

**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 Tit. 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](#); [2012 Acts, ch 1023, §78](#)

Referred to in [§514C.3](#)