

**191—79.2 (505) Definitions.** For purposes of this chapter, the definitions found in Iowa Code section 505.26 as amended by 2015 Iowa Acts, House File 632, section 9, shall apply. In addition, the following definitions shall apply:

“*Commissioner*” means the Iowa insurance commissioner.

“*Division*” means the Iowa insurance division.

“*Exigent*” means circumstances as defined under federal regulations relating to the Affordable Care Act, as provided in 45 CFR 156.122.

“*Prescription drug prior authorization*” means requests for preapproval from a payor for specified medications or quantities of medications.

“*Qualified health plan*” or “*QHP*” means a health insurance plan under the Affordable Care Act, which is certified by the health insurance marketplace.

“*Urgent*” means any claim for medical care or treatment to which the application of time periods that either could seriously jeopardize the life or health of the patient or the ability of the patient to regain maximum function or, in the opinion of the physician or health care professional, as defined in Iowa Code chapter 514J, with knowledge of the patient’s medical condition, would subject the patient to severe pain that cannot be adequately managed without the care or treatment that is the subject of the claim.

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