§ 2999-o. Definitions. As used in this article, the following terms shall have the following meanings, unless the context clearly requires otherwise:

1. "Accountable care organization" or "ACO" means an organization of clinically integrated health care providers certified by the commissioner under this article.

2. "ACO participant" or "participant" means a health care provider that is one of the health care providers that comprise the ACO.

3. Certificate of authority" or "certificate" means a certificate of authority issued by the commissioner under this article.

4. "CMS" means the federal centers for Medicare and Medicaid services.

5. "CMS regulations" means applicable federal laws and CMS regulations and policies.

6. "Health care provider" includes but is not limited to an entity licensed or certified under article twenty-eight or thirty-six of this chapter; an entity licensed or certified under article sixteen, thirty-one or thirty-two of the mental hygiene law; or a health care practitioner licensed or certified under title eight of the education law or a lawful combination of such health care practitioners; and may also include, to the extent provided by regulation of the commissioner, other entities that provide technical assistance, information systems and services, care coordination and other services to health care providers and patients participating in an ACO.

7. "Medicare-only ACO" means an ACO issued a certificate of authority under subdivision four of section twenty-nine hundred ninety-nine-p of this article.

8. "Primary care" means the health care fields of family practice, general pediatrics, primary care internal medicine, primary care obstetrics, or primary care gynecology, without regard to board

certification, provided by a health care provider acting within his, her, or its lawful scope of practice.

9. "Third-party health care payer" has its ordinary meanings and may include any entities provided for by regulation of the commissioner, which may include an entity such as a pharmacy benefits manager, fiscal administrator, or administrative services provider that participates in the administration of a third-party health care payer system.