#### § 148.101

#### Subpart C—Requirements Related to Renefits

148.170 Standards relating to benefits for mothers and newborns.

148.180 Prohibition of discrimination based on genetic information.

### Subpart D—Preemption; Excepted Benefits

148.210 Preemption.

148.220 Excepted benefits.

# Subpart E—Grants to States for Operation of Qualified High Risk Pools

148.306 Basis and scope.

148.308 Definitions.

148.310 Eligibility requirements for a grant.

148.312 Amount of grant payment.

148.314 Periods during which eligible States may apply for a grant.

148.316 Grant application instructions.

148.318 Grant application review.

148.320 Grant awards.

AUTHORITY: 42 U.S.C. 300gg through 300gg-63, 300gg-11 300gg-91, and 300-gg92, as amended.

SOURCE: 62 FR 16995, Apr. 8, 1997, unless otherwise noted.

#### **Subpart A—General Provisions**

## §148.101 Basis and purpose.

This part implements sections 2741 through 2763 and 2791 and 2792 of the PHS Act. Its purpose is to guarantee the renewability of all coverage in the individual market. It also provides certain protections for mothers and newborns with respect to coverage for hospital stays in connection with childbirth and protects all individuals and family members who have, or seek, individual health insurance coverage from discrimination based on genetic information.

 $[79 \; \mathrm{FR} \; 30340, \; \mathrm{May} \; 27, \; 2014]$ 

#### §148.102 Scope and applicability date.

(a) Scope and applicability. (1) Individual health insurance coverage includes all health insurance coverage (as defined in §144.103 of this subchapter) that is neither health insurance coverage sold in connection with an employment-related group health plan, nor short-term, limited-duration coverage as defined in §144.103 of this subchapter.

#### 45 CFR Subtitle A (10-1-23 Edition)

(2) The requirements that pertain to guaranteed renewability for all individuals, to protections for mothers and newborns with respect to hospital stays in connection with childbirth, and to protections against discrimination based on genetic information apply to all issuers of individual health insurance coverage in the State.

(b) Applicability date. Except as provided in §148.124 (certificate of creditable coverage), §148.170 (standards relating to benefits for mothers and newborns), and §148.180 (prohibition of health discrimination based on genetic information), the requirements of this part apply to health insurance coverage offered, sold, issued, renewed, in effect, or operated in the individual market after June 30, 1997. Notwithstanding the previous sentence, the definition of "short-term, limited-duration insurance" in §144.103 of this subchapter is applicable October 2, 2018.

[79 FR 30340, May 27, 2014, as amended at 81 FR 75327, Oct. 31, 2016; 83 FR 38243, Aug. 3, 2018]

# Subpart B—Requirements Relating to Access and Renewability of Coverage

#### § 148.120 Guaranteed availability of individual health insurance coverage to certain individuals with prior group coverage.

The rules for guaranteeing the availability of individual health insurance coverage to certain eligible individuals with prior group coverage have been superseded by the requirements of \$147.104 of this subchapter, which set forth Federal requirements for guaranteed availability of coverage in the group and individual markets.

[79 FR 30340, May 27, 2014]

# § 148.122 Guaranteed renewability of individual health insurance coverage.

(a) Applicability. This section applies to non-grandfathered and grandfathered health plans (within the meaning of §147.140 of this subchapter) that are individual health insurance coverage. See also §147.106 of this subchapter for requirements relating to