

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.21501 Definitions and principles of construction.

Sec. 21501.

(1) As used in this part:

(a) "Aircraft transport vehicle" means that term as defined in section 20902.

(b) "Ambulance" means that term as defined in section 20902.

(c) "Emergency patient" means that term as defined in section 20904.

(d) "Group health plan" means an employer program of health benefits, including an employee welfare benefit plan as defined in section 3(1) of subtitle A of title I of the employee retirement income security act of 1974, Public Law 93-406, 29 USC 1002, to the extent that the plan provides medical care, including items and services paid for as medical care to employees or their dependents as defined under the terms of the plan directly or through insurance, reimbursement, or otherwise.

(e) "Health benefit plan" means a group health plan, an individual or group expense-incurred hospital, medical, or surgical policy or certificate, or an individual or group health maintenance organization contract. Health benefit plan does not include accident-only, credit, dental, or disability income insurance; long-term care insurance; coverage issued as a supplement to liability insurance; coverage only for a specified disease or illness; worker's compensation or similar insurance; or automobile medical-payment insurance.

(f) "Nonemergency patient" means that term as defined in section 20908.

(g) "Participating provider" means a provider that, under contract with an insurer that issues health benefit plans, or with such an insurer's contractor or subcontractor, has agreed to provide health care services to covered individuals and to accept payment by the insurer, contractor, or subcontractor for covered services as payment in full, other than coinsurance, copayments, or deductibles.

(h) "Patient's representative" means any of the following:

(i) A person to whom a patient has given express written consent to represent the patient.

(ii) A person authorized by law to provide consent for a patient.

(iii) A patient's treating health professional, but only if the patient is unable to provide consent.

(i) "Rural emergency hospital" means a hospital that is designated by the Centers for Medicare and Medicaid Services to offer rural emergency hospital services.

(j) "Rural emergency hospital services" means that term as defined in 42 USC 1395x.

(k) "Third party administrator" means that term as defined in section 2 of the third party administrator act, 1984 PA 218, MCL 550.902.

(2) In addition, article 1 contains general definitions and principles of construction applicable to all articles in this code and part 201 contains definitions applicable to this part.

History: 1978, Act 368, Eff. Sept. 30, 1978 ;-- Am. 2018, Act 384, Eff. Mar. 19, 2019 ;-- Am. 2022, Act 265, Imd. Eff. Dec. 22, 2022

Compiler's Notes: For transfer of powers and duties of the division of health facility licensing and certification in the bureau of health systems, division of federal support services, and the division of emergency medical services, with the exception of the division of managed care and division of health facility development, from the department of public health to the director of the department of commerce, see E.R.O. No. 1996-1, compiled at MCL 330.3101 of the Michigan Compiled Laws. For transfer of powers and duties of the bureau of health services from the department of consumer and industry services to the director of the department of community health by Type II transfer, see E.R.O. No. 2003-1, compiled at MCL 445.2011.

Popular Name: Act 368