

**ALASKA LEGISLATURE**

**2129**

*280*

**HOUSE and SENATE FINANCE COMMITTEE FILES, 1999 - 2000**

**SB**

**2017**

**SFIN**

**FILE**

# SENATE FINANCE COMMITTEE REPORT

DATE: 4/14/00

FURTHER:

REPORTED OUT OF  
SFC 4/15/00

DATE TURNED  
IN TO OFFICE:

15 April 00

Finance Committee considered

SENATE BILL NO. 207

"An Act relating to the establishment and enforcement of medical support orders for children; and providing for an effective date."

and recommends:

- be replaced with \_\_\_\_\_ CS \_\_\_\_\_ (\_\_\_\_\_)
- adopt previous \_\_\_\_\_ CS \_\_\_\_\_ (\_\_\_\_\_)
- attached amendment(s)
- adopt Letter of Intent by \_\_\_\_\_ Committee
- further referral to the \_\_\_\_\_ Committee

Senate Bill:

- same title
  - new title
- House Bill:
- same title
  - technical title
  - new: SCR# \_\_\_\_\_

| SIGNING DO PASS              | DP                                  | OTHER RECOMMENDATIONS        | NR                                  | DNP | AM |
|------------------------------|-------------------------------------|------------------------------|-------------------------------------|-----|----|
| <i>Ad Adams</i>              | <input checked="" type="checkbox"/> | <i>Roll &amp; file</i>       | <input checked="" type="checkbox"/> |     |    |
|                              |                                     | <i>Lyle Green</i>            | <input checked="" type="checkbox"/> |     |    |
|                              |                                     | <i>Pat Kelly</i>             | <input checked="" type="checkbox"/> |     |    |
|                              |                                     | <i>Arwin D. Roman</i>        | <input checked="" type="checkbox"/> |     |    |
|                              |                                     | <i>Gary White</i>            | <input checked="" type="checkbox"/> |     |    |
|                              |                                     | <i>Tom Dwyer</i>             | <input checked="" type="checkbox"/> |     |    |
| Co-Chair: <i>[Signature]</i> | <input checked="" type="checkbox"/> | Co-Chair:                    |                                     |     |    |
| Co-Chair: <i>[Signature]</i> |                                     | Co-Chair: <i>Alan Powell</i> | <input checked="" type="checkbox"/> |     |    |

**NEW FISCAL NOTE(S):**

Department                      Date      Zero      Fiscal

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**PREVIOUS FISCAL NOTE(S):\***

Department                      Date      Zero      Fiscal

|         |          |                                     |  |
|---------|----------|-------------------------------------|--|
| Revenue | 12/28/99 | <input checked="" type="checkbox"/> |  |
|         |          |                                     |  |
|         |          |                                     |  |
|         |          |                                     |  |
|         |          |                                     |  |
|         |          |                                     |  |

APPROPRIATION -- no fiscal note

\*include fiscal notes accompanying Governor's bill

# FISCAL NOTE

STATE OF ALASKA  
2000 LEGISLATIVE SESSION

BILL NO. SB 207

Revision Date/Time (Note if correction) \_\_\_\_\_ Dept. Affected \_\_\_\_\_ Revenue \_\_\_\_\_  
 Title Medical Support Orders for Children BRU Child Support Enforcement  
 Component Child Support Enforcement  
 Sponsor Rules  
 Requester Senate Health, Education and Social Services Component No. 111

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

| OPERATING EXPENDITURES | FY 2001    | FY 2002    | FY 2003    | FY 2004    | FY 2005    | FY 2006    |
|------------------------|------------|------------|------------|------------|------------|------------|
| Personal Services      |            |            |            |            |            |            |
| Travel                 |            |            |            |            |            |            |
| Contractual            |            |            |            |            |            |            |
| Supplies               |            |            |            |            |            |            |
| Equipment              |            |            |            |            |            |            |
| Land & Structures      |            |            |            |            |            |            |
| Grants & Claims        |            |            |            |            |            |            |
| Miscellaneous          |            |            |            |            |            |            |
| <b>TOTAL OPERATING</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

|                             |  |  |  |  |  |  |
|-----------------------------|--|--|--|--|--|--|
| <b>CAPITAL EXPENDITURES</b> |  |  |  |  |  |  |
|-----------------------------|--|--|--|--|--|--|

|                               |  |  |  |  |  |  |
|-------------------------------|--|--|--|--|--|--|
| <b>CHANGE IN REVENUES ( )</b> |  |  |  |  |  |  |
|-------------------------------|--|--|--|--|--|--|

**FUND SOURCE** (Thousands of Dollars)

|                          |            |            |            |            |            |            |
|--------------------------|------------|------------|------------|------------|------------|------------|
| 1002 Federal Receipts    |            |            |            |            |            |            |
| 1003 GF Match            |            |            |            |            |            |            |
| 1004 GF                  |            |            |            |            |            |            |
| 1005 GF/Program Receipts |            |            |            |            |            |            |
| 1037 GF/Mental Health    |            |            |            |            |            |            |
| Other (Specify Type)     |            |            |            |            |            |            |
| <b>TOTAL</b>             | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

Estimate of any current year (FY2000) cost: \_\_\_\_\_

**POSITIONS**

|           |  |  |  |  |  |  |
|-----------|--|--|--|--|--|--|
| Full-time |  |  |  |  |  |  |
| Part-time |  |  |  |  |  |  |
| Temporary |  |  |  |  |  |  |

**ANALYSIS:** (Attach a separate page if necessary)

The main feature of this legislation would allow the Child Support Enforcement Division to issue a medical support order without it having to be in conjunction with an order for financial support. Under existing statutes, an order for medical support can only be established in conjunction with a financial support order. This bill changes the law so that a medical support order may be established on its own.

Prepared by: Barbara Miklos, Director Phone \_\_\_\_\_  
 Division Child Support Enforcement Division Date/Time 2/7/00 9:06 AM  
 Approved by: Wilson Condon, Commissioner Date \_\_\_\_\_  
 Agency Department of Revenue

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Green COMMITTEE  
2000 COMMITTEE ACTION

|                                |          |                          |          |
|--------------------------------|----------|--------------------------|----------|
| <b>Bill Number</b>             |          |                          |          |
| <b>Amendment</b>               |          | SB 207                   |          |
| <b>Motion</b>                  |          | Report from<br>Committee |          |
| <b><u>Motion by</u></b>        |          | A                        |          |
| <b><u>Objection by</u></b>     |          | FH                       |          |
| <b>Removed</b>                 |          |                          |          |
| <b>Second Objection by</b>     |          |                          |          |
| <b><u>Committee Member</u></b> | <b>Y</b> | <b><u>Vote</u></b>       | <b>N</b> |
| Senator Lyda Green             | ✓        |                          |          |
| Senator Randy Phillips         |          |                          | ✓        |
| Senator Dave Donley            | ✓        |                          |          |
| Senator Loren Leman            | ✓        |                          |          |
| Senator Al Adams               | ✓        |                          |          |
| Senator Gary Wilken            | ✓        |                          |          |
| Senator Pete Kelly             | ✓        |                          |          |
| Co-Chair Sean Parnell          | ✓        |                          |          |
| Co-Chair John Torgerson        | ✓        |                          |          |
| <b><u>Tally</u></b>            |          |                          |          |
| Yea                            | 8        |                          |          |
| Nay                            | 1        |                          |          |
| Absent                         |          |                          |          |
| <b><u>MOTION</u></b>           |          | Pass                     |          |

## Medical Support Order Survey

CSED asked all states whether the child support agency could establish separate medical orders. Twenty-four responded.

Total responses: 24. "Yes" responses 16 and "No" responses 3. Five states responded that all orders are done by the court.

### "Yes" Answers:

|                       |                     |                   |
|-----------------------|---------------------|-------------------|
| <b>Arizona</b>        | <b>Arkansas</b>     | <b>California</b> |
| <b>Colorado</b>       | <b>Hawaii</b>       | <b>Idaho</b>      |
| <b>Iowa</b>           | <b>Kentucky</b>     | <b>Maine</b>      |
| <b>Nebraska</b>       | <b>North Dakota</b> | <b>Oregon</b>     |
| <b>South Carolina</b> | <b>Texas</b>        | <b>Washington</b> |

**Connecticut**-can take voluntary agreements and file with court or they can petition the court for medical only orders.

### "No" Answers:

**Montana**-may only be established as part of an action or proceeding to establish a support order; no medical support order process.

**South Dakota**-does not have authority to establish medical support only orders.

**Utah**-does not establish without financial awards. In Medicaid only cases in which the obligee has declined financial child support services and there is no child or medical support order, they first establish an order with both provisions. If there is already an order, and if the Medicaid only obligee has declined financial child support collection and enforcement services, will we then enforce only the medical obligation.

### Orders Established By Court Only:

|                      |                  |                 |
|----------------------|------------------|-----------------|
| <b>DC</b>            | <b>Louisiana</b> | <b>Maryland</b> |
| <b>Massachusetts</b> | <b>Virginia</b>  |                 |

## **Sectional Analysis Senate Bill 207**

### **“An Act relating to the establishment and enforcement of medical support orders for children and providing for an effective date.”**

This bill makes three changes to child support statutes. First, under existing statutes, an order for medical support can only be established in conjunction with a financial support order. This bill changes the law so that a medical support order may be established on its own. Second, this bill amends the medical support statutes to provide that either parent, not simply the obligor parent, may be required to provide health care coverage. Third, this bill amends the law to require that a medical support order be issued regardless of whether health care coverage is currently available to either parent.

Since so many statutes address child support, changes must be made to many different sections.

Section 1 removes the requirement in AS 25.27.020(a) (9) that a medical support order be issued only as part of a child support order. It also amends the statutes to provide that either parent, not simply the obligor parent, may be required to provide health care coverage.

Section 2 accomplishes the same as Section 1. However, this section amends AS 25.27.060(c), which addresses court orders.

Section 3 amends AS 25.27.063(a) so that either parent may be ordered to provide medical support, not just the obligor. It also adds language clarifying that the parent must provide health insurance only if the health insurance is available at a reasonable cost. This makes this section consistent with other statutes.

Section 4 amends AS 25.27.063(b) so that either parent may be ordered to provide medical support, not just the obligor.

Section 5 amends AS 25.27.140(a) to allow CSED to establish a medical support order as part of a duty of support.

Section 6 amends AS 25.27.140(c) so that it is clear that CSED will not send out an income withholding order with a medical support order only.

Section 7 amends AS 25.27.160 to include the establishment of medical support orders in the same procedures used to establish child support orders. The section

clarifies that CSED must serve the obligor with a notice and finding of financial responsibility to establish a medical support order only. However, it exempts medical support orders from certain requirements, including the requirement that the notice set a periodic payment amount and that the notice inform the obligor of the possibility that the obligor's property and assets will be subject to execution.

Section 8 adds a new section to AS 25.27.160 that delineates the requirements for a notice and finding of financial responsibility for a medical support order.

Sections 9 and 10 amend AS 25.27.170(d) and 25.27.170(f) so that hearing officers of the Department of Revenue have clear direction when holding hearings for medical support orders only. In Section 9, when the hearing relates to medical support only, the hearing officer is not required to determine the amount of periodic payments. In Section 10, when the hearing relates to medical support only, the obligor's property and income is not subject to immediate execution if the obligor fails to appear at the hearing.

Section 11 describes what must happen in a hearing for a medical support order only. The hearing officer shall determine whether either parent is required to provide health care coverage, taking into consideration whether coverage is available to either parent at a reasonable cost and whether adequate health care is available through Indian Health Service or other insurance coverage.

Section 12 adds the requirement that a decision issued by a hearing officer include a medical support order. It removes the requirement that the hearing officer determine the amount of periodic payments if a medical support order only is being established.

Section 13 adds the duty to provide health care coverage to the definition of duty to support.

Section 14 specifies that the legislation takes effect immediately.

# FISCAL NOTE

**STATE OF ALASKA**  
**2000 LEGISLATIVE SESSION**

**BILL NO. SB 207**

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| Miscellaneous          |            |            |            |            |            |            |
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|                             |  |  |  |  |  |  |
|-----------------------------|--|--|--|--|--|--|
| <b>CAPITAL EXPENDITURES</b> |  |  |  |  |  |  |
|-----------------------------|--|--|--|--|--|--|

|                               |  |  |  |  |  |  |
|-------------------------------|--|--|--|--|--|--|
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|-------------------------------|--|--|--|--|--|--|

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|                          |            |            |            |            |            |            |
|--------------------------|------------|------------|------------|------------|------------|------------|
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| 1003 GF Match            |            |            |            |            |            |            |
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Estimate of any current year (FY2000) cost: \_\_\_\_\_

**POSITIONS**

|           |  |  |  |  |  |  |
|-----------|--|--|--|--|--|--|
| Full-time |  |  |  |  |  |  |
| Part-time |  |  |  |  |  |  |
| Temporary |  |  |  |  |  |  |

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 Agency Department of Revenue

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# **HOW TO CALCULATE CHILD SUPPORT UNDER CIVIL RULE 90.3**

## **Instructions for**

**Form DR-105, Petition for Dissolution of Marriage  
(the child support sections)**

**Form DR-305, Child Support Guidelines Affidavit**

**Form DR-306, Shared Custody Child Support Calculation**

**DECEMBER 1999**

**Alaska Court System  
Office of Special Projects  
820 West Fourth Avenue  
Anchorage, Alaska 99501**

On the inside and the outside of the back cover is a chart you can use to check your calculations. It shows the monthly amount owed at adjusted annual income levels from \$5,000 to \$84,000 if there are from one to five children.

Box Two: Shared Physical Custody.

If you check this box, you will need to fill out form DR-306, *Shared Custody Child Support Calculator*, before you can fill in the child support amount. The instructions for this form begin on page 10.

5. Health Care Coverage.

The following instructions apply to:

- page 9 of the DR-105 *Petition*, paragraph VI.A.4 and
- pages 2-3 of the DR-305 *Affidavit*, paragraph G.

The court is required by statute and by court rule to include a medical support order in the child support order if health care coverage is available at a reasonable cost. However, before ordering that health insurance be purchased, the court must consider whether the children are eligible for free health care services from the Indian Health Service or some other entity (such as the military). Although one party may be ordered to purchase the insurance, the cost of it must be shared between the parties. This is done by adjusting the amount of child support upward or downward. AS 47.23.060(c) and Civil Rule 90.3(d)(1).

Health Insurance

If the children are not eligible for services from the Indian Health Service or some similar health coverage, and if health insurance for the children is available to either parent at a reasonable cost (for example through your employer or union), the parent who has the insurance available must purchase it. If both parents have such insurance available, you must agree (or the court must decide) which one of you will purchase it. The cost must be divided equally between you unless you can show the court good cause why it should be divided differently. In paragraph 4.a on page 9 of the *Petition* (section G(1) of the *Affidavit*), you must indicate who has such insurance available, who will purchase it and how the cost will be divided between you.

Uninsured Health Care Expenses

In paragraph 4.b on page 10 of the *Petition* (section G(2) of the *Affidavit*), you must describe your agreement about how you will share the cost of health care expenses which are not covered by insurance. Civil Rule 90.3(d)(2) requires the court to divide such expenses between the parties equally unless good cause is shown for dividing them differently or unless the expenses are more than \$5,000 in a calendar year. The rule requires that reasonable expenses exceeding \$5,000 per calendar year must be allocated based on the parties' relative financial circumstances when the expenses occur. If, in the future, the children's uninsured expenses exceed \$5,000 and you cannot agree on how to divide them, you will have to file a motion with the court. If you believe that uncovered expenses under \$5,000 should be divided unequally, check the second box and explain your reasons (for example, a substantial difference in the parties' relative financial circumstances). See section VII of the commentary on pages 34-35.

6. Monthly Child Support Payment (after adding or deducting health insurance costs).

The following instructions apply to:

- page 10 of the DR-105 *Petition*, paragraph VI.A.5, and
- page 3 of the DR-305 *Affidavit*, paragraph H

In paragraph 5 on page 10 of the *Petition* (section H of the *Affidavit*), you must either increase or decrease the amount of child support owed, depending on who is purchasing the insurance and how the cost will be divided between you. For example, if the obligor will buy insurance for the children costing \$100 per month and you have agreed that the obligor will pay half the cost, you should write \$50 on line 5b and subtract it from the amount on line 5a in order to get the net amount due on line 5d. If you had instead agreed that the obligor would pay 70% of the cost, then the amount to subtract on line 5b would be \$30 and you should also revise the beginning of that paragraph as follows:

"b. Less ~~1/2~~ (or 30 %) of..."

Note that the insurance cost referred to here is the actual cost of insuring the children who will be the subjects of this support order. It does not include the cost of insuring a parent or any other children who may live in the household. And, it must not include the value of any insurance provided for free by an employer (that is, with no paycheck deduction).

Civil Rule 90.3(d)(1) requires that child support be adjusted only for those insurance payments which are actually made. Therefore, the child support order will state that if these payments are not made, the monthly child support amount due will return to what it was before the adjustment.

7. Signature Section of DR-305 Affidavit.

After filling in section H of the *Affidavit*, you must sign it under oath before a notary public, court clerk or other person authorized to administer oaths. Remember that, in signing the affidavit under oath, you are swearing that all the information you have provided is the truth. There is no charge when you get your affidavit notarized at the court. Bring a photo ID with you to prove your identity.

The information on the DR-105 *Petition* is also being given under oath, but the signature section of that form is several pages later.

8. Request For Different Child Support Amount.

Form DR-105. *Petition*. page 10. section VI.A.6.

You may fill in this section of the *Petition* if you believe the child support amount should be different from that shown in paragraph VI.A.5 of the *Petition* (the amount calculated as required by Civil Rule 90.3).

There are three situations in which the court can change the amount of child support from that shown in paragraph 5.d on page 9 of your *Petition*. The three situations are:

- A. "Unusual Circumstances" as stated in Civil Rule 90.3(c)(1)(A).
- B. "Income Below Poverty Level" as defined in Civil Rule 90.3(c)(1)(B).
- C. "The \$84,000 Exception" as defined in Civil Rule 90.3(c)(2).

If the court does agree to allow a different child support amount, the court must specify in writing the reasons for allowing it and the amount which would have been required if the formulas in the rule had been followed.

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

CASE NO. \_\_\_\_\_

ORDER FOR MODIFICATION OF  
CHILD SUPPORT

1. Children. This order affects the following children:

| <u>Full Names of Children</u> | <u>Birth Dates</u> | <u>Social Security No.</u> |
|-------------------------------|--------------------|----------------------------|
| _____                         | _____              | _____                      |
| _____                         | _____              | _____                      |
| _____                         | _____              | _____                      |
| _____                         | _____              | _____                      |

2. Father

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residence Address (if different): \_\_\_\_\_

Most Recent Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Mother

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residence Address (if different): \_\_\_\_\_

Most Recent Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Custodian (if not a parent)

Full Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residence Address (if different): \_\_\_\_\_

3. Physical Custody. The court finds that the current physical custody arrangement is:

a. Primary Physical Custody (i.e., children reside with one parent more than 70% of the year). The child(ren) reside primarily with \_\_\_\_\_.

Extended Visitation. The other parent will have physical custody of the child(ren) for the following periods of over 27 consecutive days \_\_\_\_\_  
\_\_\_\_\_

b. Shared Physical Custody (i.e., children reside with each parent for a specified period of at least 30% of the year).

The child(ren) reside with \_\_\_\_\_ during the following periods:  
\_\_\_\_\_

and with \_\_\_\_\_ during the following periods:  
\_\_\_\_\_  
\_\_\_\_\_

4. Support Modification. It is hereby ordered that the support order dated \_\_\_\_\_ is modified as follows:

a. Child Support. The obligor, \_\_\_\_\_, shall pay child support as follows:

| <u>Number of Children</u> | <u>Basic Monthly Amount Owed</u> | <u>Health Insurance Adjustment (¶6)</u> | <u>Total Monthly Amount Owed</u> |
|---------------------------|----------------------------------|---|----------------------------------|
| _____                     | _____                            | _____                                   | _____                            |
| _____                     | _____                            | _____                                   | _____                            |
| _____                     | _____                            | _____                                   | _____                            |

As each child reaches the age of 18, is otherwise legally emancipated or dies, the amount of support will change to the next lower amount, unless the following box is checked:

Support shall continue while each child is 18 years old if the child is (1) unmarried, (2) actively pursuing a high school diploma or equivalent level of technical or vocational training, and (3) living as a dependent with the obligee parent or guardian or a designee of the parent or guardian.

The first payment is due no later than \_\_\_\_\_. Subsequent payments are due no later than the 1<sup>st</sup> day of each month thereafter.

b. Primary Physical Custody — Extended Visitation Credit. If the extended visitation listed in paragraph 3.a. is exercised, child support is reduced for the listed period(s) as follows:  
\_\_\_\_\_  
\_\_\_\_\_

(This reduction may not exceed 75% of the amount owed for the period.)

If this visitation is not exercised, child support is not reduced. Civil Rule 90.3(a)(3).

- c. Shared Physical Custody. Failure to take physical custody of the child(ren) at least 30% of the year is grounds for modification of this support order. However, denial of visitation by the custodial parent is not cause to increase child support. Civil Rule 90.3(b)(5)

5. Application of Civil Rule 90.3 Formula.

- a. The above child support amounts were calculated using the formula in Civil Rule 90.3 (a) or (b).  Yes  No

- b. If not, the reason for the variation is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The amount of support which would have been required by the formula is: \$ \_\_\_\_\_ for \_\_\_\_\_ children per month to be paid by the  Mother  Father. Estimated value of any property conveyed instead of monetary support: \$ \_\_\_\_\_.

6. Medical Support Order. AS 25.27.060(c) and Civil Rule 90.3(d)(1). This order concerns health insurance for the child(ren) covered by this child support order. It does not concern health insurance for any other children or for the parents.

a. Current Coverage.

- The  obligor  obligee must purchase health insurance for the child(ren) because such insurance is available at reasonable cost through his/her employer, union or otherwise. Name and address of employer/union through which insurance will be purchased: \_\_\_\_\_

The insurance cost (currently \$ \_\_\_\_\_ per month) will be divided between the parties equally unless a different division of the cost is ordered.

The child support calculation in paragraph 4 includes:

- a credit of \$ \_\_\_\_\_ per month (50% of the cost to the obligor) for health insurance purchased for the child(ren) by the obligor. If the obligor fails to purchase the insurance, the monthly child support obligation will increase by this amount, without further order of the court, until the obligor purchases the insurance and provides proof of the purchase to the other parent and to the Child Support Enforcement Division (CSED) if CSED is handling collections.
- an extra \$ \_\_\_\_\_ per month (50% of the cost to the obligee) for health insurance purchased for the child(ren) by the obligee. If the obligee fails to purchase the insurance, the monthly child support obligation will decrease by this amount, without further order of the court, until the obligee purchases the insurance and provides proof of the purchase to the other parent and to the Child Support Enforcement Division (CSED) if CSED is handling collections.

If the cost of the insurance changes, the amount of the child support obligation will be adjusted accordingly, without further order of the court. The parent

purchasing the insurance shall provide documentation of the change to the other parent and to the Child Support Enforcement Division (CSED) if CSED is handling collections. If either parent believes the cost of the insurance has become unreasonable, that parent may file a motion asking the court to suspend the requirement that insurance be purchased.

- The children are eligible for services through  the Indian Health Service  military medical benefits but these services are not available in the area where the children live. Therefore, insurance must be purchased as stated above until these services become available.
- The children are eligible for services through  the Indian Health Service  military medical benefits and these services are available to the children. Therefore, no additional insurance is required while these services are available.
- Health insurance for the child(ren) is not now available at reasonable cost or its availability is unknown.

b. Future Coverage. If there is no health care coverage for the child(ren) and insurance becomes available to a parent at a reasonable cost, that parent must purchase the insurance after giving notice to the other parent. The cost of the insurance must be divided between the parents equally unless a different division of the cost is ordered. Without further order of the court, the monthly child support obligation will increase by 50% of the cost of the insurance if the obligee purchases it and decrease by 50% of the cost of the insurance if the obligor purchases it, unless otherwise ordered. If the parents disagree about whether the cost of insurance is reasonable or about which insurance policy should be purchased, either parent may file a motion asking the court to resolve the dispute.

c. Information for Other Parent. The parent purchasing the insurance must notify the insurance company that the other parent can apply for benefits on behalf of the child(ren) and should be reimbursed directly. The purchaser must also provide coverage information to the other parent and all forms and instructions necessary to apply for benefits.

7. **Uncovered Health Care Expenses (including medical, dental, vision and mental health counseling expenses). Civil Rule 90.3 (d)(2) and (f)(4)**

The cost of the child(ren)'s reasonable health care expenses not covered by insurance must be paid as follows, unless the expenses exceed \$5,000 in a calendar year:

- Obligor will pay half and obligee will pay half.
- Obligor will pay \_\_\_\_\_ and obligee will pay \_\_\_\_\_ because \_\_\_\_\_

A party shall reimburse the other party for his or her share of the uncovered expenses within 30 days after receiving the health care bill, proof of payment and, if applicable, a health insurance statement showing what part of the cost is uncovered. The bill and other materials should be sent within a reasonable time.

If the uncovered expenses exceed \$5,000 in a calendar year, the expenses must be allocated based on the parties' relative financial circumstances when the expenses occur.

8. Travel Expenses. Civil Rule 90.3 (g)

Travel expenses which are necessary to exercise visitation will be allocated between the parties as follows: \_\_\_\_\_

9. **INCOME WITHHOLDING ORDER.** Unless one of the following boxes is checked (or CSED later authorizes an exemption for one of these reasons), the obligor, any employer of the obligor and any person, political subdivision, department of the State, or other entity possessing property of the obligor, including any corporation created by the Alaska Native Claims Settlement Act, shall immediately withhold from the obligor's income and any other money due the obligor the amount of child support due pursuant to AS 25.27.062 and shall pay this amount to the Child Support Enforcement Division.

- The previous support order in this case did not require immediate withholding and CSED is not enforcing this order. Therefore, income withholding shall not be initiated until the requirements of AS 25.27.062(c) are met.
- The parties have agreed on the alternative arrangement described in the attached document signed by both parties, and income withholding has not been terminated previously and subsequently initiated.\*
- The court finds good cause not to require immediate income withholding because it would not be in the best interests of the child(ren) for the following reason:\* \_\_\_\_\_

The court further finds that the obligor has made voluntary support payments under the previous order and has not been in arrears in an amount equal to the support payable for one month, as defined in AS 25.27.062(m)(2)(B).

- The obligor is receiving social security or other disability compensation that includes regular payments to the child(ren) at least equal to the support owed each month. To the extent these payments to the child(ren) do not satisfy the monthly amount owed, the remaining amount due shall be withheld from the obligor's income pursuant to AS 25.27.062.

Even if one of the above boxes is checked, exempting the obligor from immediate income withholding, such withholding may be initiated under AS 25.27.062(c) through the court or through CSED.

10. **CSED Services.** All child support payments must be made to the Child Support Enforcement Division (CSED) if one of the parties applies for the services of CSED. In addition, if the above income withholding order is served on the obligor's employer or anyone holding money belonging to the obligor, the money withheld pursuant to the order must be paid to CSED.

- An application for CSED services has been made.
- No application for CSED services has been made at the time of this order.

\* In addition, the obligor has agreed to keep the obligee (or CSED if CSED is enforcing the order) informed of the obligor's current employer and the availability of employment-related health insurance coverage for the children until the support order is satisfied.

When payments are made through CSED:

- a. Payments must include the **case number** and names of both parties and must be made payable to the CHILD SUPPORT ENFORCEMENT DIVISION, PO Box 102760, Anchorage, Alaska 99510-2760. CSED shall disburse the payments as required by law after deducting any fee required by law.
- b. CSED shall maintain a record of support payments.
- c. Interest will be imposed in accordance with AS 25.27.020 on payments which are 10 or more days overdue or if payment is made by a check backed by insufficient funds. No interest will be charged, except on arrearages more than 30 days past due, if payments are made under an income withholding order.
- d. The parties shall notify CSED, in writing, of any change in their mailing or residence addresses within 5 days after any such change.
- e. The obligor shall keep CSED informed of the name and address of his or her current employer. Whenever employment changes, the obligor must notify CSED in writing within 20 days. This employment information must be given to the obligee instead of CSED if CSED is not enforcing the order.
- f. The party ordered to provide insurance shall provide to CSED proof of medical insurance coverage for the children within 20 days of this order. If insurance becomes unavailable, that party shall notify CSED within 20 days. When insurance again becomes available, that party must, within 20 days, give CSED proof that the children are insured. The above proof and notice of insurance must be given to the other party instead of CSED if CSED is not enforcing the order.
- g. If a party applies for CSED services:
  - (1) CSED shall take whatever enforcement action is deemed legally proper, including recommending contempt proceedings against the party ordered to pay support. **Failure to pay support as ordered may result in execution against the property of the obligor or arrest of the obligor.**
  - (2) Either party may ask CSED to review the amount of child support if it has been at least 12 months since the support order was last reviewed or modified. CSED may require that the request be made in writing on a form specified by CSED. The parties shall provide income information requested by CSED in connection with a review of the amount of child support within 20 days after the date the request is mailed.
  - (3) CSED may issue a withholding order, pursuant to AS 25.27.062 or AS 25.27.250, to attach funds owed to the obligor by any corporation created by the Alaska Native Claims Settlement Act (ANCSA). Upon service of such an order, the obligor's dividends, distributions and/or other periodic monetary benefits of ANCSA stock shall be transferred to the child support obligee pursuant to the terms of the withholding order. The ANCSA corporation shall pay the funds so transferred to CSED for distribution to the child support obligee.

11. **Effect of Assignment of Right to Child Support to State.** This order does not bind the Child Support Enforcement Division of Alaska or of any other state to the child support herein ordered if the person receiving child support is receiving or has currently applied for welfare benefits and assigns his or her rights to child support to the state. AS 25.27.120 - .130. If child support rights are assigned to the state, any alternative arrangement for immediate income withholding will not be allowed unless approved by CSED.
12. **Additional Information.** The parties are hereby notified that:
- a. Payment of support must be made as ordered herein, and the giving of gifts, clothing, or other in-kind payments will not fulfill the obligation.
  - b. Payment of support must be made as it becomes due, and failure to secure or denial of rights of visitation is not an excuse for nonpayment, but the aggrieved party must seek relief from the court as otherwise provided by law.
  - c. The payment of support takes priority over payment of debts and other obligations.
  - d. A party who marries or otherwise accepts additional obligations of support does so with the full knowledge of prior obligations under this proceeding and will be given no consideration for those additional obligations in subsequent proceedings for alleged failure to make the payments as ordered herein.
  - e. It is the responsibility of a person with seasonal employment to budget income so that payments are made regularly throughout the year as ordered.

Recommended for approval on

\_\_\_\_\_

Date

\_\_\_\_\_

Superior Court Master

\_\_\_\_\_

Superior Court Judge

\_\_\_\_\_

Date

\_\_\_\_\_

Type or Print Judge's Name

|   |
|---|
| <p>I certify that on _____</p> <p>a copy of this order was sent to:</p> <p>CSED</p> <p>Administrative Director of the Court System (if 5.a. is no)</p> <p>Employer of _____ (with DR-330 Notice)**</p> <p>Both Parties:</p> <p>Attorneys:</p> <p>Clerk: _____</p> |
|---|

\*\* A copy of the order and the DR-330 Notice to Employer Re: Children's Medical Insurance must be sent to the employer of the party ordered to purchase insurance for the children if that party is eligible for family healthcare coverage through his/her employer. AS 25.27.063(b).



3. Legal custody of the child(ren) named above is awarded to: \_\_\_\_\_

4. Physical Custody and Child Support. Civil Rule 90.3(f).

a. Primary Physical Custody For Child Support Purposes. The child(ren) shall reside primarily with \_\_\_\_\_. The other parent shall have physical custody less than 30% of the year.

The obligor, \_\_\_\_\_, shall pay child support as follows:

| <u>Number of Children</u> | <u>Basic Monthly Amount Owed</u> | <u>Health Insurance Adjustment (¶6)</u> | <u>Total Monthly Amount Owed</u> |
|---------------------------|----------------------------------|---|----------------------------------|
| _____                     | _____                            | _____                                   | _____                            |
| _____                     | _____                            | _____                                   | _____                            |
| _____                     | _____                            | _____                                   | _____                            |
| _____                     | _____                            | _____                                   | _____                            |

As each child reaches the age of 18, is otherwise legally emancipated or dies, the amount of support will change to the next lower amount, unless the following box is checked:

Support shall continue while each child is 18 years old if the child is (1) unmarried, (2) actively pursuing a high school diploma or equivalent level of technical or vocational training, and (3) living as a dependent with the obligee parent or guardian or a designee of the parent or guardian.

The first payment is due no later than \_\_\_\_\_. Subsequent payments are due no later than the \_\_\_\_\_ 1st day of each month thereafter.

Extended Visitation Credit. The obligor parent shall have physical custody of the child(ren) for the following periods of over 27 consecutive days:

\_\_\_\_\_  
\_\_\_\_\_

If this visitation is exercised, child support is reduced for the above period(s) as follows:

\_\_\_\_\_  
\_\_\_\_\_

(This reduction may not exceed 75% of the amount owed for the period.)

If this visitation is not exercised, child support is not reduced. [Civil Rule 90.3(a)(3)]

- b. Shared Physical Custody For Child Support Purposes [i.e., children reside with each parent for a specified period of at least 30% of the year].

The child(ren) shall reside with \_\_\_\_\_ during the following periods: \_\_\_\_\_

and with \_\_\_\_\_ during the following periods: \_\_\_\_\_

The obligor, \_\_\_\_\_, shall pay child support as follows:

| <u>Number of Children</u> | <u>Basic Monthly Amount Owed</u> | <u>Health Insurance Adjustment (§16)</u> | <u>Total Monthly Amount Owed</u> |
|---------------------------|----------------------------------|--|----------------------------------|
| _____                     | _____                            | _____                                    | _____                            |
| _____                     | _____                            | _____                                    | _____                            |
| _____                     | _____                            | _____                                    | _____                            |

As each child reaches the age of 18, is otherwise legally emancipated or dies, the amount of support will change to the next lower amount, unless the following box is checked:

- Support shall continue while each child is 18 years old if the child is (1) unmarried, (2) actively pursuing a high school diploma or equivalent level of technical or vocational training, and (3) living as a dependent with the obligee parent or guardian or a designee of the parent or guardian.

The first payment is due no later than \_\_\_\_\_. Subsequent payments are due no later than the \_\_\_\_\_ 1st day of each month thereafter.

Failure to take physical custody of the child(ren) at least 30% of the year is grounds for modification of this support order. However, denial of visitation by the custodial parent is not cause to increase child support. Civil Rule 90.3(b)(5)

5. Application of Civil Rule 90.3 Formula

- a. The above child support amounts were calculated using the formula in Civil Rule 90.3 (a) or (b).  Yes  No
- b. If not, the reason for the variation is: \_\_\_\_\_

The amount of support which would have been required by the formula is:  
 \$\_\_\_\_\_ for \_\_\_ children per month to be paid by the  Mother  Father.  
 Estimated value of any property conveyed instead of monetary support: \$\_\_\_\_\_.

6. Medical Support Order. AS 25.27.060(c) and Civil Rule 90.3(d)(1). This order concerns health insurance for the child(ren) covered by this child support order. It does not concern health insurance for any other children or for the parents.

a. Current Coverage.

The  obligor  obligee must purchase health insurance for the child(ren) because such insurance is available at reasonable cost through his/her employer, union or otherwise. Name and address of employer/union through which insurance will be purchased: \_\_\_\_\_

The insurance cost (currently \$ \_\_\_\_\_ per month) will be divided between the parties equally unless a different division of the cost is ordered.

The child support calculation in paragraph 4 includes:

a credit of \$ \_\_\_\_\_ per month (50% of the cost to the obligor) for health insurance purchased for the child(ren) by the obligor. If the obligor fails to purchase the insurance, the monthly child support obligation will increase by this amount, without further order of the court, until the obligor purchases the insurance and provides proof of the purchase to the other parent and to the Child Support Enforcement Division (CSED) if CSED is handling collections.

an extra \$ \_\_\_\_\_ per month (50% of the cost to the obligee) for health insurance purchased for the child(ren) by the obligee. If the obligee fails to purchase the insurance, the monthly child support obligation will decrease by this amount, without further order of the court, until the obligee purchases the insurance and provides proof of the purchase to the other parent and to the Child Support Enforcement Division (CSED) if CSED is handling collections.

If the cost of the insurance changes, the amount of the child support obligation will be adjusted accordingly, without further order of the court. The parent purchasing the insurance shall provide documentation of the change to the other parent and to the Child Support Enforcement Division (CSED) if CSED is handling collections. If either parent believes the cost of the insurance has become unreasonable, that parent may file a motion asking the court to suspend the requirement that insurance be purchased.

The children are eligible for services through  the Indian Health Service  military medical benefits but these services are not available in the area where the children live. Therefore, insurance must be purchased as stated above until these services become available.

The children are eligible for services through  the Indian Health Service  military medical benefits and these services are available to the children. Therefore, no additional insurance is required while these services are available.

Health insurance for the child(ren) is not now available at reasonable cost or its availability is unknown.

- b. Future Coverage. If there is no health care coverage for the child(ren) and insurance becomes available to a parent at a reasonable cost, that parent must purchase the insurance after giving notice to the other parent. The cost of the insurance must be divided between the parents equally unless a different division of the cost is ordered. Without further order of the court, the monthly child support obligation will increase by 50% of the cost of the insurance if the obligee purchases it and decrease by 50% of the cost of the insurance if the obligor purchases it, unless otherwise ordered. If the parents disagree about whether the cost of insurance is reasonable or about which insurance policy should be purchased, either parent may file a motion asking the court to resolve the dispute.
- c. Information for Other Parent. The parent purchasing the insurance must notify the insurance company that the other parent can apply for benefits on behalf of the child(ren) and should be reimbursed directly. The purchaser must also provide coverage information to the other parent and all forms and instructions necessary to apply for benefits.

7. **Uncovered Health Care Expenses (including medical, dental, vision and mental health counseling expenses). Civil Rule 90.3 (d)(2) and (f)(4).**

The cost of the child(ren)'s reasonable health care expenses not covered by insurance must be paid as follows, unless the expenses exceed \$5,000 in a calendar year:

- Obligor will pay half and obligee will pay half.
- Obligor will pay \_\_\_\_\_ and obligee will pay \_\_\_\_\_ because \_\_\_\_\_

A party shall reimburse the other party for his or her share of the uncovered expenses within 30 days after receiving the health care bill, proof of payment and, if applicable, a health insurance statement showing what part of the cost is uncovered. The bill and other materials should be sent within a reasonable time.

If the uncovered expenses exceed \$5,000 in a calendar year, the expenses must be allocated based on the parties' relative financial circumstances when the expenses occur.

8. **Travel Expenses. Civil Rule 90.3 (g)**

Travel expenses which are necessary to exercise visitation will be allocated between the parties as follows: \_\_\_\_\_

9. **INCOME WITHHOLDING ORDER.** Unless one of the following boxes is checked (or CSED later authorizes an exemption for one of these reasons), the obligor, any employer of the obligor and any person, political subdivision, department of the State, or other entity possessing property of the obligor, including any corporation created by the Alaska Native Claims Settlement Act, shall immediately withhold from the obligor's income and any other money due the obligor the amount of child support due pursuant to AS 25.27.062 and shall pay this amount to the Child Support Enforcement Division.

The parties have agreed on the alternative arrangement described in the attached document signed by both parties.

The court finds good cause not to require immediate income withholding because it would not be in the best interests of the child(ren) for the following reason:

---

The obligor is receiving social security or other disability compensation that includes regular payments to the child(ren) at least equal to the support owed each month. To the extent these payments to the child(ren) do not satisfy the monthly amount owed, the remaining amount due shall be withheld from the obligor's income pursuant to AS 25.27.062.

Even if one of the above boxes is checked, exempting the obligor from immediate income withholding, such withholding may be initiated under AS 25.27.062(c) through the court or through CSED.

10. **CSED Services.** All child support payments must be made to the Child Support Enforcement Division (CSED) if one of the parties applies for the services of CSED. In addition, if the above income withholding order is served on the obligor's employer or anyone holding money belonging to the obligor, the money withheld pursuant to the order must be paid to CSED.

An application for CSED services has been made.

No application for CSED services has been made at the time of this order.

When payments are made through CSED:

a. Payments must include the **case number** and names of both parties and must be made payable to the **CHILD SUPPORT ENFORCEMENT DIVISION, PO Box 102760, Anchorage, Alaska 99510-2760**. CSED shall disburse the payments as required by law after deducting any fee required by law.

b. CSED shall maintain a record of support payments.

c. Interest will be imposed in accordance with AS 25.27.020 on payments which are 10 or more days overdue or if payment is made by a check backed by insufficient funds. No interest will be charged, except on arrearages more than 30 days past due, if payments are made under an income withholding order.

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In addition, the obligor has agreed to keep the obligee (or CSED if CSED is enforcing the order) informed of the obligor's current employer and the availability of employment-related health insurance coverage for the children until the support order is satisfied.

- d. The parties shall notify CSED, in writing, of any change in their mailing or residence addresses within 5 days after any such change.
  - e. The obligor shall keep CSED informed of the name and address of his or her current employer. Whenever employment changes, the obligor must notify CSED in writing within 20 days. This employment information must be given to the obligee instead of CSED if CSED is not enforcing the order.
  - f. The party ordered to provide insurance shall provide to CSED proof of medical insurance coverage for the children within 20 days of this order. If insurance becomes unavailable, that party shall notify CSED within 20 days. When insurance again becomes available, that party must, within 20 days, give CSED proof that the children are insured. The above proof and notice of insurance must be given to the other party instead of CSED if CSED is not enforcing the order.
  - g. If a party applies for CSED services:
    - (1) CSED shall take whatever enforcement action is deemed legally proper, including recommending contempt proceedings against the party ordered to pay support. **Failure to pay support as ordered may result in execution against the property of the obligor or arrest of the obligor.**
    - (2) Either party may ask CSED to review the amount of child support if it has been at least 12 months since the support order was last reviewed or modified. CSED may require that the request be made in writing on a form specified by CSED. The parties shall provide income information requested by CSED in connection with a review of the amount of child support within 20 days after the date the request is mailed.
    - (3) CSED may issue a withholding order, pursuant to AS 25.27.062 or AS 25.27.250, to attach funds owed to the obligor by any corporation created by the Alaska Native Claims Settlement Act (ANCSA). Upon service of such an order, the obligor's dividends, distributions and/or other periodic monetary benefits of ANCSA stock shall be transferred to the child support obligee pursuant to the terms of the withholding order. The ANCSA corporation shall pay the funds so transferred to CSED for distribution to the child support obligee.
11. Effect of Assignment of Right to Child Support to State. This order does not bind the Child Support Enforcement Division of Alaska or of any other state to the child support herein ordered if the person receiving child support is receiving or has currently applied for welfare benefits and assigns his or her rights to child support to the state. AS 25.27.120 - .130. If child support rights are assigned to the state, any alternative arrangement for immediate income withholding will not be allowed unless approved by CSED.

12. Additional Information. The parties are hereby notified that:

- a. Payment of support must be made as ordered herein, and the giving of gifts, clothing, or other in-kind payments will not fulfill the obligation.
- b. Payment of support must be made as it becomes due, and failure to secure or denial of rights of visitation is not an excuse for nonpayment, but the aggrieved party must seek relief from the court as otherwise provided by law.
- c. The payment of support takes priority over payment of debts and other obligations.
- d. A party who marries or otherwise accepts additional obligations of support does so with the full knowledge of prior obligations under this proceeding and will be given no consideration for those additional obligations in subsequent proceedings for alleged failure to make the payments as ordered herein.
- e. It is the responsibility of a person with seasonal employment to budget income so that payments are made regularly throughout the year as ordered.

Recommended for approval on

\_\_\_\_\_

Date

\_\_\_\_\_

Superior Court Master

\_\_\_\_\_

Superior Court Judge

\_\_\_\_\_

Date

\_\_\_\_\_

Type or Print Judge's Name

I certify that on \_\_\_\_\_  
a copy of this order was sent to:  
CSED\*\*  
Administrative Director of the Court System (if 5.a. is no)  
Employer of \_\_\_\_\_ (with DR-330 Notice)\*\*\*  
Both Parties:  
Attorneys:  
Clerk: \_\_\_\_\_

\*\* Also send CSED (1) any application for CSED services and (2) a copy of the dissolution petition and amendments or the child support guidelines affidavit (DR-305).

\*\*\* A copy of the order and the DR-330 Notice to Employer Re: Children's Medical Insurance must be sent to the employer of the party ordered to purchase insurance for the children if that party is eligible for family health care coverage through his/her employer. AS 25.27.063(b).

Alaska Department of Revenue  
**Child Support Enforcement Division**

Please Reply To:  
CSED, MS «MAILSTOP»

550 W. 7<sup>TH</sup> Ave., Suite 310  
Anchorage, AK 99501-6699  
www.csed.state.ak.us

March 23, 2000

«APFULLNAME»  
«APADDR1»  
«APADDR2»  
«APADDR3»  
«APADDR4»

Re: Case-ID.: «CASEID»

**EXPLANATION OF THE CHILD SUPPORT  
AND MEDICAL SUPPORT ORDER**

(Alaska Statute 25.27.160 and Alaska Administrative Code 15:125.100, 15:125.105)

Enclosed is an Administrative Child Support and Medical Support Order on behalf of the children listed on the order. This order began because a parent or custodian applied for CSED's services or the children are participants in state assistance programs such as a Public Assistance or Medicaid grant or they are in state custody.

The following information explains the Child Support and Medical Support Order. If you have any questions concerning your order, you can contact us at the above address or by calling your caseworker «CWKNAME» at (907) 269-«CWPHONE». **REMEMBER, failure to respond to this order will result in the order becoming a legal and binding order by default. You must request an Administrative Review within 30 days of receiving this order if the enclosed order does not reflect your financial circumstances.**

The child support order has several parts. The first part includes the amount of child support due each month. This is your actual monthly support obligation. The order also includes arrears, interest, and a provision requiring health care coverage. The arrears, interest, fees, or judgements that you owe is separate from the monthly ongoing amount and could result in an actual monthly payment higher than the ongoing amount. The order also explains how we determined your income for child support purposes.

**WHAT ARE YOUR OPTIONS IN THIS ACTION?**

- If you agree with the amounts stated in the order, you do not need to ask for an administrative review.

CSED Form 04-1697-N (Rev 02/23/00)

TTY: (907)269-6894 / TOLL FREE AK: (800)370-6894  
ANCHORAGE OFFICE: PHONE: (907)269-6900  
FAX: (907)269-6650

TOLL FREE AK: (800)478-3300  
JUNEAU: (907)465-5887 KENAI (907)283-2900  
FAIRBANKS: (907)451-2830 WASILLA: (907)357-3550

- If you **disagree** with the amounts of the order, please complete and return the enclosed Request for Administrative Review form. **Your request must be postmarked within 30 days from the date you receive this notice.**

You must provide in writing the reasons you dispute the dollar amounts shown in the order and you must provide documentation to support your claims when you send your Request for Administrative Review to us. You must send the following documents:

- Completed Child Support Guidelines Affidavit(s) (CSED Form 1901) and supporting documentation for each year in question.
- Current pay stubs, or payroll advice, or leave and earnings statements or other employer provided documentation showing wage and income information.
- Copies of signed tax returns - with all applicable schedules attached.
- **Documentation and verification of medical coverage for the children.**
- If self-employed, your tax records and tax returns reflecting your business income and expenses.
- Documentation concerning any periodic benefits you receive (including worker's compensation, unemployment compensation, Social Security benefits that include Children's Insurance Benefits, veteran's benefits, corporate and investment interest or dividends, insurance benefits, and any in-kind compensation or monetary benefits paid by any organization).
- Verification of union dues, if paid.
- Verification of retirement account contributions.
- Any other information you want us to consider.

If you cannot provide the information within 30 days, contact your caseworker immediately to discuss an extension of time.

### HOW DID WE CALCULATE CHILD SUPPORT?

We calculated your support amounts based on either: 1) actual income information available to us, or 2) information we had on your current or past type of employment or job. If we did not have your actual income we referred to the Occupational Employment Statistical Index to determine a dollar amount based on the average wages earned by others in your current or previous occupation, or 3) we used the dollar amounts found in the Alaska Average Wage Index for your age and gender because we did not have any information on your past employment or occupation. Please refer to the attached "Child Support Guidelines Worksheet" (CSED Form 1905) to see how we calculated your child support for each chargeable year.

### **HOW MUCH IS YOUR TOTAL MONTHLY CHILD SUPPORT PAYMENT?**

Your total monthly payment is determined by adding the following: 1) your ongoing support obligation (paragraph I.A. of the order), 2) a percentage of the arrears that you owe (paragraph I.B.), 3) monthly interest accumulation on arrears (paragraph I.C.), and 4) fees that you may owe (paragraph I.D.). Interest accrues after child support goes unpaid, so that is why we do not state the interest amount in the order.

### **DOES THIS ACTION AFFECT YOUR CREDIT RATING?**

Yes, it could if you owe arrears. CSED is required to report child support arrears to consumer reporting agencies such as credit bureaus and lending institutions. If you presently owe past child support or if you do not pay support in the future, we will report your name and payment information to consumer reporting agencies. Once an initial report is made to a consumer reporting agency, we will report changes in status or the amount of arrears. (Alaska Statute 25.27.273, Alaska Administrative Code 15:125.418)

**You are required to notify us, as soon as possible, whenever your address, job, or health insurance coverage changes.**

Sincerely,

Gary Darby  
Child Support Enforcement Officer II

FILE: EST/MODS

Alaska Department of Revenue  
**Child Support Enforcement Division**

Please Reply To:  
CSED, MS «MAILSTOP»  
550 W. 7<sup>TH</sup> Ave., Suite 310  
Anchorage, AK 99501-6699  
www.csed.state.ak.us

**In the Matter of:**  
«APFULLNAME»  
«APADDR1»  
«APADDR2»  
«APADDR3»  
«APADDR4»

March 23, 2000

Case-ID: «CASEID»  
Custodian: «CPFULLNAME»  
Child(ren):

|               |          |               |          |
|---------------|----------|---------------|----------|
| «DE1FULLNAME» | «DE1DOB» | «DE2FULLNAME» | «DE2DOB» |
| «DE3FULLNAME» | «DE3DOB» | «DE4FULLNAME» | «DE4DOB» |
| «DE5FULLNAME» | «DE5DOB» | «DE6FULLNAME» | «DE6DOB» |
| «DE7FULLNAME» | «DE7DOB» | «DE8FULLNAME» | «DE8DOB» |

**ADMINISTRATIVE CHILD SUPPORT  
AND MEDICAL SUPPORT ORDER**

(Alaska Statute 25.27.160 and Alaska Administrative Code 15:125.100)

In the matter of «APFULLNAME» who is the payor, and «CPFULLNAME» who is the payee in this order, the Child Support Enforcement Division (CSED) determined that «APFULLNAME» owes a financial duty of support and is ordered to pay child support. All references to "you" or "your" in this order refer to «APFULLNAME» who is the payor.

Either party has a right to challenge this order by requesting an administrative review. You must make the request in writing and send it certified mail, return receipt requested. The request for a review must be postmarked within 30 days from the date you received this notice.

If you do not request an administrative review in writing within 30 days after you were served the order, this order automatically becomes effective 30 days after service of this notice. (Alaska Statute 25.27.160 (b) (4))

**I. FINANCIAL OBLIGATION.** You are hereby ordered to provide financial support for the children listed above according to the following:

A.  **MONTHLY CHILD SUPPORT.** Your ongoing child support amount of \$«ONGOING» is due on «PAYDUEDATE» and will charge on the first of each month thereafter.

CSED Form 04-1902 (Rev 02/23/00)

TTY: (907)269-6894 / TOLL FREE AK: (800)370-6894  
ANCHORAGE OFFICE: PHONE: (907)269-6900  
FAX: (907)269-6650

TOLL FREE AK: (800)478-3300  
JUNEAU: (907)465-5687 KENAI: (907)283-2900  
FAIRBANKS: (907)451-2830 WASILLA: (907)357-3550

Your monthly support obligation is set by court order \_\_\_\_\_ with an effective date of \_\_\_\_\_. However, there are arrears owed either to the State of Alaska or to the custodian for child support due before the effective date of the court order. We will collect these arrears per the amount stated below in paragraph B.

|   |   |
|---|---|
| \$«ONECHILD» for one child per month        | \$«TWOCHILD» for two children per month   |
| \$«THREECHILD» for three children per month | \$«FOURCHILD» for four children per month |
| \$«FIVECHILD» for five children per month   | \$«SIXCHILD» for six children per month   |
| \$«SEVENCHILD» for seven children per month | \$«M_8CHILD» for eight children per month |

If you have more than one child on this order and support is no longer required (such as when a child emancipates, or reaches the age of majority), CSED will set the child support amount to the next lower level for the number of children remaining on the order.

**WARNING: If you owe arrears, your total monthly payment may be more than the above ongoing amount.**

B. **ARREARS.** You owe total past-due child support of \$«ARREARS» for the periods: «DATEARREARS». This amount is due on «PAYDUEDATE».

If you do not pay the total arrears amount on the first due date, we will withhold an additional amount from your paycheck and use other collection methods such as attachment of any refund you have coming to you from IRS and your Permanent Fund Dividend in order to pay this debt.

The attached Child Support Guidelines Worksheet (CSED Form 1905) shows how we calculated your child support for each year.

The attached Summary of Support Obligation (CSED Form 1609) shows a detailed monthly listing of the dollar amounts that you owe for arrears.

C. **INTEREST.** Interest accrues on the unpaid arrears at the end of the month, at the legally prescribed rate.

D. **FEES.** CSED will assess you costs associated with genetic testing, process service, and attorney fees if applicable to your case.

**II. MEDICAL SUPPORT ORDER** (Alaska Statute 25.27.063, Alaska Statute 25.27.020, Alaska Statute 25.27.060, Alaska Administrative Code 15:125.085). In addition to the financial duty of support, you owe a medical duty of support for the children listed above.

- A. You are ordered:
1. To include the children named in this order on any health insurance policy available to you at a reasonable cost;
  2. To provide proof of insurance within 20 days of the date of the child support order. You need to send us a copy of the insurance form and an affidavit stating the form is filed with the insurance company. If you are not covered by insurance, but it is available to you, you must send documentation regarding the available coverage.
  3. To notify CSED in writing within 20 days after losing coverage or a change in employment resulting in a change in coverage.
- B. If you provide proof of insurance for the children, we will give you a credit against your child support obligation for half of the amount of the premium that you pay for the health insurance for the children.
- C. If the other parent buys the insurance for the children, we will bill you for half of the direct costs to cover the children named in this order.
- D. If the cost of the insurance changes, CSED will adjust the amount of the child support obligation accordingly, without further order of the agency. CSED will notify the case parties of any adjustment made to this part of the order. The parent purchasing the insurance shall provide documentation of the change to CSED.
- E. FUTURE COVERAGE. If health insurance for the children becomes available to either parent at reasonable cost and the children are not already covered by insurance or other health care coverage, that parent must purchase the insurance and notify CSED immediately.
1. The cost of the insurance is divided equally between the parties. Without further order of the agency, we will add half the cost of the custodial parent's health insurance premium to the monthly child support obligation of the non-custodial parent if the custodial parent pays the insurance premium. If the non-custodial parent pays for the cost of the insurance we will subtract 50% of the premium cost from the monthly support obligation.
  2. If both parents have health care coverage available and the rights of child support have not been assigned to the state, both parents will determine who will purchase the coverage for the children. However, if they disagree, they will inform the agency in writing. After receiving this information, the agency will require both parents to purchase coverage for the children and offset the cost to each parent and assess an increase or decrease in the monthly support obligation as appropriate.

3. If both parents have health care coverage available and the rights of child support has been assigned to the state, the agency will require the noncustodial parent to provide health care coverage for the children.

F. The parent purchasing the insurance must notify the insurance company that the other parent can apply for benefits on behalf of the children and should be reimbursed directly. The purchaser must also provide coverage information to the other parent and all forms and instructions necessary to apply for benefits.

G. UNCOVERED HEALTH CARE EXPENSES (Civil Rule 90.3 (d)(2))

1. Reasonable health care expenses not covered by insurance that are less than \$5,000 shall be paid equally by both parties unless good cause is shown.

2. A party shall reimburse the other party for his or her share of the uncovered expenses within 30 days after receiving the health care bill, proof of payment, and, if applicable, a health insurance statement showing what part of the cost is uncovered.

3. If the uncovered expense is over \$5,000 the expense is to be allocated based on the parties' relative financial circumstances when the expense occurs.

H. ACCORDING TO OUR INFORMATION:

The children are eligible for health care through  
 the Indian Health Service  military medical benefits but these services are not available in the area where the children live. Therefore, insurance must be purchased as stated above until these services become available.

The children are eligible for health care through  
 the Indian Health Service  military medical benefits and these services are available to the children. Therefore, no additional insurance is required while these services are available.

Health insurance for the children is not now available at reasonable cost or its availability is unknown.

III. **FINDINGS OF FACT.**

**A. INCOME DETERMINATION:**

- We considered your total income from all sources based on actual information.
- We do not have actual income or employment information for you. We therefore estimated your income using the calculation method listed on the bottom of the child support guidelines worksheet(s) (CSED form 1905).
- After considering relevant circumstances, including education, training, occupation, health, employment opportunities and the extent to which you are participating in looking for work, we find you are voluntarily unemployed or underemployed.

The attached Child Support Guidelines Worksheet(s) (CSED form 1905) are incorporated as part of these Findings of Fact. (The method of calculation is listed at the bottom of each worksheet.) We find that your monthly support obligation is based on: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- B.  We find that your monthly child support obligation is based on  primary,  shared, or  divided custody of the children. We based our custody finding on information provided.
- C.  We find the existence of good cause to vary your child support obligation under the provisions of Alaska Administrative Code 15: 125.070. (If checked, the caseworker will list the unusual circumstances from 15 AAC 125.075).
- D.  We find that you have available health insurance for the children at a monthly cost of \_\_\_\_\_. If you have not provided insurance information please re-read the medical support order portion of this document as you are required to provide medical support for the children.

IV. **POST MAJORITY SUPPORT**

Your child support obligation will continue until each child turns 18 years old unless the child is: (1) unmarried, and (2) actively pursuing a high school diploma or equivalent level of technical or vocational training, and (3) living as a dependent with the custodial parent or guardian or a designee of the parent or guardian, or if the children are in a state sponsored placement program. If these conditions are met, support is to continue until the child turns 19.

#### V. INCOME WITHHOLDING AND INTEREST (Alaska Statute 25.27.062)

- Federal Law requires immediate wage withholding. This serves as your notice that wage withholding will start without any further notice after the child support order is set.
- If you are employed, we will contact your employer to arrange for automatic withholding from your paychecks to cover your child support obligation once we set the order.
- **Property and income are subject to withholding by CSED without further action or hearing** (Alaska Statute 25.27.160 (b) (4) and Alaska Statute 25.27.230-270).
- We will charge interest on payments thirty (30) or more days overdue and checks not backed by sufficient funds (Alaska Statute 25.27.020, Alaska Statute 25.27.025).
- If you are a member of an Alaska Native Corporation as defined under the Alaska Native Claims Settlement Act, CSED will attach any dividends that you receive from your Native corporation to satisfy past child support due to the custodial parent.

VI. If the children receive temporary public assistance or enter foster care, the state becomes the payee and collections are kept by the state without modification to this order. You will be notified when this happens.

VII. **You are required to notify us, as soon as possible, whenever your address, employer or health insurance coverage changes.**

#### VIII. PAYMENTS THROUGH CSED

Payments are to be made by immediate wage withholding. There are certain circumstances in which non-wage withholding payments may be made. However, you must make all payments through CSED or as directed by CSED. **Do not make payments directly to the custodian after receipt of this notice and order.** The giving of gifts, clothing, or other items will not fulfill your child support obligation.

If you are unemployed or we cannot do wage withholding through your employer, you may make payments by mail, electronic funds transfer or in person to CSED. We accept money orders, bank drafts, cashiers checks, and personal checks. Please make checks payable to CSED. **DO NOT send cash by mail.** Include your case number, your name, and the name of the child's custodian on payments or correspondence.

Page 7 of 7  
«APFULLNAME»  
«CASEID»  
March 23, 2000  
CSED 04-1902 (Rev. 02/23/00)

Please refer to the enclosed "Explanation of the Child Support and Medical Support Order" letter for an explanation of the terms and provisions of this order.

This order serves as the notice and finding of financial responsibility required under Alaska Statute 25.27.160.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ in Anchorage, Alaska.

\_\_\_\_\_  
«CWKNAME», Child Support Enforcement Officer  
Phone: (907) 269-«CWPHONE»  
In-State Toll Free at (800)478-3300 extension «CWPHONE»

Enclosures:

CSED Form 04-1697N Explanation Letter  
CSED Form 04-1905, Child Support Guidelines Worksheet  
CSED Form 04-1609, Summary of Support Obligation  
CSED Form 04-1918, Request for Administrative Review  
Order to Withhold Amortization Chart  
FILE: Orders Sections

Alaska Department of Revenue  
**Child Support Enforcement Division**

Please Reply To:  
CSED, MS «MAILSTOP»

550 W. 7<sup>TH</sup> Ave., Suite 310  
Anchorage, AK 99501-6699  
www.csed.state.ak.us

**In the Matter of:**

«APFULLNAME»  
«APADDR1»  
«APADDR2»  
«APADDR3»  
«APADDR4»

March 23, 2000

Case-ID.: «CASEID»  
Custodian: «CPFULLNAME»  
Child(ren):

|               |          |               |          |
|---------------|----------|---------------|----------|
| «DE1FULLNAME» | «DE1DOB» | «DE2FULLNAME» | «DE2DOB» |
| «DE3FULLNAME» | «DE3DOB» | «DE4FULLNAME» | «DE4DOB» |
| «DE5FULLNAME» | «DE5DOB» | «DE6FULLNAME» | «DE6DOB» |
| «DE7FULLNAME» | «DE7DOB» | «DE8FULLNAME» | «DE8DOB» |

**REQUEST FOR ADMINISTRATIVE REVIEW**

(Alaska Administrative Code 15:125.118)

Based on the following reasons, I request a review of the Administrative Child Support and Medical Support Order served on me by CSED. I am attaching to this form my documents to support my request for a review.

A valid order already exists that covers the support obligation in question. (Please attach a copy of the order).

A duty of support is not owed because:

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I was in the home and supporting my child(ren) for the following time periods:

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CSED 04-1918 (Rev. 12/21/99)

TTY: (907)269-6894 / TOLL FREE AK: (800)370-6894

ANCHORAGE OFFICE: PHONE: (907)269-6900 JUNEAU: (907)465-5887 KENAI (907)283-2900

FAX: (907)269-6650

TOLL FREE AK: (800)478-3300

FAIRBANKS: (907)451-2830 WASILLA: (907)357-3550

The amount of support determined by CSED in its child support order is wrong because my financial circumstances are not as CSED determined.

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Other:

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Phone/message number is: \_\_\_\_\_ Best time to contact me is: \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

Send this form within 30 days after you were served with the order:

**Child Support Enforcement Division Mail Stop «MAILSTOP»  
550 West 7th Avenue Suite 310  
Anchorage, AK 99501-6699**

Please contact your caseworker immediately if you need more time to send in supporting paperwork for your review.

FILE: EST/MODS

FOR THE STATE OF ALASKA  
AT ANCHORAGE

«CPFULLNAME»

vs.

«APFULLNAME»

Case-ID: «CASEID»

CERTIFICATE OF SERVICE

I certify that CSED mailed a copy of: EXPLANATION OF THE CHILD SUPPORT AND MEDICAL SUPPORT ORDER, ADMINISTRATIVE CHILD SUPPORT AND MEDICAL SUPPORT ORDER and REQUEST FOR ADMINISTRATIVE REVIEW to «APFULLNAME» postage paid, Certified Restricted Delivery:

«APFULLNAME»

«APADDR1»

«APADDR2»

«APADDR3»

«APADDR4»

Dated the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

«CWKNAME»

Child Support Enforcement Representative

SENATE FINANCE COMMITTEE

SIGN-IN

~~SB 207~~-MEDICAL SUPPORT ORDERS FOR CHILDREN

NAME: SHIRLEY DEAN Subject/Bill No: SB207  
Co./Dept./Title: CSEA Phone: 465-5182  
Address: 410 Willoughby Zip: 99801  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: Jon Sherwood Subject/Bill No: SB207  
Co./Dept./Title: Div. Medical Assistance Phone: 465-5820  
Address: \_\_\_\_\_ Zip: 99811  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

**SB**

**212**

**HFIN**

**FILE**

(11)

HOUSE COMMITTEE REPORT

Date Referred to Committee: April 12, 2000

FURTHER REFERRALS:

Date of Committee Action: 4/18/00

The FINANCE Committee considered:

CSSB 212(FIN) am

CS FOR SENATE BILL NO. 212(FIN) am

FISH & GAME GRANTS

"An Act authorizing the commissioner of fish and game, with the concurrence of the Board of Fisheries or the Board of Game, to award grants for habitat restoration, access, or enhancement projects; and providing for an effective date."

recommends it be replaced with the following committee substitute HCSSB 212 (FIN) [ ] the same title [x] a new title

[ ] additional referral to \_\_\_\_\_ Committee [ ] attached amendment(s)

ADOPTS: \_\_\_\_\_ Letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept)

APPROVES PREVIOUS: (Dept/Date)

[ ] fiscal note(s) \_\_\_\_\_

[ ] fiscal note(s) \_\_\_\_\_

[ ] zero fiscal note(s) \_\_\_\_\_

[x] zero fiscal note(s) F:9 '21/00

Table with 5 columns: SIGNING WITH RECOMMENDATIONS, DP, DNP, NR, AM. Rows include signatures like Car Bunde, Austinman, J. DAVIS, G. DAVIS, Williams, Phillips, and Foster.

CHAIR'S SIGNATURE

Car Bunde

421110 d 1

# FISCAL NOTE

No. 1  
 Bill Version: SB212  
 (S) Publish Date: 1-21-00

STATE OF ALASKA  
 2000 LEGISLATIVE SESSION

Revision Date/Time (Note if correction) \_\_\_\_\_ Dept. Affected Fish and Game  
 Title Authority to issue grants BRU Habitat  
 Component Habitat  
 Sponsor Rules Committee  
 Requester Governor Component No. 486

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

| OPERATING EXPENDITURES | FY 2001    | FY 2002    | FY 2003    | FY 2004    | FY 2005    | FY 2006    |
|------------------------|------------|------------|------------|------------|------------|------------|
| Personal Services      |            |            |            |            |            |            |
| Travel                 |            |            |            |            |            |            |
| Contractual            |            |            |            |            |            |            |
| Supplies               |            |            |            |            |            |            |
| Equipment              |            |            |            |            |            |            |
| Land & Structures      |            |            |            |            |            |            |
| Grants & Claims        |            |            |            |            |            |            |
| Miscellaneous          |            |            |            |            |            |            |
| <b>TOTAL OPERATING</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

|                      |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|

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|------------------------|--|--|--|--|--|--|
| CHANGE IN REVENUES ( ) |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|

**FUND SOURCE** (Thousands of Dollars)

|                          |            |            |            |            |            |            |
|--------------------------|------------|------------|------------|------------|------------|------------|
| 1002 Federal Receipts    |            |            |            |            |            |            |
| 1003 GF Match            |            |            |            |            |            |            |
| 1004 GF                  |            |            |            |            |            |            |
| 1005 GF/Program Receipts |            |            |            |            |            |            |
| 1037 GF/Mental Health    |            |            |            |            |            |            |
| Other (Specify Type)     |            |            |            |            |            |            |
| <b>TOTAL</b>             | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

Estimate of any current year (FY2000) cost: 0.0

**POSITIONS**

|           |  |  |  |  |  |  |
|-----------|--|--|--|--|--|--|
| Full-time |  |  |  |  |  |  |
| Part-time |  |  |  |  |  |  |
| Temporary |  |  |  |  |  |  |

**ANALYSIS:** (Attach a separate page if necessary)

Prepared by: Ken Taylor Phone 465-6143  
 Division Habitat Date/Time 1/20/00 11:03 AM  
 Approved by Commissioner Frank Rue Date 01/20/2000  
 Agency Department of Fish and Game

**PREPARER TO PROVIDE ALL DISTRIBUTION COPIES TO GOVERNOR'S LEGISLATIVE OFFICE**

For further distribution information, call the Governor's Legislative Office

adopted  
JD moved an  
appropriate  
title change

CS FOR SENATE BILL NO. 212(FIN) am

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-FIRST LEGISLATURE - SECOND SESSION

BY THE SENATE FINANCE COMMITTEE

Amended: 4/10/00

Offered: 4/6/00

Sponsor(s): SENATE RULES COMMITTEE BY REQUEST OF THE GOVERNOR

A BILL

FOR AN ACT ENTITLED

1 "An Act authorizing the commissioner of fish and game, [with the concurrence of  
2 the Board of Fisheries or the Board of Game,] to award grants for habitat  
3 restoration, [access] or enhancement projects; and providing for an effective date."

deti

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

5 \* Section 1. AS 16.05 is amended by adding a new section to read:

6 Sec. 16.05.085. Grant authority. The commissioner may award grants from  
7 federal funds, other than funds received under the federal Pittman - Robertson and  
8 Dingell - Johnson/Wallop - Breaux programs, for habitat restoration, [access] or  
9 enhancement projects. [The award of a grant under this section is subject to  
10 concurrence by the Board of Fisheries or the Board of Game, whichever is appropriate.]

wmdyq w

11 The commissioner may adopt regulations to implement this section.

12 \* Sec. 2. This Act takes effect July 1, 2000.



TONY KNOWLES

Governor

2000-2001

STATE OF ALASKA

Office of the Governor

JUNEAU

January 20, 2000

SB 212

The Honorable Drue Pearce  
President of the Senate  
Alaska State Legislature  
State Capitol  
Juneau, AK 99801-1182

Dear President Pearce:

To continue our efforts to protect and enhance Alaska's natural resources, I am transmitting this bill authorizing the commissioner of the Department of Fish and Game to award grants for certain resource activities.

Under this bill, the commissioner would have express authority to directly award grants that serve core missions of the department – protecting, maintaining, and improving public access to fish, game, and habitat resources of Alaska. Current law necessitates the department to channel money through other agencies which causes delay and adds considerable administrative cost.

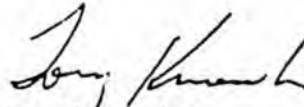
An increasing amount of federal funding is available to restore fish habitat and passage. We have many opportunities to use these funds, particularly in the more developed areas of the state. Many of these opportunities are found on private land on some of Alaska's most productive fish streams, such as the Kenai River.

Since the inception of the Kenai River 50/50 Cost Share project in 1995, the department has approved 160 projects to rehabilitate some 9,600 feet of riverbank and protect more than 15,700 feet of the Kenai River. But more money could have been directly targeted to these projects if we did not have to pay the U.S. Fish and Wildlife Service its 11 percent administrative cost for channeling these funds to the state. Direct grant authority for the department will eliminate the need to use the federal agency in this way.

The Honorable Drue Pearce  
January 20, 2000  
Page 2

This legislation represents a cost-effective way to continue efforts on private and public land to rehabilitate riverbanks, protect fish streams and enhance access to these areas. I urge your prompt and favorable action on this measure.

Sincerely,

A handwritten signature in black ink, appearing to read "Tony Knowles". The signature is fluid and cursive, with a large initial "T" and a long, sweeping underline.

Tony Knowles  
Governor

**SB**

**212**

**SFIN**

**FILE**

# SENATE FINANCE COMMITTEE REPORT

DATE: 3/23/00

REPORTED OUT OF  
SFC 4/6/00

FURTHER:

DATE TURNED  
IN TO OFFICE: 6 April 00

Finance Committee considered

SENATE BILL NO. 212

"An Act authorizing the commissioner of fish and game to award grants for certain resource activities; and providing for an effective date."

and recommends:

- be replaced with \_\_\_\_\_ CS SB 212 (FIN)
- adopt previous \_\_\_\_\_ C CS \_\_\_\_\_ (\_\_\_\_\_)
- attached amendment(s) forth coming
- adopt Letter of Intent by \_\_\_\_\_ Committee
- further referral to the \_\_\_\_\_ Committee

- Senate Bill:
- same title
  - new title
- House Bill:
- same title
  - technical title
  - new: SCR# \_\_\_\_\_

| SIGNING DO PASS                | DP | OTHER RECOMMENDATIONS | NR | DNP | AM |
|--------------------------------|----|-----------------------|----|-----|----|
| <i>John E. Kelly</i>           | ✓  | <i>Lyle Green</i>     | ✓  |     |    |
| <i>Ad. Colangelo</i>           | ✓  | <i>John Donley</i>    | ✓  |     |    |
| <i>Loren D. Senon</i>          | ✓  |                       |    |     |    |
| <i>Greg Whelan</i>             | ✓  |                       |    |     |    |
| <i>Pat Kelly</i>               | ✓  |                       |    |     |    |
| Co-Chair: <i>John Senon</i>    | ✓  | Co-Chair:             |    |     |    |
| Co-Chair: <i>Heath Parnell</i> |    | Co-Chair:             |    |     |    |

**NEW FISCAL NOTE(S):**

Department      Date      Zero      Fiscal

|             |        |   |  |
|-------------|--------|---|--|
| Fish & Game | 4/2/00 | ✓ |  |
|             |        |   |  |
|             |        |   |  |
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|             |        |   |  |
|             |        |   |  |

**PREVIOUS FISCAL NOTE(S):\***

Department      Date      Zero      Fiscal

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APPROPRIATION -- no fiscal note

\*include fiscal notes accompanying Governor's bill

REPORTED OUT OF  
SFC 4/6/00

# FISCAL NOTE

No. 1  
Bill Version: SB212  
(S) Publish Date: 1-21-00

STATE OF ALASKA  
2000 LEGISLATIVE SESSION

Revision Date/Time (Note if correction) \_\_\_\_\_ Dept. Affected Fish and Game  
Title Authority to issue grants BRU Habitat  
Component Habitat  
Sponsor Rules Committee  
Requester Governor Component No. 486

## Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

| OPERATING EXPENDITURES | FY 2001    | FY 2002    | FY 2003    | FY 2004    | FY 2005    | FY 2006    |
|------------------------|------------|------------|------------|------------|------------|------------|
| Personal Services      |            |            |            |            |            |            |
| Travel                 |            |            |            |            |            |            |
| Contractual            |            |            |            |            |            |            |
| Supplies               |            |            |            |            |            |            |
| Equipment              |            |            |            |            |            |            |
| Land & Structures      |            |            |            |            |            |            |
| Grants & Claims        |            |            |            |            |            |            |
| Miscellaneous          |            |            |            |            |            |            |
| <b>TOTAL OPERATING</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

|                      |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|

|                        |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|
| CHANGE IN REVENUES ( ) |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|

## FUND SOURCE (Thousands of Dollars)

|                          |            |            |            |            |            |            |
|--------------------------|------------|------------|------------|------------|------------|------------|
| 1002 Federal Receipts    |            |            |            |            |            |            |
| 1003 GF Match            |            |            |            |            |            |            |
| 1004 GF                  |            |            |            |            |            |            |
| 1005 GF/Program Receipts |            |            |            |            |            |            |
| 1037 GF/Mental Health    |            |            |            |            |            |            |
| Other (Specify Type)     |            |            |            |            |            |            |
| <b>TOTAL</b>             | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

Estimate of any current year (FY2000) cost: 0.0

## POSITIONS

|           |  |  |  |  |  |  |
|-----------|--|--|--|--|--|--|
| Full-time |  |  |  |  |  |  |
| Part-time |  |  |  |  |  |  |
| Temporary |  |  |  |  |  |  |

ANALYSIS: (Attach a separate page if necessary)

Prepared by: Ken Taylor  
Division: Habitat  
Approved by: Commissioner Frank Rue  
Agency: Department of Fish and Game

Phone: 465-6143  
Date/Time: 1/20/00 11:03 AM  
Date: 01/20/2000

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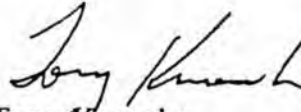
For further distribution information, call the Governor's Legislative Office



The Honorable Drue Pearce  
January 20, 2000  
Page 2

This legislation represents a cost-effective way to continue efforts on private and public land to rehabilitate riverbanks, protect fish streams and enhance access to these areas. I urge your prompt and favorable action on this measure.

Sincerely,

A handwritten signature in cursive script, appearing to read "Tony Knowles".

Tony Knowles  
Governor

SENATE FINANCE  
COMMITTEE

Amendment Number: #1

Bill Number: SB 212

Sponsor: Leman Date: 3/28/00

Logged In By: Jamie

AMENDMENT

OFFERED IN SENATE FINANCE COMMITTEE

BY: Senator Leman

TO: CS SB 212(RES)

Page 1, Line 13:

DELETE:  
[OR INTERPRET]



**ALASKA OUTDOOR COUNCIL, INC.**

P.O. Box 73902  
FAIRBANKS, AK 99707  
(907) 455-4262 *pk. & fax*

SENATOR JOHN TORGERSON, Co-CHAIR  
SENATE FINANCE COMMITTEE  
ALASKA LEGISLATURE  
-BY FAX-

DEAR SENATOR TORGERSON:

THE ALASKA OUTDOOR COUNCIL SUPPORTS  
SB 212 (VERSION I, RESOURCES COMMITTEE'S).

THE COUNCIL SEES THIS BILL AS VERY  
HELPFUL IN FACILITATING USE OF FEDERAL FUNDS  
FOR IMPORTANT HABITAT-RELATED PROJECTS  
UNDER THE SUPERVISION OF ADF&G'S  
HABITAT DIVISION.

PLEASE PASS THIS BILL. THANK YOU  
FOR YOUR CONSIDERATION.

SINCERELY,

Dick Bishop, Vice President

DICK BISHOP, VICE PRESIDENT

cc: SEN. P. KELLY  
SEN WILKEN

SENATE FINANCE COMMITTEE

SIGN-IN

SB 212-FISH & GAME GRANTS

NAME: Ken Taylor Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: Director H+R, ADF+G Phone: 3065  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

SENATE FINANCE COMMITTEE

SIGN-IN

SB 212-FISH & GAME GRANTS

NAME: Ken Taylor Subject/Bill No: SB 212  
Co./Dept./Title: ADF&G Habitat Div. Director Phone: 465-4105  
Address: Tampa Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you wish to testify?  Yes  No  Respond To Questions

**SB**

**220**

**SFIN**

**FILE**

# SENATE FINANCE COMMITTEE REPORT

DATE: 2/11/00

REPORTED OUT OF  
SFC 4/13/00

FURTHER:

DATE TURNED  
IN TO OFFICE: 4/13/00

Finance Committee considered

SENATE BILL NO. 220

"An Act clarifying the requirements for limited liability companies and partnerships to qualify for the Alaska bidder's and disability preferences under the State Procurement Code; and providing for an effective date."

and recommends:

- be replaced with \_\_\_\_\_ CS SB 220 (Fin)
- adopt previous \_\_\_\_\_ C Forthcoming \_\_\_\_\_
- attached amendment(s) CS
- adopt Letter of Intent by \_\_\_\_\_
- further referral to the \_\_\_\_\_ Committee

- Senate Bill:
- same title
- new title
- House Bill:
- same title
- technical title
- new: SCR# \_\_\_\_\_

| SIGNING DO PASS              | DP | OTHER RECOMMENDATIONS | NR | DNP | AM |
|------------------------------|----|-----------------------|----|-----|----|
| <i>[Signature]</i>           | ✓  |                       |    |     |    |
| <i>[Signature]</i>           | ✓  |                       |    |     |    |
| <i>[Signature]</i>           | X  |                       |    |     |    |
| <i>[Signature]</i>           | ✓  |                       |    |     |    |
| <i>[Signature]</i>           | ✓  |                       |    |     |    |
| Co-Chair: <i>[Signature]</i> | ✓  | Co-Chair:             |    |     |    |
| Co-Chair: <i>[Signature]</i> | ✓  | Co-Chair:             |    |     |    |

**NEW FISCAL NOTE(S):**

| Department | Date | Zero | Fiscal |
|------------|------|------|--------|
|            |      |      |        |
|            |      |      |        |
|            |      |      |        |
|            |      |      |        |
|            |      |      |        |
|            |      |      |        |

**PREVIOUS FISCAL NOTE(S):\***

| Department | Date            | Zero | Fiscal |
|------------|-----------------|------|--------|
| <i>All</i> | <i>11/30/99</i> | ✓    |        |
|            |                 |      |        |
|            |                 |      |        |
|            |                 |      |        |
|            |                 |      |        |
|            |                 |      |        |

APPROPRIATION -- no fiscal note

\*include fiscal notes accompanying Governor's bill

# FISCAL NOTE

STATE OF ALASKA  
2000 LEGISLATIVE SESSION

REPORTED OUT OF  
SFC 4/13/00

No. 1  
Bill Version: SB 220  
(S) Publish Date: 1-24-00

Revision Date/Time (Note if Correction): \_\_\_\_\_  
Title: LLC/LLP's qualifying for Alaska Bidder Preference and Disability Preference  
Sponsor: Rules Committee  
Requestor: Governor

Department Affected: All  
BRU: Centralized Administrative Services  
Component: Purchasing

COMPONENT SERIAL NO. 60

Expenditures/Revenues: (Thousands of Dollars)  
Note: Amounts do not include inflation unless otherwise noted below

| OPERATING EXPENDITURES | FY 2001    | FY 2002    | FY2003     | FY 2004    | FY 2005    | FY 2006    |
|------------------------|------------|------------|------------|------------|------------|------------|
| PERSONAL SERVICES      |            |            |            |            |            |            |
| TRAVEL                 |            |            |            |            |            |            |
| CONTRACTUAL            |            |            |            |            |            |            |
| SUPPLIES               |            |            |            |            |            |            |
| EQUIPMENT              |            |            |            |            |            |            |
| LAND & STRUCTURES      |            |            |            |            |            |            |
| GRANTS, CLAIMS         |            |            |            |            |            |            |
| MISCELLANEOUS          |            |            |            |            |            |            |
| <b>TOTAL OPERATING</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

|                      |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|

|                        |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|
| CHANGE IN REVENUES ( ) |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|

FUND SOURCE: (Thousands of Dollars)

|                          |            |            |            |            |            |            |
|--------------------------|------------|------------|------------|------------|------------|------------|
| 1002 Federal Receipts    |            |            |            |            |            |            |
| 1003 GF Match            |            |            |            |            |            |            |
| 1004 GF                  |            |            |            |            |            |            |
| 1005 GF/Program Receipts |            |            |            |            |            |            |
| 1037 GF/Mental Health    |            |            |            |            |            |            |
| OTHER (Specify Type)     |            |            |            |            |            |            |
| <b>TOTAL</b>             | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> | <b>0.0</b> |

Estimate of any current year (FY 2000) cost: \$ 0.0

**POSITIONS:**

|           |     |  |  |  |  |  |
|-----------|-----|--|--|--|--|--|
| FULL-TIME | N/A |  |  |  |  |  |
| PART-TIME | N/A |  |  |  |  |  |
| TEMPORARY | N/A |  |  |  |  |  |

**ANALYSIS:** (Attach a separate page if necessary.)

This bill would amend AS 36.30.170(b) and (e) to establish qualifications for application of the Alaska Bidder and Disability preferences to Limited Liability Companies and Limited Liability Partnerships bidding on State contracts.

There is no fiscal impact.

Prepared by: Marsha Hubbard, Director  
Division: General Services

Phone: 465-5687  
Date: 11/29/99

Approved by Commissioner: Robert Poe Jr.  
Agency: Department of Administration

Date: 11/30/99

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TONY KNOWLES  
GOVERNOR  
governor@gov.state.ak.us



STATE OF ALASKA  
OFFICE OF THE GOVERNOR  
JUNEAU

P.O. Box 110001  
Juneau, Alaska 99811-0001  
(907) 465-3500  
Fax (907) 465-3532  
www.gov.state.ak.us

January 21, 2000

SB 220

The Honorable Drue Pearce  
President of the Senate  
Alaska State Legislature  
State Capitol  
Juneau, AK 99801-1182

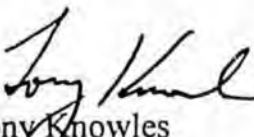
Dear President Pearce:

I am transmitting a bill clarifying the statutory requirements for limited liability companies and limited liability partnerships to qualify for the Alaska bidder's and disability preferences under the State Procurement Code.

Limited liability companies (LLCs) and limited liability partnerships (LLPs) were recently recognized in state law, well after the state procurement code established its Alaska bidder and disability preferences. Therefore, the procurement code preferences do not clearly prescribe qualification requirements for LLCs or LLPs.

By providing needed clarification and recognizing LLCs and LLPs under the state procurement code, this bill furthers the legislative objective of ensuring that Alaska businesses receive a preference while safeguarding application of the preferences to bonafide resident businesses.

Sincerely,

  
Tony Knowles  
Governor

SENATE FINANCE  
COMMITTEE  
Amendment Number: #1  
Bill Number: SB 220  
Sponsor: Torgerson Date: 3/31/00  
Logged In By: Jamie

A M E N D M E N T

OFFERED IN THE SENATE  
TO: SB 220

BY SENATOR TORGERSON

Page 2, line 5:

Delete "directors"  
Insert "members"

Page 2, line 22:

Delete "directors"  
Insert "members"

SENATE FINANCE  
COMMITTEE  
Amendment Number: #1-  
Bill Number: SB 220  
Sponsor: Torgerson Date: 3/31/00  
Logged In By: Jamie

AMENDMENT

OFFERED IN THE SENATE  
TO: SB 220

BY SENATOR TORGERSON

Page 2, line 5:  
Delete "directors"  
Insert "members"

Page 2, line 22:  
Delete "directors"  
Insert "members"

SENATE FINANCE COMMITTEE  
2000 COMMITTEE ACTION

|                                   |                    |
|-----------------------------------|--------------------|
| <b>Bill Number</b>                | JB 220             |
| <b>Amendment</b>                  | #1                 |
| <b>Motion</b>                     |                    |
| <b><u>Motion by</u></b>           | SP                 |
| <b>Objection</b>                  |                    |
| <b><u>Objection by</u></b>        |                    |
| <b>Removed</b>                    |                    |
| <b><u>Second Objection by</u></b> |                    |
| <b><u>Committee Member</u></b>    | <b><u>Vote</u></b> |
| Senator Dave Donley               |                    |
| Senator Loren Leman               |                    |
| Senator Al Adams                  |                    |
| Senator Gary Wilken               |                    |
| Senator Peie Kelly                |                    |
| Senator Lyda Green                |                    |
| Senator Randy Phillips            |                    |
| Co-Chair Sean Parnell             |                    |
| Co-Chair John Torgerson           |                    |
|                                   |                    |
| <b><u>Tally</u></b>               |                    |
| Yea                               | 0                  |
| Nay                               | 0                  |
| Absent                            | 0                  |
|                                   |                    |
| <b><u>MOTION</u></b>              | 16 887-            |

SENATE FINANCE  
COMMITTEE  
Amendment Number: #1  
Bill Number: SB 220  
Sponsor: Torgerson Date: 3/31/00  
Logged In By: Jamie

AMENDMENT

OFFERED IN THE SENATE  
TO: SB 220

BY SENATOR TORGERSON

Page 2, line 5:

Delete "directors"  
Insert "members"

Page 2, line 22:

Delete "directors"  
Insert "members"

## Sponsor Statement for SB 220

"An act clarifying the requirements for limited liability companies and partnerships to qualify for the Alaska bidder's and disability preferences under the State Procurement Code; and providing for an effective date."

Passage of SB 220 is necessary to clarify the Alaska bidder and disability preferences sections of the State procurement statutes regarding limited liability partnerships and limited liability corporations.

Our Procurement Code became effective in 1988, before the inception of limited liability corporations and limited liability partnerships, which were allowed to organize in 1995 and 1997 respectively. Therefore, the procurement preference sections in statute make no reference to them.

This bill inserts language that specifically mentions these types of businesses in the preference sections of the Procurement Code. It also stipulates that all managing directors of the limited liability corporation or partnership must be residents of Alaska to qualify for the Alaska bidder's preference. In order to qualify for a disability preference, each of the managing directors of the limited liability corporation or partnership must also have a disability.

This clarification is necessary for us to grant preferences to bonafide Alaskan businesses, and it furthers the legislative objectives of the Procurement Code by ensuring that Alaskan businesses receive an advantage in state procurements.

SENATE FINANCE COMMITTEE

SIGN-IN

SB 220-PROCUREMENT PREFS:PARTNERSHP/LTD LIAB CO

NAME: Vern Jones Subject/Bill No: SB220  
Co./Dept./Title: Admin Chief Procurement Officer Phone: 465-5684  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

SENATE FINANCE COMMITTEE

SIGN-IN

SB 220-PROCUREMENT PREFS:PARTNERSHP/LTD LIAB CO

NAME: Y. J. Usher Subject/Bill No: SB 220  
Co./Dept./Title: DEED Phone: 465-5451  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: Vern Jones Subject/Bill No: SB 220  
Co./Dept./Title: Chief Procurement Officer, DCIA Phone: 465-5684  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions

NAME: \_\_\_\_\_ Subject/Bill No: \_\_\_\_\_  
Co./Dept./Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Do you wish to testify?  Yes  No  Respond To Questions