

**191—59.2(510B) Definitions.** The terms defined in Iowa Code sections 510.11, 510B.1, and 510C.1 shall have the same meaning for the purposes of this chapter. The definitions contained in 191—Chapter 58, “Third-Party Administrators,” and 191—Chapter 78, “Uniform Prescription Drug Information Card,” are incorporated by reference. As used in this chapter:

“*Complaint*” means a written communication from a pharmacy or the commissioner to a pharmacy benefits manager that makes an inquiry or expresses a grievance and includes, but is not limited to, the following:

1. A comment on, contest or appeal by a pharmacy of a pharmacy benefits manager’s maximum allowable cost, maximum allowable cost list or other pricing methodology used to pay a pharmacy.
2. Any pharmacy’s appeal or request for an independent third-party review of an audit report pursuant to subrules 59.4(4) and 59.4(5).
3. Any request by a pharmacy for an independent third-party review of a termination or suspension decision pursuant to paragraph 59.6(3) “d.”
4. Any inquiries from the commissioner pursuant to subrule 59.8(3).

“*Day*” means a calendar day, unless otherwise defined or limited.

“*Paid*” means the later of either the day on which the payment is mailed by the pharmacy benefits manager or the day on which the electronic payment is processed by the pharmacy benefits manager’s bank.

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