

191—41.1(514B) Definitions.

“*Act*” when used in these rules shall mean Iowa Code chapter 514B.

“*Complaint*” means a written communication expressing a grievance concerning a limited service organization.

“*Governing body*” means the persons in which the ultimate responsibility and authority for the conduct of the LSO is vested.

“*Limited health services*” include dental care services, vision care services, mental health services, behavioral health care services, substance abuse services, pharmaceutical services, podiatric care services, chiropractic services, nursing services, services of a licensed dietitian, physical therapy services, or any other category of services approved by the commissioner. “Limited health services” do not include employee assistance programs which provide only assessment and referral services or intermediate or long-term care facilities.

“*Limited service organization*” or “*LSO*” means any corporation or limited liability company or other entity which, in return for prepayment, undertakes to provide or arrange for the provision of one or more limited health services to enrollees. Entities authorized to do business pursuant to Iowa Code chapters 508, 512B, 514, 514B (health maintenance organizations), 515, and 520 shall not be required to obtain separate licensure as an LSO.

“*Outpatient provider services*” means outpatient provider services provided within or outside of a hospital. These services shall include, but not be limited to, laboratory and diagnostic X-ray with emphasis directed toward primary care.

“*Producer*” means a person engaged in solicitation or enrollment for an LSO and who ultimately delivers the certificate of membership or policy to a member.

“*Provider*” means any person or institution duly licensed or otherwise authorized to deliver or furnish limited health services.

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