIP-005-5)			
R #	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
R1.	Operations Planning and Same Day Operations	Medium			The Responsible Entity did not have a method for detecting malicious communications for both inbound and outbound communications. (1.5)	The Responsible Entity did not document one or more processes for CIP-005-5 Table R1 – Electronic Security Perimeter. (R1) OR The Responsible Entity did not have all applicable Cyber Assets connected to a network via a routable protocol within a defined Electronic Security Perimeter (ESP). (1.1) OR External Routable Connectivity through the ESP was not through an identified EAP. (1.2) OR

	Time			Violation Severity	Levels (CIP-005-5)	
R #	Horizon VRF	VRF	Lower VSL	Moderate VSL	High VSL	Severe VSL
						The Responsible Entity did not require inbound and outbound access permissions and deny all other access by default. (1.3) OR The Responsible Entity did not perform authentication when establishing dial-up connectivity with the applicable Cyber Assets, where technically feasible. (1.4)
R2.	Operations	Medium	The Responsible Entity	The Responsible	The Responsible Entity	The Responsible Entity
	Planning and Same Day Operations		does not have documented processes for one or more of the applicable items for Requirement Parts 2.1 through 2.3.	Entity did not implement processes for one of the applicable items for Requirement Parts 2.1 through 2.3.	did not implement processes for two of the applicable items for Requirement Parts 2.1 through 2.3.	did not implement processes for three of the applicable items for Requirement Parts 2.1 through 2.3.

D. Regional Variances

None.

E. Interpretations

None.

F. Associated Documents

None.

Version History

Version	Date	Action	Change Tracking
1	1/16/06	R3.2 — Change "Control Center" to "control center."	3/24/06
2	9/30/09	Modifications to clarify the requirements and to bring the compliance elements into conformance with the latest guidelines for developing compliance elements of standards. Removal of reasonable business judgment. Replaced the RRO with the RE as a responsible entity. Rewording of Effective Date. Changed compliance monitor to Compliance Enforcement Authority.	
3	12/16/09	Updated version number from -2 to -3 Approved by the NERC Board of Trustees.	
3	3/31/10	Approved by FERC.	
4	12/30/10	Modified to add specific criteria for Critical Asset identification.	Update
4	1/24/11	Approved by the NERC Board of Trustees.	Update
5	11/26/12	Adopted by the NERC Board of Trustees.	Modified to coordinate with other CIP standards and to revise format to use RBS Template.
5	11/22/13	FERC Order issued approving CIP-005-5.	

Guidelines and Technical Basis

Section 4 – Scope of Applicability of the CIP Cyber Security Standards

Section "4. Applicability" of the standards provides important information for Responsible Entities to determine the scope of the applicability of the CIP Cyber Security Requirements.

Section "4.1. Functional Entities" is a list of NERC functional entities to which the standard applies. If the entity is registered as one or more of the functional entities listed in Section 4.1, then the NERC CIP Cyber Security Standards apply. Note that there is a qualification in Section 4.1 that restricts the applicability in the case of Distribution Providers to only those that own certain types of systems and equipment listed in 4.2. Furthermore,

Section "4.2. Facilities" defines the scope of the Facilities, systems, and equipment owned by the Responsible Entity, as qualified in Section 4.1, that is subject to the requirements of the standard. As specified in the exemption section 4.2.3.5, this standard does not apply to Responsible Entities that do not have High Impact or Medium Impact BES Cyber Systems under CIP-002-5's categorization. In addition to the set of BES Facilities, Control Centers, and other systems and equipment, the list includes the set of systems and equipment owned by Distribution Providers. While the NERC Glossary term "Facilities" already includes the BES characteristic, the additional use of the term BES here is meant to reinforce the scope of applicability of these Facilities where it is used, especially in this applicability scoping section. This in effect sets the scope of Facilities, systems, and equipment that is subject to the standards.

Requirement R1:

CIP-005-5, Requirement R1 requires segmenting of BES Cyber Systems from other systems of differing trust levels by requiring controlled Electronic Access Points between the different trust zones. Electronic Security Perimeters are also used as a primary defense layer for some BES Cyber Systems that may not inherently have sufficient cyber security functionality, such as devices that lack authentication capability.

All applicable BES Cyber Systems that are connected to a network via a routable protocol must have a defined Electronic Security Perimeter (ESP). Even standalone networks that have no external connectivity to other networks must have a defined ESP. The ESP defines a zone of protection around the BES Cyber System, and it also provides clarity for entities to determine what systems or Cyber Assets are in scope and what requirements they must meet. The ESP is used in:

- Defining the scope of 'Associated Protected Cyber Assets' that must also meet certain CIP requirements.
- Defining the boundary in which all of the Cyber Assets must meet the requirements of the highest impact BES Cyber System that is in the zone (the 'high water mark').

The CIP Cyber Security Standards do not require network segmentation of BES Cyber Systems by impact classification. Many different impact classifications can be mixed within an ESP.

However, all of the Cyber Assets and BES Cyber Systems within the ESP must be protected at the level of the highest impact BES Cyber System present in the ESP (i.e., the "high water mark") where the term "Protected Cyber Assets" is used. The CIP Cyber Security Standards accomplish the "high water mark" by associating all other Cyber Assets within the ESP, even other BES Cyber Systems of lesser impact, as "Protected Cyber Assets" of the highest impact system in the ESP.

For example, if an ESP contains both a high impact BES Cyber System and a low impact BES Cyber System, each Cyber Asset of the low impact BES Cyber System is an "Associated Protected Cyber Asset" of the high impact BES Cyber System and must meet all requirements with that designation in the applicability columns of the requirement tables.

If there is routable connectivity across the ESP into any Cyber Asset, then an Electronic Access Point (EAP) must control traffic into and out of the ESP. Responsible Entities should know what traffic needs to cross an EAP and document those reasons to ensure the EAPs limit the traffic to only those known communication needs. These include, but are not limited to, communications needed for normal operations, emergency operations, support, maintenance, and troubleshooting.

The EAP should control both inbound and outbound traffic. The standard added outbound traffic control, as it is a prime indicator of compromise and a first level of defense against zero day vulnerability-based attacks. If Cyber Assets within the ESP become compromised and attempt to communicate to unknown hosts outside the ESP (usually 'command and control' hosts on the Internet, or compromised 'jump hosts' within the Responsible Entity's other networks acting as intermediaries), the EAPs should function as a first level of defense in stopping the exploit. This does not limit the Responsible Entity from controlling outbound traffic at the level of granularity that it deems appropriate, and large ranges of internal addresses may be allowed. The SDT's intent is that the Responsible Entity knows what other Cyber Assets or ranges of addresses a BES Cyber System needs to communicate with and limits the communications to that known range. For example, most BES Cyber Systems within a Responsible Entity should not have the ability to communicate through an EAP to any network address in the world, but should probably be at least limited to the address space of the Responsible Entity, and preferably to individual subnet ranges or individual hosts within the Responsible Entity's address space. The SDT's intent is not for Responsible Entities to document the inner workings of stateful firewalls, where connections initiated in one direction are allowed a return path. The intent is to know and document what systems can talk to what other systems or ranges of systems on the other side of the EAP, such that rogue connections can be detected and blocked.

This requirement applies only to communications for which access lists and 'deny by default' type requirements can be universally applied, which today are those that employ routable protocols. Direct serial, non-routable connections are not included as there is no perimeter or firewall type security that should be universally mandated across all entities and all serial communication situations. There is no firewall or perimeter capability for an RS232 cable run

between two Cyber Assets. Without a clear 'perimeter type' security control that can be applied in practically every circumstance, such a requirement would mostly generate technical feasibility exceptions ("TFEs") rather than increased security.

As for dial-up connectivity, the Standard Drafting Team's intent of this requirement is to prevent situations where only a phone number can establish direct connectivity to the BES Cyber Asset. If a dial-up modem is implemented in such a way that it simply answers the phone and connects the line to the BES Cyber Asset with no authentication of the calling party, it is a vulnerability to the BES Cyber System. The requirement calls for some form of authentication of the calling party before completing the connection to the BES Cyber System. Some examples of acceptable methods include dial-back modems, modems that must be remotely enabled or powered up, and modems that are only powered on by onsite personnel when needed along with policy that states they are disabled after use. If the dial-up connectivity is used for Interactive Remote Access, then Requirement R2 also applies.

The standard adds a requirement to detect malicious communications for Control Centers. This is in response to FERC Order No. 706, Paragraphs 496-503, where ESPs are required to have two distinct security measures such that the BES Cyber Systems do not lose all perimeter protection if one measure fails or is misconfigured. The Order makes clear that this is not simply redundancy of firewalls, thus the SDT has decided to add the security measure of malicious traffic inspection as a requirement for these ESPs. Technologies meeting this requirement include Intrusion Detection or Intrusion Prevention Systems (IDS/IPS) or other forms of deep packet inspection. These technologies go beyond source/destination/port rule sets and thus provide another distinct security measure at the ESP.

Requirement R2:

See Secure Remote Access Reference Document (see remote access alert).

Rationale

During the development of this standard, references to prior versions of the CIP standards and rationale for the requirements and their parts were embedded within the standard. Upon BOT approval, that information was moved to this section.

Rationale for R1:

The Electronic Security Perimeter ("ESP") serves to control traffic at the external electronic boundary of the BES Cyber System. It provides a first layer of defense for network based attacks as it limits reconnaissance of targets, restricts and prohibits traffic to a specified rule set, and assists in containing any successful attacks.

Summary of Changes: CIP-005, Requirement R1 has taken more of a focus on the discrete Electronic Access Points, rather than the logical "perimeter."

CIP-005 (V1 through V4), Requirement R1.2 has been deleted from V5. This requirement was definitional in nature and used to bring dial-up modems using non-routable protocols into the scope of CIP-005. The non-routable protocol exclusion no longer exists as a blanket CIP-002 filter for applicability in V5, therefore there is no need for this requirement.

CIP-005 (V1 through V4), Requirement R1.1 and R1.3 were also definitional in nature and have been deleted from V5 as separate requirements but the concepts were integrated into the definitions of ESP and Electronic Access Point ("EAP").

Reference to prior version: (Part 1.1) CIP-005-4, R1

Change Rationale: (Part 1.1)

Explicitly clarifies that BES Cyber Assets connected via routable protocol must be in an Electronic Security Perimeter.

Reference to prior version: (Part 1.2) CIP-005-4, R1

Change Rationale: (Part 1.2)

Changed to refer to the defined term Electronic Access Point and BES Cyber System.

Reference to prior version: (Part 1.3) CIP-005-4, R2.1

Change Rationale: (Part 1.3)

Changed to refer to the defined term Electronic Access Point and to focus on the entity knowing and having a reason for what it allows through the EAP in both inbound and outbound directions.

Reference to prior version: (Part 1.4) CIP-005-4, R2.3

Change Rationale: (Part 1.4)

Added clarification that dial-up connectivity should perform authentication so that the BES Cyber System is not directly accessible with a phone number only.

Reference to prior version: (Part 1.5) CIP-005-4, R1

Change Rationale: (Part 1.5)

Per FERC Order No. 706, Paragraphs 496-503, ESPs need two distinct security measures such that the Cyber Assets do not lose all perimeter protection if one measure fails or is misconfigured. The Order makes clear this is not simple redundancy of firewalls, thus the SDT has decided to add the security measure of malicious traffic inspection as a requirement for these ESPs.

Rationale for R2:

Registered Entities use Interactive Remote Access to access Cyber Assets to support and maintain control systems networks. Discovery and announcement of vulnerabilities for remote access methods and technologies, that were previously thought secure and in use by a number of electric sector entities, necessitate changes to industry security control standards. Currently, no requirements are in effect for management of secure remote access to Cyber Assets to be afforded the NERC CIP protective measures. Inadequate safeguards for remote access can allow unauthorized access to the organization's network, with potentially serious consequences. Additional information is provided in *Guidance for Secure Interactive Remote Access* published by NERC in July 2011.

Remote access control procedures must provide adequate safeguards through robust identification, authentication and encryption techniques. Remote access to the organization's network and resources will only be permitted providing that authorized users are authenticated, data is encrypted across the network, and privileges are restricted.

The Intermediate System serves as a proxy for the remote user. Rather than allowing all the protocols the user might need to access Cyber Assets inside the Electronic Security Perimeter to traverse from the Electronic Security Perimeter to the remote computer, only the protocol required for remotely controlling the jump host is required. This allows the firewall rules to be much more restrictive than if the remote computer was allowed to connect to Cyber Assets within the Electronic Security Perimeter directly. The use of an Intermediate System also protects the Cyber Asset from vulnerabilities on the remote computer.

The use of multi-factor authentication provides an added layer of security. Passwords can be guessed, stolen, hijacked, found, or given away. They are subject to automated attacks including brute force attacks, in which possible passwords are tried until the password is found, or dictionary attacks, where words and word combinations are tested as possible passwords. But if a password or PIN must be supplied along with a one-time password supplied by a token, a fingerprint, or some other factor, the password is of no value unless the other factor(s) used for authentication are acquired along with it.

Encryption is used to protect the data that is sent between the remote computer and the Intermediate System. Data encryption is important for anyone who wants or needs secure data transfer. Encryption is needed when there is a risk of unauthorized interception of transmissions on the communications link. This is especially important when using the Internet as the communication means.

Summary of Changes: This is a new requirement to continue the efforts of the Urgent Action team for Project 2010-15: Expedited Revisions to CIP-005-3.

Reference to prior version: (Part 2.1) New

Change Rationale: (Part 2.1)

This is a new requirement to continue the efforts of the Urgent Action team for Project 2010-15: Expedited Revisions to CIP-005-3.

Reference to prior version: (Part 2.2) CIP-007-5, R3.1

Change Rationale: (Part 2.2)

This is a new requirement to continue the efforts of the Urgent Action team for Project 2010-15: Expedited Revisions to CIP-005-3. The purpose of this part is to protect the confidentiality and integrity of each Interactive Remote Access session.

Reference to prior version: (Part 2.3) CIP-007-5, R3.2

Change Rationale: (Part 2.3)

This is a new requirement to continue the efforts of the Urgent Action team for Project 2010-15: Expedited Revisions to CIP-005-3. The multi-factor authentication methods are also the same as those identified in the Homeland Security Presidential Directive 12 (HSPD-12), issued August 12, 2007.

A. Introduction

1. Title: Cyber Security — Incident Reporting and Response Planning

2. Number: CIP-008-5

3. Purpose: To mitigate the risk to the reliable operation of the BES as the result of a Cyber Security Incident by specifying incident response requirements.

4. Applicability:

4.1. Functional Entities: For the purpose of the requirements contained herein, the following list of functional entities will be collectively referred to as "Responsible Entities." For requirements in this standard where a specific functional entity or subset of functional entities are the applicable entity or entities, the functional entity or entities are specified explicitly.

4.1.1 Balancing Authority

- **4.1.2 Distribution Provider** that owns one or more of the following Facilities, systems, and equipment for the protection or restoration of the BES:
 - **4.1.2.1** Each underfrequency Load shedding (UFLS) or undervoltage Load shedding (UVLS) system that:
 - **4.1.2.1.1** is part of a Load shedding program that is subject to one or more requirements in a NERC or Regional Reliability Standard; and
 - **4.1.2.1.2** performs automatic Load shedding under a common control system owned by the Responsible Entity, without human operator initiation, of 300 MW or more.
 - **4.1.2.2** Each Special Protection System or Remedial Action Scheme where the Special Protection System or Remedial Action Scheme is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.1.2.3** Each Protection System (excluding UFLS and UVLS) that applies to Transmission where the Protection System is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.1.2.4** Each Cranking Path and group of Elements meeting the initial switching requirements from a Blackstart Resource up to and including the first interconnection point of the starting station service of the next generation unit(s) to be started.
- 4.1.3 Generator Operator
- 4.1.4 Generator Owner
- 4.1.5 Interchange Coordinator or Interchange Authority
- 4.1.6 Reliability Coordinator
- 4.1.7 Transmission Operator

4.1.8 Transmission Owner

- **4.2. Facilities:** For the purpose of the requirements contained herein, the following Facilities, systems, and equipment owned by each Responsible Entity in 4.1 above are those to which these requirements are applicable. For requirements in this standard where a specific type of Facilities, system, or equipment or subset of Facilities, systems, and equipment are applicable, these are specified explicitly.
 - **4.2.1 Distribution Provider**: One or more of the following Facilities, systems and equipment owned by the Distribution Provider for the protection or restoration of the BES:
 - **4.2.1.1** Each UFLS or UVLS System that:
 - **4.2.1.1.1** is part of a Load shedding program that is subject to one or more requirements in a NERC or Regional Reliability Standard; and
 - **4.2.1.1.2** performs automatic Load shedding under a common control system owned by the Responsible Entity, without human operator initiation, of 300 MW or more.
 - **4.2.1.2** Each Special Protection System or Remedial Action Scheme where the Special Protection System or Remedial Action Scheme is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.2.1.3** Each Protection System (excluding UFLS and UVLS) that applies to Transmission where the Protection System is subject to one or more requirements in a NERC or Regional Reliability Standard.
 - **4.2.1.4** Each Cranking Path and group of Elements meeting the initial switching requirements from a Blackstart Resource up to and including the first interconnection point of the starting station service of the next generation unit(s) to be started.
 - 4.2.2 Responsible Entities listed in 4.1 other than Distribution Providers:

All BES Facilities.

- **4.2.3 Exemptions:** The following are exempt from Standard CIP-008-5:
 - **4.2.3.1** Cyber Assets at Facilities regulated by the Canadian Nuclear Safety Commission.
 - **4.2.3.2** Cyber Assets associated with communication networks and data communication links between discrete Electronic Security Perimeters.
 - **4.2.3.3** The systems, structures, and components that are regulated by the Nuclear Regulatory Commission under a cyber security plan pursuant to 10 C.F.R. Section 73.54.
 - **4.2.3.4** For Distribution Providers, the systems and equipment that are not included in section 4.2.1 above.

4.2.3.5 Responsible Entities that identify that they have no BES Cyber Systems categorized as high impact or medium impact according to the CIP-002-5 identification and categorization processes.

5. Effective Dates:

- 1. **24 Months Minimum** CIP-008-5 shall become effective on the later of July 1, 2015, or the first calendar day of the ninth calendar quarter after the effective date of the order providing applicable regulatory approval.
- In those jurisdictions where no regulatory approval is required, CIP-008-5 shall become effective on the first day of the ninth calendar quarter following Board of Trustees' approval, or as otherwise made effective pursuant to the laws applicable to such ERO governmental authorities.

6. Background:

Standard CIP-008-5 exists as part of a suite of CIP Standards related to cyber security. CIP-002-5 requires the initial identification and categorization of BES Cyber Systems. CIP-003-5, CIP-004-5, CIP-005-5, CIP-006-5, CIP-007-5, CIP-008-5, CIP-009-5, CIP-010-1, and CIP-011-1 require a minimum level of organizational, operational, and procedural controls to mitigate risk to BES Cyber Systems. This suite of CIP Standards is referred to as the *Version 5 CIP Cyber Security Standards*.

Most requirements open with, "Each Responsible Entity shall implement one or more documented [processes, plan, etc] that include the applicable items in [Table Reference]." The referenced table requires the applicable items in the procedures for the requirement's common subject matter.

The term *documented processes* refers to a set of required instructions specific to the Responsible Entity and to achieve a specific outcome. This term does not imply any particular naming or approval structure beyond what is stated in the requirements. An entity should include as much as it believes necessary in their documented processes, but they must address the applicable requirements in the table.

The terms *program* and *plan* are sometimes used in place of *documented processes* where it makes sense and is commonly understood. For example, documented processes describing a response are typically referred to as *plans* (i.e., incident response plans and recovery plans). Likewise, a security plan can describe an approach involving multiple procedures to address a broad subject matter.

Similarly, the term *program* may refer to the organization's overall implementation of its policies, plans and procedures involving a subject matter. Examples in the standards include the personnel risk assessment program and the personnel training program. The full implementation of the CIP Cyber Security Standards could also be referred to as a program. However, the terms *program* and *plan* do not imply any additional requirements beyond what is stated in the standards.

Responsible Entities can implement common controls that meet requirements for multiple high and medium impact BES Cyber Systems. For example, a single training

program could meet the requirements for training personnel across multiple BES Cyber Systems.

Measures for the initial requirement are simply the documented processes themselves. Measures in the table rows provide examples of evidence to show documentation and implementation of applicable items in the documented processes. These measures serve to provide guidance to entities in acceptable records of compliance and should not be viewed as an all-inclusive list.

Throughout the standards, unless otherwise stated, bulleted items in the requirements and measures are items that are linked with an "or," and numbered items are items that are linked with an "and."

Many references in the Applicability section use a threshold of 300 MW for UFLS and UVLS. This particular threshold of 300 MW for UVLS and UFLS was provided in Version 1 of the CIP Cyber Security Standards. The threshold remains at 300 MW since it is specifically addressing UVLS and UFLS, which are last ditch efforts to save the Bulk Electric System. A review of UFLS tolerances defined within regional reliability standards for UFLS program requirements to date indicates that the historical value of 300 MW represents an adequate and reasonable threshold value for allowable UFLS operational tolerances.

"Applicable Systems" Columns in Tables:

Each table has an "Applicable Systems" column to further define the scope of systems to which a specific requirement row applies. The CSO706 SDT adapted this concept from the National Institute of Standards and Technology ("NIST") Risk Management Framework as a way of applying requirements more appropriately based on impact and connectivity characteristics. The following conventions are used in the "Applicable Systems" column as described.

- High Impact BES Cyber Systems Applies to BES Cyber Systems categorized as high impact according to the CIP-002-5 identification and categorization processes.
- Medium Impact BES Cyber Systems Applies to BES Cyber Systems categorized as medium impact according to the CIP-002-5 identification and categorization processes.

B. Requirements and Measures

- **R1.** Each Responsible Entity shall document one or more Cyber Security Incident response plan(s) that collectively include each of the applicable requirement parts in CIP-008-5 Table R1 Cyber Security Incident Response Plan Specifications. [Violation Risk Factor: Lower] [Time Horizon: Long Term Planning].
- **M1.** Evidence must include each of the documented plan(s) that collectively include each of the applicable requirement parts in CIP-008-5 Table R1 Cyber Security Incident Response Plan Specifications.

	CIP-008-5 Table R1 – Cyber Security Incident Response Plan Specifications						
Part	Applicable Systems	Requirements	Measures				
1.1	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	One or more processes to identify, classify, and respond to Cyber Security Incidents.	An example of evidence may include, but is not limited to, dated documentation of Cyber Security Incident response plan(s) that include the process to identify, classify, and respond to Cyber Security Incidents.				
1.2	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	One or more processes to determine if an identified Cyber Security Incident is a Reportable Cyber Security Incident and notify the Electricity Sector Information Sharing and Analysis Center (ES-ISAC), unless prohibited by law. Initial notification to the ES-ISAC, which may be only a preliminary notice, shall not exceed one hour from the determination of a Reportable Cyber Security Incident.	Examples of evidence may include, but are not limited to, dated documentation of Cyber Security Incident response plan(s) that provide guidance or thresholds for determining which Cyber Security Incidents are also Reportable Cyber Security Incidents and documentation of initial notices to the Electricity Sector Information Sharing and Analysis Center (ES-ISAC).				

	CIP-008-5 Table R1 – Cyber Security Incident Response Plan Specifications						
Part	Applicable Systems	Requirements	Measures				
1.3	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	The roles and responsibilities of Cyber Security Incident response groups or individuals.	An example of evidence may include, but is not limited to, dated Cyber Security Incident response process(es) or procedure(s) that define roles and responsibilities (e.g., monitoring, reporting, initiating, documenting, etc.) of Cyber Security Incident response groups or individuals.				
1.4	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	Incident handling procedures for Cyber Security Incidents, including the ability to disable Interactive Remote Access and system-to-system remote access.	An example of evidence may include, but is not limited to, dated Cyber Security Incident response process(es) or procedure(s) that address incident handling (e.g., containment, eradication, recovery/incident resolution), including the ability to disable Interactive Remote Access and system-to-system remote access.				

- **R2.** Each Responsible Entity shall implement each of its documented Cyber Security Incident response plans to collectively include each of the applicable requirement parts in CIP-008-5 Table R2 Cyber Security Incident Response Plan Implementation and Testing. [Violation Risk Factor: Lower] [Time Horizon: Operations Planning and Real-Time Operations].
- **M2.** Evidence must include, but is not limited to, documentation that collectively demonstrates implementation of each of the applicable requirement parts in CIP-008-5 Table R2 Cyber Security Incident Response Plan Implementation and Testing.

	CIP-008-5 Table R2 – Cyber Security Incident Response Plan Implementation and Testing							
Part	Applicable Systems	Requirements	Measures					
2.1	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	Test each Cyber Security Incident response plan(s) at least once every 15 calendar months: By responding to an actual Reportable Cyber Security Incident; With a paper drill or tabletop exercise of a Reportable Cyber Security Incident; or With an operational exercise of a Reportable Cyber Security Incident.	Examples of evidence may include, but are not limited to, dated evidence of a lessons-learned report that includes a summary of the test or a compilation of notes, logs, and communication resulting from the test. Types of exercises may include discussion or operations based exercises.					

	CIP-008-5 Table R2 – Cyber Security Incident Response Plan Implementation and Testing						
Part	Applicable Systems	Requirements	Measures				
2.2	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	Use the Cyber Security Incident response plan(s) under Requirement R1 when responding to a Reportable Cyber Security Incident or performing an exercise of a Reportable Cyber Security Incident. Document deviations from the plan(s) taken during the response to the incident or exercise.	Examples of evidence may include, but are not limited to, incident reports, logs, and notes that were kept during the incident response process, and follow-up documentation that describes deviations taken from the plan during the incident or exercise.				
2.3	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	Retain records related to Reportable Cyber Security Incidents.	An example of evidence may include, but is not limited to, dated documentation, such as security logs, police reports, emails, response forms or checklists, forensic analysis results, restoration records, and post-incident review notes related to Reportable Cyber Security Incidents.				

- **R3.** Each Responsible Entity shall maintain each of its Cyber Security Incident response plans according to each of the applicable requirement parts in CIP-008-5 Table R3 Cyber Security Incident Response Plan Review, Update, and Communication. [Violation Risk Factor: Lower] [Time Horizon: Operations Assessment].
- **M3.** Evidence must include, but is not limited to, documentation that collectively demonstrates maintenance of each Cyber Security Incident response plan according to the applicable requirement parts in CIP-008-5 Table R3 Cyber Security Incident.

	CIP-008-5 Table R3 – Cyber Security Incident Response Plan Review, Update, and Communication					
Part	Applicable Systems	Requirements	Measures			
3.1	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	No later than 90 calendar days after completion of a Cyber Security Incident response plan(s) test or actual Reportable Cyber Security Incident response: 3.1.1. Document any lessons learned or document the absence of any lessons learned; 3.1.2. Update the Cyber Security Incident response plan based on any documented lessons learned associated with the plan; and 3.1.3. Notify each person or group with a defined role in the Cyber Security Incident response plan of the updates to the Cyber Security Incident response plan based on any documented lessons learned.	An example of evidence may include, but is not limited to, all of the following: 1. Dated documentation of post incident(s) review meeting notes or follow-up report showing lessons learned associated with the Cyber Security Incident response plan(s) test or actual Reportable Cyber Security Incident response or dated documentation stating there were no lessons learned; 2. Dated and revised Cyber Security Incident response plan showing any changes based on the lessons learned; and 3. Evidence of plan update distribution including, but not limited to: • Emails; • USPS or other mail service; • Electronic distribution system; or • Training sign-in sheets.			

	CIP-008-5 Table R3 – Cyber Security Incident Response Plan Review, Update, and Communication						
Part	Applicable Systems	Requirements	Measures				
3.2	High Impact BES Cyber Systems Medium Impact BES Cyber Systems	No later than 60 calendar days after a change to the roles or responsibilities, Cyber Security Incident response groups or individuals, or technology that the Responsible Entity determines would impact the ability to execute the plan: 3.2.1. Update the Cyber Security Incident response plan(s); and 3.2.2. Notify each person or group with a defined role in the Cyber Security Incident response plan of the updates.	An example of evidence may include, but is not limited to: 1. Dated and revised Cyber Security Incident response plan with changes to the roles or responsibilities, responders or technology; and 2. Evidence of plan update distribution including, but not limited to: • Emails; • USPS or other mail service; • Electronic distribution system; or • Training sign-in sheets.				

C. Compliance

1. Compliance Monitoring Process:

1.1. Compliance Enforcement Authority:

The Regional Entity shall serve as the Compliance Enforcement Authority ("CEA") unless the applicable entity is owned, operated, or controlled by the Regional Entity. In such cases the ERO or a Regional Entity approved by FERC or other applicable governmental authority shall serve as the CEA.

1.2. Evidence Retention:

The following evidence retention periods identify the period of time an entity is required to retain specific evidence to demonstrate compliance. For instances where the evidence retention period specified below is shorter than the time since the last audit, the CEA may ask an entity to provide other evidence to show that it was compliant for the full time period since the last audit.

The Responsible Entity shall keep data or evidence to show compliance as identified below unless directed by its CEA to retain specific evidence for a longer period of time as part of an investigation:

- Each Responsible Entity shall retain evidence of each requirement in this standard for three calendar years.
- If a Responsible Entity is found non-compliant, it shall keep information related to the non-compliance until mitigation is complete and approved or for the time specified above, whichever is longer.
- The CEA shall keep the last audit records and all requested and submitted subsequent audit records.

1.3. Compliance Monitoring and Assessment Processes:

- Compliance Audit
- Self-Certification
- Spot Checking
- Compliance Investigation
- Self-Reporting
- Complaint

1.4. Additional Compliance Information:

None

2. Table of Compliance Elements

R #	Time	VRF	Violation Severity Levels (CIP-008-5)			
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
R1	Long Term Planning	Lower	N/A	N/A	The Responsible Entity has developed the Cyber Security Incident response plan(s), but the plan does not include the roles and responsibilities of Cyber Security Incident response groups or individuals. (1.3) OR The Responsible Entity has developed the Cyber Security Incident response plan(s), but the plan does not include incident handling procedures for Cyber Security Incidents. (1.4)	The Responsible Entity has not developed a Cyber Security Incident response plan with one or more processes to identify, classify, and respond to Cyber Security Incidents. (1.1) OR The Responsible Entity has developed a Cyber Security Incident response plan, but the plan does not include one or more processes to identify Reportable Cyber Security Incidents. (1.2) OR The Responsible Entity has developed a Cyber Security Incidents. (1.2) OR

R #			Violation Severi	Violation Severity Levels (CIP-008-5)		
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
						not provide at least preliminary notification to ES-ISAC within one hour from identification of a Reportable Cyber Security Incident. (1.2)
R2	Operations Planning Real-time Operations	Lower	The Responsible Entity has not tested the Cyber Security Incident response plan(s) within 15 calendar months, not exceeding 16 calendar months between tests of the plan. (2.1)	The Responsible Entity has not tested the Cyber Security Incident response plan(s) within 16 calendar months, not exceeding 17 calendar months between tests of the plan. (2.1)	The Responsible Entity has not tested the Cyber Security Incident response plan(s) within 17 calendar months, not exceeding 18 calendar months between tests of the plan. (2.1) OR The Responsible Entity did not document deviations, if any, from the plan during a test or when a Reportable Cyber Security Incident occurs. (2.2)	The Responsible Entity has not tested the Cyber Security Incident response plan(s) within 18 calendar months between tests of the plan. (2.1) OR The Responsible Entity did not retain relevant records related to Reportable Cyber Security Incidents. (2.3)
R3	Operations Assessment	Lower	The Responsible Entity has not notified each person or group with	The Responsible Entity has not updated the	The Responsible Entity has neither	The Responsible Entity has neither

R #	Time	VRF	Violation Severity Levels (CIP-008-5)			
	Horizon		Lower VSL	Moderate VSL	High VSL	Severe VSL
			a defined role in the Cyber Security Incident response plan of updates to the Cyber Security Incident response plan within greater than 90 but less than 120 calendar days of a test or actual incident response to a Reportable Cyber Security Incident. (3.1.3)	Cyber Security Incident response plan based on any documented lessons learned within 90 and less than 120 calendar days of a test or actual incident response to a Reportable Cyber Security Incident. (3.1.2) OR The Responsible Entity has not notified each person or group with a defined role in the Cyber Security Incident response plan of updates to the Cyber Security Incident response plan within 120 calendar days of a test or actual incident response to a Reportable Cyber Security Incident. (3.1.3) OR	documented lessons learned nor documented the absence of any lessons learned within 90 and less than 120 calendar days of a test or actual incident response to a Reportable Cyber Security Incident. (3.1.1) OR The Responsible Entity has not updated the Cyber Security Incident response plan based on any documented lessons learned within 120 calendar days of a test or actual incident response to a Reportable Cyber Security Incident. (3.1.2) OR The Responsible Entity has not updated the	documented lessons learned nor documented the absence of any lessons learned within 120 calendar days of a test or actual incident response to a Reportable Cyber Security Incident. (3.1.1)

R #	Time		Violation Severi	ty Levels (CIP-008-5)	
	Horizon	Lower VSL	Moderate VSL	High VSL	Severe VSL
			The Responsible Entity has not updated the Cyber Security Incident response plan(s) or notified each person or group with a defined role within 60 and less than 90 calendar days of any of the following changes that the responsible entity determines would impact the ability to execute the plan: (3.2) Roles or responsibilities, or Cyber Security Incident response groups or individuals, or Technology changes.	Cyber Security Incident response plan(s) or notified each person or group with a defined role within 90 calendar days of any of the following changes that the responsible entity determines would impact the ability to execute the plan: (3.2) Roles or responsibilities, or Cyber Security Incident response groups or individuals, or Technology changes.	

D. Regional Variances

None.

E. Interpretations

None.

F. Associated Documents

None.

Guidelines and Technical Basis

Section 4 – Scope of Applicability of the CIP Cyber Security Standards

Section "4. Applicability" of the standards provides important information for Responsible Entities to determine the scope of the applicability of the CIP Cyber Security Requirements.

Section "4.1. Functional Entities" is a list of NERC functional entities to which the standard applies. If the entity is registered as one or more of the functional entities listed in Section 4.1, then the NERC CIP Cyber Security Standards apply. Note that there is a qualification in Section 4.1 that restricts the applicability in the case of Distribution Providers to only those that own certain types of systems and equipment listed in 4.2. Furthermore,

Section "4.2. Facilities" defines the scope of the Facilities, systems, and equipment owned by the Responsible Entity, as qualified in Section 4.1, that is subject to the requirements of the standard. As specified in the exemption section 4.2.3.5, this standard does not apply to Responsible Entities that do not have High Impact or Medium Impact BES Cyber Systems under CIP-002-5's categorization. In addition to the set of BES Facilities, Control Centers, and other systems and equipment, the list includes the set of systems and equipment owned by Distribution Providers. While the NERC Glossary term "Facilities" already includes the BES characteristic, the additional use of the term BES here is meant to reinforce the scope of applicability of these Facilities where it is used, especially in this applicability scoping section. This in effect sets the scope of Facilities, systems, and equipment that is subject to the standards.

Requirement R1:

The following guidelines are available to assist in addressing the required components of a Cyber Security Incident response plan:

- Department of Homeland Security, Control Systems Security Program, Developing an Industrial Control Systems Cyber Security Incident Response Capability, 2009, online at http://www.us-cert.gov/control_systems/practices/documents/final-RP_ics_cybersecurity_incident_response_100609.pdf
- National Institute of Standards and Technology, Computer Security Incident Handling Guide, Special Publication 800-61 revision 1, March 2008, online at http://csrc.nist.gov/publications/nistpubs/800-61-rev1/SP800-61rev1.pdf

For Part 1.2, a Reportable Cyber Security Incident is a Cyber Security Incident that has compromised or disrupted one or more reliability tasks of a functional entity. It is helpful to distinguish Reportable Cyber Security Incidents as one resulting in a necessary response action. A response action can fall into one of two categories: Necessary or elective. The distinguishing characteristic is whether or not action was taken in response to an event. Precautionary measures that are not in response to any persistent damage or effects may be designated as elective. All other response actions to avoid any persistent damage or adverse effects, which include the activation of redundant systems, should be designated as necessary.

The reporting obligations for Reportable Cyber Security Incidents require at least a preliminary notice to the ES-ISAC within one hour after determining that a Cyber Security Incident is reportable (not within one hour of the Cyber Security Incident, an important distinction). This addition is in response to the directive addressing this issue in FERC Order No. 706, paragraphs 673 and 676, to report within one hour (at least preliminarily). This standard does not require a complete report within an hour of determining that a Cyber Security Incident is reportable, but at least preliminary notice, which may be a phone call, an email, or sending a Web-based notice. The standard does not require a specific timeframe for completing the full report.

For Part 1.4, as part of incident handling, establishing the ability to disable remote access could be used as a method to contain a suspected Cyber Security Incident. It is not the intent of the SDT to require Responsible Entity's to disconnect remote access for every suspected Cyber Security Incident. Instead including this approach in the Cyber Security Incident Response plan provides basic information to the incident response team. As with all response actions, exercising the disabling of remote access needs to be taken into account based on the facts and circumstances of the security events and the risk to the BES Cyber System.

Requirement R2:

Requirement R2 ensures entities periodically test the Cyber Security Incident response plan. This includes the requirement in Part 2.2 to ensure the plan is actually used when testing. The testing requirements are specifically for *Reportable Cyber Security Incidents*.

Entities may use an actual response to a *Reportable Cyber Security Incident* as a substitute for exercising the plan annually. Otherwise, entities must exercise the plan with a paper drill, tabletop exercise, or full operational exercise. For more specific types of exercises, refer to the FEMA Homeland Security Exercise and Evaluation Program (HSEEP). It lists the following four types of discussion-based exercises: seminar, workshop, tabletop, and games. In particular, it defines that, "A tabletop exercise involves key personnel discussing simulated scenarios in an informal setting. Table top exercises (TTX) can be used to assess plans, policies, and procedures."

The HSEEP lists the following three types of operations-based exercises: Drill, functional exercise, and full-scale exercise. It defines that, "[A] full-scale exercise is a multi-agency, multi-jurisdictional, multi-discipline exercise involving functional (e.g., joint field office, Emergency operation centers, etc.) and 'boots on the ground' response (e.g., firefighters decontaminating mock victims)."

In addition to the requirements to implement the response plan, Part 2.3 specifies entities must retain relevant records for *Reportable Cyber Security Incidents*. There are several examples of specific types of evidence listed in the measure. Entities should refer to their handling procedures to determine the types of evidence to retain and how to transport and store the evidence. For further information in retaining incident records, refer to the NIST Guide to Integrating Forensic Techniques into Incident Response (SP800-86). The NIST guideline includes a section (Section 3.1.2) on acquiring data when performing forensics.

Requirement R3:

This requirement ensures entities maintain Cyber Security Incident response plans. There are two requirement parts that trigger plan updates: (1) lessons learned from Part 3.1 and (2) organizational or technology changes from Part 3.2.

The documentation of lessons learned from Part 3.1 is associated with each Reportable Cyber Security Incident and involves the activities as illustrated in Figure 1, below. The deadline to document lessons learned starts after the completion of the incident in recognition that complex incidents on complex systems can take a few days or weeks to complete response activities. The process of conducting lessons learned can involve the response team discussing the incident to determine gaps or areas of improvement within the plan. Any documented deviations from the plan from Part 2.2 can serve as input to the lessons learned. It is possible to have a *Reportable Cyber Security Incident* without any documented lessons learned. In such cases, the entity must retain documentation of the absence of any lessons learned associated with the *Reportable Cyber Security Incident*.

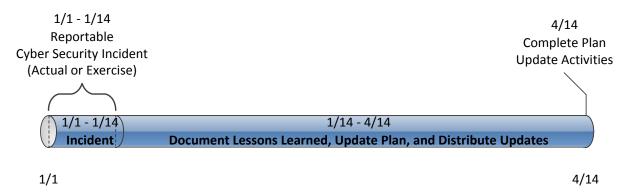


Figure 1: CIP-008-5 R3 Timeline for Reportable Cyber Security Incidents

The activities necessary to complete the lessons learned include updating the plan and distributing those updates. Entities should consider meeting with all of the individuals involved in the incident and documenting the lessons learned as soon after the incident as possible. This allows more time for making effective updates to the plan, obtaining any necessary approvals, and distributing those updates to the incident response team.

The plan change requirement in Part 3.2 is associated with organization and technology changes referenced in the plan and involves the activities illustrated in Figure 2, below. Organizational changes include changes to the roles and responsibilities people have in the plan or changes to the response groups or individuals. This may include changes to the names or contact information listed in the plan. Technology changes affecting the plan may include referenced information sources, communication systems or ticketing systems.

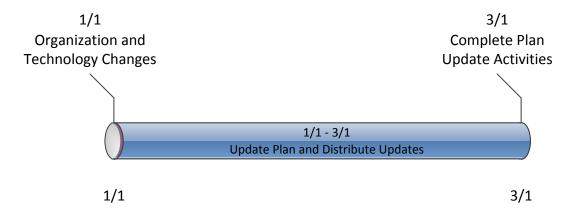


Figure 2: Timeline for Plan Changes in 3.2

Rationale:

During the development of this standard, references to prior versions of the CIP standards and rationale for the requirements and their parts were embedded within the standard. Upon BOT approval, that information was moved to this section.

Rationale for R1:

The implementation of an effective Cyber Security Incident response plan mitigates the risk to the reliable operation of the BES caused as the result of a Cyber Security Incident and provides feedback to Responsible Entities for improving the security controls applying to BES Cyber Systems. Preventative activities can lower the number of incidents, but not all incidents can be prevented. A preplanned incident response capability is therefore necessary for rapidly detecting incidents, minimizing loss and destruction, mitigating the weaknesses that were exploited, and restoring computing services. An enterprise or single incident response plan for all BES Cyber Systems may be used to meet the Requirement. An organization may have a common plan for multiple registered entities it owns.

Summary of Changes: Wording changes have been incorporated based primarily on industry feedback to more specifically describe required actions.

Reference to prior version: (Part 1.1) CIP-008, R1.1

Change Description and Justification: (Part 1.1)

"Characterize" has been changed to "identify" for clarity. "Response actions" has been changed to "respond to" for clarity.

Reference to prior version: (Part 1.2) CIP-008, R1.1

Change Description and Justification: (Part 1.2)

Addresses the reporting requirements from previous versions of CIP-008. This requirement part only obligates entities to have a process for determining Reportable Cyber Security Incidents. Also addresses the directive in FERC Order No. 706, paragraphs 673 and 676 to report within one hour (at least preliminarily).

Reference to prior version: (Part 1.3) CIP-008, R1.2

Change Description and Justification: (Part 1.3)

Replaced incident response teams with incident response "groups or individuals" to avoid the interpretation that roles and responsibilities sections must reference specific teams.

Reference to prior version: (Part 1.4) CIP-008, R1.2

Change Description and Justification: (Part 1.4)

Conforming change to reference new defined term Cyber Security Incidents.

Rationale for R2:

The implementation of an effective Cyber Security Incident response plan mitigates the risk to the reliable operation of the BES caused as the result of a Cyber Security Incident and provides feedback to Responsible Entities for improving the security controls applying to BES Cyber Systems. This requirement ensures implementation of the response plans. Requirement Part 2.3 ensures the retention of incident documentation for post event analysis.

This requirement obligates entities to follow the Cyber Security Incident response plan when an incident occurs or when testing, but does not restrict entities from taking needed deviations from the plan. It ensures the plan represents the actual response and does not exist for documentation only. If a plan is written at a high enough level, then every action during the response should not be subject to scrutiny. The plan will likely allow for the appropriate variance in tactical decisions made by incident responders. Deviations from the plan can be documented during the incident response or afterward as part of the review.

Summary of Changes: Added testing requirements to verify the Responsible Entity's response plan's effectiveness and consistent application in responding to a Cyber Security Incident(s) impacting a BES Cyber System.

Reference to prior version: (Part 2.1) CIP-008, R1.6

Change Description and Justification: (Part 2.1)

Minor wording changes; essentially unchanged.

Reference to prior version: (Part 2.2) CIP-008, R1.6

Change Description and Justification: (Part 2.2)

Allows deviation from plan(s) during actual events or testing if deviations are recorded for review.

Reference to prior version: (Part 2.3) CIP-008, R2

Change Description and Justification: (Part 2.3)

Removed references to the retention period because the Standard addresses data retention in the Compliance Section.

Rationale for R3:

Conduct sufficient reviews, updates and communications to verify the Responsible Entity's response plan's effectiveness and consistent application in responding to a Cyber Security Incident(s) impacting a BES Cyber System. A separate plan is not required for those requirement parts of the table applicable to High or Medium Impact BES Cyber Systems. If an entity has a single Cyber Security Incident response plan and High or Medium Impact BES Cyber Systems, then the additional requirements would apply to the single plan.

Summary of Changes: Changes here address the FERC Order 706, Paragraph 686, which includes a directive to perform after-action review for tests or actual incidents and update the plan based on lessons learned. Additional changes include specification of what it means to review the plan and specification of changes that would require an update to the plan.

Reference to prior version: (Part 3.1) CIP-008, R1.5

Change Description and Justification: (Part 3.1)

Addresses FERC Order 706, Paragraph 686 to document test or actual incidents and lessons learned.

Reference to prior version: (Part 3.2) CIP-008, R1.4

Change Description and Justification: (Part 3.2)

Specifies the activities required to maintain the plan. The previous version required entities to update the plan in response to any changes. The modifications make clear the changes that would require an update.

Version History

Version	Date	Action	Change Tracking
1	1/16/06	R3.2 — Change "Control Center" to "control center."	3/24/06
2	9/30/09	Modifications to clarify the requirements and to bring the compliance elements into conformance with the latest guidelines for developing compliance elements of standards. Removal of reasonable business judgment. Replaced the RRO with the RE as a Responsible Entity.	

		Rewording of Effective Date. Changed compliance monitor to Compliance Enforcement Authority.	
3		Updated version number from -2 to -3 In Requirement 1.6, deleted the sentence pertaining to removing component or system from service in order to perform testing, in response to FERC order issued September 30, 2009.	
3	12/16/09	Approved by the NERC Board of Trustees.	Update
3	3/31/10	Approved by FERC.	
4	12/30/10	Modified to add specific criteria for Critical Asset identification.	Update
4	1/24/11	Approved by the NERC Board of Trustees.	Update
5	11/26/12	Adopted by the NERC Board of Trustees.	Modified to coordinate with other CIP standards and to revise format to use RBS Template.
5	11/22/13	FERC Order issued approving CIP-008-5.	
5	7/9/14	FERC Letter Order issued approving VRFs and VSLs revisions to certain CIP standards.	CIP-008-5 Requirement R2, VSL table under Severe, changed from 19 to 18 calendar months.