

**WAC 182-13-020 Definitions.** Unless otherwise specifically provided, the definitions contained in this section apply throughout this chapter.

(1) "HCA" means the Washington state health care authority.

(2) "Health plan," or "plan" means any individual or group: Policy, agreement, or other contract providing coverage for medical, surgical, hospital, or emergency care services, whether issued, or issued for delivery, in Washington or any other state. "Health Plan" or "plan" also includes any group health plan that is maintained by any state and governed by the Public Health Services Act in 42 U.S.C. Chapter 6A, self-insured coverage governed by the federal Employee Retirement Income Security Act of 1974, coverage through the Washington state health insurance pool as described in chapter 48.41 RCW, coverage through the medicaid program as described in Title 74 RCW, and coverage through the Washington state health benefit exchange as described in chapter 43.71 RCW. "Health plan" or "plan" does not mean or include: Hospital confinement indemnity coverage as described in WAC 284-50-345; disability income protection coverage as described in WAC 284-50-355; accident only coverage as described in WAC 284-50-360; specified disease and specified accident coverage as described in WAC 284-50-365; limited benefit health insurance coverage as described in WAC 284-50-370; long-term care benefits as described in chapter 48.84 RCW; or limited health care coverage (e.g., dental only).

(3) "Lapse in coverage" means a period of time greater than sixty-three continuous days without coverage by a health plan.

(4) "Resident" means a person who demonstrates that they live in the state of Washington by providing evidence of residency.

[Statutory Authority: RCW 41.05.197, 41.05.160. WSR 19-01-054 (Admin #2018-02), § 182-13-020, filed 12/14/18, effective 1/14/19. Statutory Authority: RCW 41.05.197. WSR 95-07-011, § 182-13-020, filed 3/3/95, effective 4/3/95.]