WEST VIRGINIA CODE: §33-44-11

§33-44-11. Person providing specified coverage; proof of regulation by a federal government agency.

(a) Any person who transacts insurance, transacts an insurance business or provides insurance coverage in this state for the cost of:
(1) Medical care;
(2) Surgery;
(3) Chiropractic;
(4) Physical therapy;
(5) Speech pathology;
(6) Audiology;
(7) Professional care of mental health;
(8) Dental care;
(9) Hospital care; or
(10) Ophthalmic care, whether the coverage provides for direct payment, reimbursement or

- (10) Ophthalmic care, whether the coverage provides for direct payment, reimbursement or any other method of payment, is subject to regulation by the commissioner and to the provisions of this code unless he or she shows that while transacting insurance, or transacting an insurance business or providing the coverage he or she is subject to regulation by an agency of the federal government.
- (b) A person may show that he or she is subject to regulation by an agency of the federal government by providing the commissioner with an advisory opinion issued pursuant to ERISA Procedure 76-1, 41 Federal Register 36281 (Aug. 27, 1976).