

514I.2 Definitions.

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

1. “*Benchmark benefit package*” means any of the following:
 - a. The standard blue cross/blue shield preferred provider option service benefit plan, described in and offered under 5 U.S.C. §8903(1).
 - b. A health benefits coverage plan that is offered and generally available to state employees in this state.
 - c. The plan of a health maintenance organization as defined in 42 U.S.C. §300e, with the largest insured commercial, nonmedical assistance enrollment of covered lives in the state.
2. “*Cost sharing*” means the payment of a premium or copayment as provided for by Tit. XXI of the federal Social Security Act and [section 514I.10](#).
3. “*Department*” means the department of human services.
4. “*Director*” means the director of human services.
5. “*Eligible child*” means an individual who meets the criteria for participation in the program under [section 514I.8](#).
6. “*Hawk-i board*” or “*board*” means the entity which adopts rules and establishes policy for, and directs the department regarding, the hawk-i program.
7. “*Hawk-i program*” or “*program*” means the healthy and well kids in Iowa program created in [this chapter](#) to provide health insurance coverage to eligible children.
8. “*Health insurance coverage*” means health insurance coverage as defined in 42 U.S.C. §300gg-91.
9. “*Participating insurer*” means any entity licensed by the division of insurance of the department of commerce to provide health insurance in Iowa that has contracted with the department to provide health insurance coverage to eligible children under [this chapter](#).
10. “*Qualified child health plan*” or “*plan*” means health insurance coverage provided by a participating insurer under [this chapter](#).
[98 Acts, ch 1196, §3, 16; 2003 Acts, ch 108, §131; 2008 Acts, ch 1188, §7; 2009 Acts, ch 118, §24; 2014 Acts, ch 1092, §184; 2017 Acts, ch 148, §92; 2019 Acts, ch 124, §1](#)