

What is the Fishermen's Fund

- Established in 1951, the Fishermen's Fund provides for the medical treatment and care of Alaska licensed commercial fishermen who have been injured while fishing in Alaska or in Alaska waters. It provides for the treatment and care of injured commercial fisherman. The Fund does not provide wage replacement.
 - 200 mile limit
- Benefits from the Fund are financed from revenue received from each resident and nonresident commercial fisherman's license and permit fee.
- The Fund is a payer of last resort, which means that benefits are awarded only after full consideration of other coverage from private health or vessel insurance, and public programs, including Veterans' Affairs or Medicare. (Medicaid is an exception).
- The Commissioner of Labor and Workforce Development oversees administration of the program with the assistance of the Fishermen's Fund Advisory and Appeals Council.
- The council is composed of the Commissioner or his designee, who serves as chair, and five members appointed by the Governor.
- Pre-dates statehood, specifically the State constitution and is a dedicated fund.
- The legislature may appropriate up to 50% of the interest income earned by the state on the balance of the fund for a grant for statewide marine safety training and education.

How Fishermen's Fund is Funded

- 39% of money derived from commercial fishermen's licenses, up to \$50 per license holder
- The Fishermen's Fund is funded by a percentage of each limited entry permit (owner) and commercial fishing license (crewmember) issued (AS 23.35.060).
- In essence, commercial fishers who fish in "Alaska water" pay a "contribution fee" each time they buy a crewmember license or renew their permit.

What Benefits are Available

- Up to \$10,000 per injury / accident
- Up to one year for treatment
 - Except for compelling reasons, benefits for the care of any one person involving a single injury or disability will not be paid beyond one year from the date of initial allowance, and cannot exceed \$10,000.
 - Fish Fund Council may approve extensions of treatment of care and extension of benefits beyond the \$10,000 Fund limit. (AS 23.35.140).
- Vessel owner may be reimbursed 50 percent of the vessel owner's policy deductible, up to a maximum of \$5,000, if a fisherman files a claim against the protection and indemnity (P&I) insurance policy of the vessel owner. (AS 23.35.145).

Qualifying for Benefits

- The department makes the initial determination regarding whether a fisherman is entitled to benefits.
- Crewmembers with injury or illness connected to operations as a commercial fisherman.
- Must hold valid commercial fishing licenses or limited entry permits before the time of injury or illness to qualify for benefits.
 - Eligibility of a limited entry permit holder is based on the embossed date of the permit, not the date on which it was paid or when payment was received.
- Initial treatment must be received within 60 days after onset of injury or illness.
- An application must be submitted within one (1) year after initial treatment.
- Each treatment must be documented by a medical chart note and submitted.
- Injury must have occurred in Alaska or in Alaskan waters.
- If the vessel has P&I coverage and the cost of the injury will exceed skipper/vessel owner's deductible, they must file a claim against the P&I carrier.

To Whom are Benefits Paid

- Benefits will be paid only to the medical provider or to the fisherman.
 - To the provider if the bill is outstanding; or
 - To the Fisherman if his payment is verified by evidence such as cancelled checks, receipts, or bills or statements from medical providers.
- The vessel owner may be reimbursed 50 percent of the vessel owner's P&I deductible, up to a maximum of \$5,000, if the fisherman files a claim against the P&I carrier. P&I carriers provide marine coverage for skippers, crewmembers, and hull coverage.

What is the Fishermen's Fund Advisory and Appeals Council

- The Fisherman's Fund Advisory and Appeals Council consists of five members and one Commissioner appointed designee.
- Term: five years
- How often does the Council meet?
 - The Council meets twice a year, typically in the spring (April/May) and fall (Sept. /Oct.).
- What determinations does the Council make?
 - The department, through the Fund Administrator, makes the initial decision regarding whether a fisherman is entitled to benefits from the fund, the Council reviews all denials and all extensions of benefits over \$10,000 and extensions for treatment.
- How many reviews and determinations does the Council make at each meeting:
 - Reviews approximately 20 denials by the Fund.
 - Makes approximately 10 to 20 determinations.

Statutory & Regulatory Authority:

- AS23.35.010 – 23.35.150, Commercial Fishermen's Fund
- 8 AAC 55.010 – 55.900, Fishermen's Fund
- 2010, Fund limit was raised from \$2,500 to 10,000 & vessel owners could receive P&I deductible expense reimbursement.
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Statistics

	FY2019	FY2018	FY2017	FY2016
Fund Balance	\$11,767,546	\$11,685,439	\$11,459,539	\$11,324,884
Fund Appropriation	\$1,389,600	\$1,458,900	\$1,456,500	\$1,657,200
Total Fund Revenues	\$676,548	\$843,891	\$1,144,342	\$1,113,136
Crewmember Licenses	\$425,100	\$626,120	\$778,939	\$757,167
Permits	\$225,444	\$94,088	\$319,945	\$331,353
Misc.	\$26,004	\$3,954	\$45,458	\$24,640
Total Fund Expenses	\$717,366	\$824,604	\$962,516	\$1,178,536
Benefits Paid to injured Commercial Fishermen	\$531,192	\$551,422	\$731,871	\$916,231
Number of claims filed	273	323	402	437
Approved	139	221	291	310
Vessel owner claims filed	43	17	23	12
Claims approved for Reimbursement	5	9	13	7
Benefits Paid to Vessel Owners	\$6,250	\$18,433	\$33,750	\$15,000
Total Reported Deductibles	\$172,500	\$74,000	\$145,000	\$135,500