

191—76.2(514J) Applicable law and definitions.

76.2(1) The rules contained in this chapter shall apply to any health benefit plan as defined in Iowa Code section 514J.102 other than those excluded under Iowa Code section 514J.103(2), for any plan that is offered or issued by a health carrier as defined in Iowa Code section 514J.102, if the plan was issued in Iowa, and if the external review request is filed with the commissioner on or after July 1, 2011.

76.2(2) For purposes of this chapter, the definitions in Iowa Code chapter 514J shall apply. In addition:

a. For purposes of applying the exemption in Iowa Code section 514J.103(2)“*b*,” “Medicare supplement policy of insurance” shall mean the same as “Medicare supplement policy” as defined in rule 191—37.3(514D).

b. For purposes of this chapter, the definition of “adverse determination” in Iowa Code section 514J.102 shall include experimental or investigational treatment adverse determinations, as set forth in Iowa Code section 514J.109.

c. For purposes of this chapter, the definition of “health carrier” may include an employer self-funded plan if the employer chooses to opt in to comply with these rules.

[**ARC 9637B**, IAB 7/27/11, effective 7/8/11; **ARC 9979B**, IAB 1/25/12, effective 2/29/12; **ARC 2601C**, IAB 6/22/16, effective 7/27/16; **ARC 6121C**, IAB 12/29/21, effective 2/2/22]