

**WEST VIRGINIA
SECRETARY OF STATE
JOE MANCHIN, III
ADMINISTRATIVE LAW DIVISION**

Form #4

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2004 DEC 20 A 9:59

OFFICE WEST VIRGINIA
SECRETARY OF STATE

NOTICE OF RULE MODIFICATION OF A PROPOSED RULE

AGENCY: Insurance Commissioner TITLE NUMBER: 114

CITE AUTHORITY: WV Code §§33-2-10 and 33-41-10

AMENDMENT TO AN EXISTING RULE: YES NO

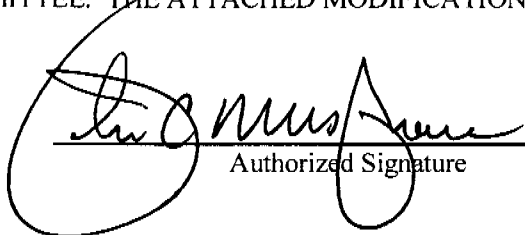
IF YES, SERIES NUMBER OF RULE BEING AMENDED: _____

TITLE OF RULE BEING AMENDED: _____

IF NO, SERIES NUMBER OF RULE BEING PROPOSED: 71

TITLE OF RULE BEING PROPOSED: Insurance Fraud Prevention

THE ABOVE PROPOSED LEGISLATIVE RULES, FOLLOWING REVIEW BY THE LEGISLATIVE RULE MAKING REVIEW COMMITTEE, IS HEREBY MODIFIED AS A RESULT OF REVIEW AND COMMENT BY THE LEGISLATIVE RULE MAKING REVIEW COMMITTEE. THE ATTACHED MODIFICATIONS ARE FILED WITH THE SECRETARY OF STATE.


Authorized Signature

**114CSR71
LEGISLATIVE RULE
INSURANCE COMMISSIONER**

**SERIES 71
INSURANCE FRAUD PREVENTION**

Section

- 114-71-1. General.
- 114-71-2. Designation of Primary Contact.
- 114-71-3. Reporting of Insurance Fraud or Criminal Offenses Otherwise Related to the Business of Insurance.

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LEGISLATIVE RULE
INSURANCE COMMISSIONER

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SERIES 71
INSURANCE FRAUD PREVENTION

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SECRETARY OF STATE

§114-71-1. General.

- 1.1. Scope. -- This legislative rule establishes standards for reporting insurance fraud.
- 1.2. Authority. -- W. Va. Code §§33-2-10 and 33-41-10.
- 1.3. Filing Date. --
- 1.4. Effective Date. --

§114-71-2. Designation of Primary Contact.

2.1. Every insurer shall designate at least one (1) primary contact person but not more than four (4) primary contact persons who shall communicate with the Insurance Fraud Unit on matters relating to the reporting, investigation, and prosecution of suspected fraudulent insurance acts.

2.2. Every insurer shall notify the Insurance Fraud Unit in writing of the names, titles, addresses, and telephone numbers of the insurer's primary contact person or persons. Any changes to information relating to the contact person or persons must be reported to the Insurance Fraud Unit within ten (10) days of the changes.

§114-71-3. Reporting of Insurance Fraud or Criminal Offenses Otherwise Related to the Business of Insurance.

3.1. All persons identified in W. Va. Code §33-41-5(a) shall report in writing all suspected fraudulent insurance acts to the Insurance Fraud Unit.

3.2. The report shall be filed with the Insurance Fraud Unit within fourteen (14) days of the determination by the reporter that a suspected fraudulent insurance act has been committed.

3.3. When a suspected fraudulent insurance act is reported, the following information, if known, shall be reported to the Insurance Fraud Unit:

- a. Date of preparation of the report.
- b. The following information about the reporting insurance company:

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1. Name of insurance company;
2. Telephone number and fax number of insurance company;
3. Policy number or claim number; and
4. Insurance policy type.

c. The following information about the reporting person if not an insurance company:

1. Complete name;
2. Occupation and title;
3. Complete address; and
4. Telephone number and fax number.

d. The following information about the loss or occurrence:

1. Date of loss or occurrence;
2. Location of loss including the complete address;
3. Estimated value of claim for loss; and
4. Whether claim was paid or not paid.

e. The following information concerning the parties involved and their roles:

1. Complete names of all parties;
2. Business and alias names of parties;
3. Roles of each party;
4. Complete address of each party;

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5. Phone number of each party;
6. Date of birth or age of each party;
7. Social Security number of each party;
8. Tax identification number of each party; and
9. Driver's license number of each party.

f. A detailed narrative of what fraudulent insurance act is suspected and the circumstances leading to the suspicion of fraud.

g. A list of the type of documents in the possession of the reporter, for example police reports, photographs, or falsified documents, supporting the suspicion of fraud.

h. Any other agency or entity to which the reporter has reported suspected fraud, including the name, address, and telephone number of the other agency.

3.4. The report provided must be signed and dated by the reporting party or an authorized representative of the reporting party.

3.5. The required information shall be submitted on a form prescribed by the commissioner.