

**521F.2 Definitions.**

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

1. “*Adjusted risk-based capital report*” means a risk-based capital report adjusted by the commissioner pursuant to section 521F.3, subsection 4.
2. “*Commissioner*” means the commissioner of insurance.
3. “*Corrective order*” means an order issued by the commissioner specifying corrective actions which the commissioner has determined are required.
4. “*Domestic health organization*” means a health organization domiciled in this state.
5. “*Filing date*” means March 1 of each year.
6. “*Foreign health organization*” means a health organization that is not domiciled in this state.
7. “*Health organization*” means a health maintenance organization, limited service organization, dental or vision plan, hospital, medical and dental indemnity or service corporation or other managed care organization licensed under chapter 514, 514B, or 1993 Iowa Acts, ch. 158, or any other entity engaged in the business of insurance, risk transfer, or risk retention, that is subject to the jurisdiction of the commissioner of insurance or the director of public health. “*Health organization*” does not include an insurance company licensed to transact the business of insurance under chapter 508, 515, or 520, and which is otherwise subject to chapter 521E.
8. “*Revised risk-based capital plan*” means a risk-based capital plan that has been rejected by the commissioner and has been revised by the health organization, with or without the commissioner’s recommendation.
9. “*Risk-based capital instructions*” means the instructions included in the risk-based capital report as adopted by the national association of insurance commissioners, as such risk-based capital instructions may be amended by the national association of insurance commissioners from time to time in accordance with the procedures adopted by the national association of insurance commissioners.
10. “*Risk-based capital level*” means a health organization’s company-action-level risk-based capital, regulatory-action-level risk-based capital, authorized-control-level risk-based capital, or mandatory-control-level risk-based capital as follows:
  - a. “*Company-action-level risk-based capital*” means the product of two and the health organization’s authorized-control-level risk-based capital.
  - b. “*Regulatory-action-level risk-based capital*” means the product of one and one-half and the health organization’s authorized-control-level risk-based capital.
  - c. “*Authorized-control-level risk-based capital*” means the number determined under the risk-based capital formula in accordance with the risk-based capital instructions.
  - d. “*Mandatory-control-level risk-based capital*” means the product of seven-tenths and the health organization’s authorized-control-level risk-based capital.
11. “*Risk-based capital plan*” means a comprehensive financial plan containing the elements identified in section 521F.4, subsection 2.
12. “*Risk-based capital report*” means the report required in section 521F.3.
13. “*Total adjusted capital*” means the sum of the following:
  - a. A health organization’s statutory capital and surplus.
  - b. Such other items, if any, as identified in the risk-based capital instructions.

2000 Acts, ch 1050, §2