

5218.0010 DEFINITIONS.

Subpart 1. **Scope.** The terms used in parts 5218.0010 to 5218.0900 have the meanings given them in this part.

Subp. 2. **Commissioner.** "Commissioner" means the commissioner of the Department of Labor and Industry or a designee.

Subp. 3. **Emergency care.** "Emergency care" means those medical services that are required for the immediate diagnosis and treatment of medical conditions that, if not immediately diagnosed and treated, could lead to serious physical or mental disability or death, or that are immediately necessary to alleviate severe pain. Emergency treatment includes treatment delivered in response to symptoms that may or may not represent an actual emergency, but is necessary to determine whether an emergency exists.

Subp. 4. **Employee.** "Employee" means an employee entitled to treatment of a personal injury under Minnesota Statutes, section 176.135.

Subp. 5. **Health care provider.** "Health care provider" has the meaning given in Minnesota Statutes, section 176.011, subdivision 24.

Subp. 6. **Insurer.** "Insurer" means the insurer providing workers' compensation insurance required by Minnesota Statutes, chapter 176, and includes a self-insured employer except as otherwise provided in part 5218.0200, subpart 4.

Subp. 7. **Managed care plan.** "Managed care plan" means a plan certified by the commissioner that provides for the delivery and management of treatment to injured employees under Minnesota Statutes, sections 176.135 and 176.1351.

Subp. 8. **Participating health care provider.** "Participating health care provider" means any person, provider, company, professional corporation, organization, or business entity with which the managed care plan has contracts or other arrangements for the delivery of medical services or supplies to injured employees.

Subp. 9. **Payer.** "Payer" refers to any entity responsible for payment and administration of a workers' compensation claim under Minnesota Statutes, chapter 176.

Subp. 10. **Primary treating health care provider.** "Primary treating health care provider" means a physician, chiropractor, osteopathic physician, podiatrist, or dentist directing and coordinating the course of medical care to the employee.

Subp. 11. **Revocation.** "Revocation" means the termination of a managed care plan's certification to provide services under parts 5218.0010 to 5218.0900.

Subp. 12. **Suspension.** "Suspension" means the managed care plan's authority to enter into new or amended contracts with insurers has been suspended by the commissioner for a specified period of time.

Statutory Authority: *MS s 176.1351*

History: *18 SR 1379; L 2016 c 119 s 7*

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