

**514L.1 Definitions.**

As used in [this chapter](#), unless the context otherwise requires:

1. “*Guide*” means the most recent national council for prescription drug programs pharmacy identification card implementation guide, or its successor.

2. “*Prescription drug*” means prescription drug as defined in [section 155A.3](#) and includes a device as defined in [section 155A.3](#).

3. “*Provider of third-party payment or prepayment of prescription drug expenses*” or “*provider*” means a provider of an individual or group policy of accident or health insurance or an individual or group hospital or health care service contract issued pursuant to [chapter 509](#), [514](#), or [514A](#), a provider of a plan established pursuant to [chapter 509A](#) for public employees, a provider of an individual or group health maintenance organization contract issued and regulated under [chapter 514B](#), a provider of a preferred provider contract issued pursuant to [chapter 514F](#), a provider of a self-insured multiple employer welfare arrangement, and any other entity providing health insurance or health benefits which provide for payment or prepayment of prescription drug expenses coverage subject to state insurance regulation.

[2001 Acts, ch 77, §1](#); [2017 Acts, ch 148, §97](#)

Subsection 3 amended