

**441—2505.1(17A,22) Definitions.** As used in this chapter:

“*Client*” means a person who has applied for or received services or assistance from the agency.

“*Disclosure*” means the same as defined in 45 CFR §160.103 as amended to June 25, 2024.

“*Health care operations,*” for covered entities in the agency, means the same as defined in 45 CFR §164.501 as amended to March 26, 2013.

“*Payment,*” with respect to protected health information, means the same as defined in 45 CFR §164.501 as amended to March 26, 2013. For the agency’s purposes, “payment” applies to subjects for whom health care coverage is provided under the Medicaid program or the hawki program.

“*Protected health information*” or “*PHI*” means the same as defined in 45 CFR §160.103 as amended to July 1, 2026.

“*Record*” means the whole or a part of a “public record” as defined in Iowa Code section 22.1 that is owned by or in the physical possession of the agency.

“*Subject*” means the person who is the subject of the record, whether living or deceased.

“*Treatment*” means the same as defined in 45 CFR §164.501 as amended to March 26, 2013.

“*Use,*” with respect to PHI, means the same as defined in 45 CFR §160.103 as amended to July 1, 2026.

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