

304.17C-010 Definitions for subtitle.

As used in this subtitle, unless the context requires otherwise:

- (1) "At the time of enrollment" means the same as defined in KRS 304.17A-005(2);
- (2) "Enrollee" means an individual who is enrolled in a limited health service benefit plan;
- (3) "Health care provider" or "provider" means the same as defined in KRS 304.17A-005(23);
- (4) "Insurer" means any insurance company, health maintenance organization, self-insurer or multiple employer welfare arrangement not exempt from state regulation by ERISA, provider-sponsored integrated health delivery network, self-insured employer-organized association, nonprofit hospital, medical-surgical, dental, health service corporation, or limited health service organization authorized to transact health insurance business in Kentucky who offers a limited health service benefit plan; and
- (5) "Limited health service benefit plan" means any policy or certificate that provides services for dental, vision, mental health, substance abuse, chiropractic, pharmaceutical, podiatric, or other such services as may be determined by the commissioner to be offered under a limited health service benefit plan. A limited health service benefit plan shall not include hospital, medical, surgical, or emergency services except as these services are provided incidental to the plan.

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