

509B.1 Definitions.

As used in this chapter, unless the context otherwise requires:

1. “*Accident or health insurance*” means hospital, surgical, or major medical insurance, or a combination of these.
 2. “*Commissioner*” means the state commissioner of insurance.
 3. “*Group policy*” means a group accident or health insurance policy issued by an insurance company under chapter 509, a group accident or health contract issued by a health service corporation under chapter 514, or a plan for health care services provided by a health maintenance organization under chapter 514B, or issued or provided by any similar corporation or organization.
 4. “*Insurance*”, “*insures*”, and “*insured*” refer to coverage under a group policy, individual policy, or converted policy on a premium-paying basis, and do not include coverage provided solely as an accrued liability or by reason of a disability extension.
 5. “*Insurer*” means the entity issuing a group policy or an individual or converted policy.
 6. “*Medicare*” means Title XVIII of the United States Social Security Act.
 7. “*Premium*” includes any premium or payment or other consideration payable for coverage under a group or individual policy.
- 86 Acts, ch 1124, §1; 2006 Acts, ch 1117, §36