WEST VIRGINIA CODE: §30-3F-3

§30-3F-3. Prohibited and authorized practices.

(a) A direct medical care membership agreement is not insurance and is not subject to regulation by the Office of the Insurance Commission.

(b) A direct medical care provider or its agent is not required to obtain a certification of authority or license under chapter thirty-three to market, sell or offer to sell a direct care agreement.

(c) A direct medical care membership agreement is not a discount medical plan.

(d) A direct medical care membership agreement shall:

(1) Be in writing;

(2) Be signed by the medical care provider or agent of the medical care provider and the individual patient or his or her legal representative;

(3) Allow either party to terminate the agreement on at least 30 days prior written notice to the other party;

(4) Describe the scope of medical care services that are covered by the periodic fee;

(5) Specify the periodic fee and any additional fees outside of the periodic fee for ongoing care under the agreement;

(6) Specify the duration of the agreement and any automatic renewal periods. Any per-visit charges under the agreement will be less than the monthly equivalent of the periodic fee. The person is not required to pay more than twelve months of the fee in advance. Funds are not earned by the practice until the month of ongoing care is completed. Upon discontinuing the agreement all unearned funds are returned to the patient; and

(7) Prominently state in writing that the agreement is not health insurance.

WV Legislature