

ALASKA LEGISLATURE COMMITTEE FILES 2007-2008 SL&C 12617

1 banking corporation, a branch of a foreign bank, a corporation organized under 12
2 U.S.C. 1861 - 1867 (Bank Service Company Act), or a corporation organized under 12
3 U.S.C. 611 - 633 (Edge Act) under the laws of a state or the United States, if it does
4 not issue, sell, or provide payment instruments or stored value through an authorized
5 delegate who is not a bank, a bank holding company, an office of an international
6 banking corporation, a branch of a foreign bank, a corporation organized under 12
7 U.S.C. 1861 - 1867 (Bank Service Company Act), or a corporation organized under 12
8 U.S.C. 611 - 633 (Edge Act) under the laws of a state or the United States;

9 (5) electronic funds transfer of governmental benefits for a federal,
10 state, or municipal agency or a state political subdivision by a contractor on behalf of

11 (A) the United States or a department, an agency, or an
12 instrumentality of the United States; or

13 (B) a state, or a department, an agency, or an instrumentality of
14 a state;

15 (6) a board of trade or a person who, in the ordinary course of
16 business, provides clearance and settlement services for a board of trade, to the extent
17 of the operation of the person for a board of trade; in this paragraph, "board of trade"
18 means a board of trade designated as a contract market under 7 U.S.C. 1 - 27f
19 (Commodity Exchange Act);

20 (7) a registered futures commission merchant under the federal
21 commodities laws, to the extent of the merchant's operation as a registered futures
22 commission merchant under the federal commodities laws;

23 (8) a person who provides clearance or settlement services under a
24 registration as a clearing agency or an exemption from the registration granted under
25 the federal securities laws, to the extent of the person's operation as a provider of
26 clearance or settlement services under a registration as a clearing agency or an
27 exemption from the registration granted under the federal securities laws;

28 (9) an operator of a payment system to the extent that the operator
29 provides processing, clearing, or settlement services, between or among persons
30 excluded by this section, in connection with wire transfers, credit card transactions,
31 debit card transactions, stored-value transactions, automated clearing house transfers,

1 or similar funds transfers; or

2 (10) a person registered as a securities broker-dealer under federal or
3 state securities laws, to the extent of the person's operation as a securities broker-
4 dealer under federal or state securities laws.

5 **Sec. 06.55.810. Notices required.** At each location where a licensee provides
6 money services under this chapter, the licensee shall display at all times in full view of
7 persons visiting the location a sign giving the department's address and the
8 department's telephone number for receiving calls regarding complaints and other
9 concerns about licensees and the money services provided by licensees.

10 **Sec. 06.55.820. Transmission.** Within 10 business days after receiving the
11 money or equivalent value for money transmission, unless otherwise ordered by the
12 customer or unless the licensee has reason to believe a crime has occurred, is
13 occurring, or may occur as a result of the money transmission, a licensee shall

14 (1) transmit after the deduction of fees the monetary equivalent of all
15 money or equivalent value received for the money transmission; or

16 (2) issue instructions making the money or its monetary equivalent
17 available to the person designated by the customer.

18 **Sec. 06.55.830. Receipt.** (a) A licensee who receives money or equivalent
19 value for a money transmission shall provide a receipt to the customer that clearly
20 states the amount of the money or the equivalent value presented by the customer for
21 the money transmission and the total fees charged by the licensee.

22 (b) If a licensee fixes, when the money transmission is initiated, the rate of
23 exchange for a money transmission to be paid in the currency of another government,
24 the receipt provided by (a) of this section must disclose the rate of exchange for the
25 transaction and any limit on the length of time that the payment will be made at that
26 fixed rate of exchange.

27 (c) If a licensee does not fix the rate of exchange for a money transmission to
28 be paid in the currency of another government, the receipt provided under (a) of this
29 section must disclose that the rate of exchange for the money transmission will be set
30 when the person designated by the customer to receive the money takes possession of
31 the money.

1 **Sec. 06.55.840. Refunds.** (a) Within 10 days after receiving a written request
2 for a refund, a licensee shall refund to a customer money equal to the money or
3 equivalent value received from the customer for a money transmission, unless

4 (1) before receiving the written request

5 (A) the money has been transmitted to the person designated by
6 the customer to receive the money transmission and the person has taken
7 possession of the money; in this section, "transmitted" means made available
8 to the person designated by the customer to receive the money, whether or not
9 the person designated by the customer has taken possession of the money; or

10 (B) instructions have been given making a monetary equivalent
11 available to the person designated by the customer to receive the money
12 transmission;

13 (2) the licensee has reason to believe that a crime has occurred, is
14 occurring, or may occur as a result of transmitting or refunding the money as
15 requested by the customer; or

16 (3) the licensee is otherwise prohibited by law from making a refund.

17 **Sec. 06.55.850. Establishment of fees and other charges.** (a) The department
18 shall adopt regulations that establish the amount and manner of payment of fees
19 required under this chapter.

20 (b) The department shall establish fee levels under (a) of this section so that
21 the total amount of fees collected for both money transmission licensing and currency
22 exchange licensing under this chapter approximately equals the department's actual
23 total regulatory costs for both money transmission licensing and currency exchange
24 licensing. The department shall set the fee levels so that the fee levels for both money
25 transmission licensing and currency exchange licensing are the same.

26 (c) The department shall annually review each fee level to determine whether
27 the regulatory costs are approximately equal to fee collections. If the review indicates
28 that fee collections and regulatory costs are not approximately equal, the department
29 shall calculate fee adjustments and adopt regulations under (a) of this section to
30 implement the adjustments.

31 (d) In January of each year, the department shall report to the office of

1 management and budget all fee levels and revisions made for the previous year under
2 this section.

3 (e) In this section,

4 (1) "fee" means an application fee, a license fee, a renewal fee, the
5 daily late fee for not submitting a renewal report and paying the renewal fee under
6 AS 06.55.106, investigation costs under AS 06.55.105 and 06.55.203, an examination
7 cost under AS 06.55.401, and a fee for approving a change of control under
8 AS 06.55.404;

9 (2) "regulatory costs" means the costs of the department that are
10 attributable to regulation of money services licensing under this chapter.

11 **Sec. 06.55.890. Definitions.** In AS 06.55.810 - 06.55.840,

12 (1) "fees" does not include revenue that a licensee generates from a
13 money transmission when converting the currency of one government into the
14 currency of another government;

15 (2) "licensee" includes an authorized delegate;

16 (3) "monetary equivalent" means, for money transmissions that will be
17 redeemed in a currency other than the currency that the customer uses to purchase the
18 money transmission, the amount of money in the currency of the government that the
19 recipient of the money transmission is to receive, as converted at the retail exchange
20 rate offered by the licensee to the customer for the money transmission.

21 **Article 9. General Provisions.**

22 **Sec. 06.55.990. Definitions.** In this chapter,

23 (1) "applicant" means a person who files an application for a license
24 under this chapter;

25 (2) "authorized delegate" means a person whom a licensee designates
26 to provide money services on behalf of the licensee;

27 (3) "bank" means an institution organized under federal or state law
28 that accepts demand deposits or deposits that the depositor may use for payment to
29 third parties and engages in the business of making commercial loans;

30 (4) "control" means

31 (A) the ownership of, or the power to vote, directly or

1 indirectly, at least 25 percent of a class of voting securities or voting interests
2 of a licensee or person in control of a licensee;

3 (B) the power to elect a majority of executive officers,
4 managers, directors, trustees, or other persons exercising managerial authority
5 of a licensee or person in control of a licensee; or

6 (C) the power to exercise directly or indirectly, a controlling
7 influence over the management or policies of a licensee or person in control of
8 a licensee;

9 (5) "currency exchange" means receipt of revenues from the exchange
10 of money of one government for money of another government;

11 (6) "department" means the Department of Commerce, Community,
12 and Economic Development;

13 (7) "executive officer" means a president, a chair of the executive
14 committee, a chief financial officer, a responsible individual, or another individual
15 who performs similar functions; in this paragraph, "responsible individual" means an
16 individual who is employed by a licensee and has principal managerial authority over
17 the provision of money services by the licensee in this state;

18 (8) "licensee" means a person licensed under this chapter;

19 (9) "mobile location" means a vehicle or a movable facility where
20 currency exchange occurs;

21 (10) "monetary value" means a medium of exchange, whether or not
22 redeemable in money;

23 (11) "money" means a medium of exchange that is authorized or
24 adopted by the United States or a foreign government, including a monetary unit of
25 account established by an intergovernmental organization or by agreement between
26 two or more governments;

27 (12) "money services" means money transmission or currency
28 exchange;

29 (13) "money transmission" means selling or issuing payment
30 instruments or stored value, or receiving money or monetary value for transmission,
31 but does not include the provision solely of delivery, online services,

1 telecommunications services, or network access;

2 (14) "outstanding" with respect to a payment instrument, means issued
3 or sold by or for the licensee and reported as sold but not yet paid by or for the
4 licensee;

5 (15) "payment instrument" means a check, a draft, a money order, a
6 traveler's check, or another instrument for the transmission or payment of money or
7 monetary value, whether or not negotiable, but does not include a credit card voucher,
8 a letter of credit, or an instrument that is redeemable by the issuer in goods or services;

9 (16) "person" means an individual, a corporation, a business trust, an
10 estate, a trust, a partnership, a limited liability company, an association, a joint
11 venture, a government, a governmental subdivision, an agency, or an instrumentality, a
12 public corporation, or any other legal or commercial entity;

13 (17) "record" means information that is inscribed on a tangible
14 medium or that is stored in an electronic or other medium and is retrievable in
15 perceivable form;

16 (18) "state" means a state of the United States, the District of
17 Columbia, Puerto Rico, the United States Virgin Islands, or a territory or insular
18 possession subject to the jurisdiction of the United States;

19 (19) "stored value" means monetary value that is evidenced by an
20 electronic record;

21 (20) "unsafe or unsound practice" means a practice or conduct by a
22 person licensed to engage in money transmission or an authorized delegate of the
23 person if the practice creates the likelihood of material loss, insolvency, or dissipation
24 of the licensee's assets, or otherwise materially prejudices the interests of the licensee's
25 customers.

26 **Sec. 06.55.995. Short title.** This chapter may be cited as the Alaska Uniform
27 Money Services Act.

28 * **Sec. 2.** The uncodified law of the State of Alaska is amended by adding a new section to
29 read:

30 **APPLICABILITY.** This Act applies to the provision of money services on or after
31 July 1, 2008.

1 * **Sec. 3.** The uncodified law of the State of Alaska is amended by adding a new section to
2 read:

3 **TRANSITION: REGULATIONS.** The Department of Commerce, Community, and
4 Economic Development may proceed to adopt regulations necessary to implement the
5 changes made by this Act. The regulations take effect under AS 44.62 (Administrative
6 Procedure Act), but not before July 1, 2008.

7 * **Sec. 4.** Section 3 of this Act takes effect immediately under AS 01.10.070(c).

8 * **Sec. 5.** Except as provided in sec. 4 of this Act, this Act takes effect July 1, 2008.



AKPIRG

ALASKA ALASKA PUBLIC INTEREST RES. ALASKA PUBLIC INTEREST RESEARCH
PO Box 101093 • Anchorage, Alaska 99510-1093 • Ph: (907) 276-3031 • Fax: (907) 276-9300 • email: akpirg@akpirg.org

AkPIRG Supports SB 116 – UNIFORM MONEY SERVICES ACT

To: Senate Labor and Commerce Committee

Dear Committee Members:

On behalf of the Alaska Public Interest Research Group (AkPIRG) and our 1,000 Alaskan members, I am writing you to urge your support for Senate Bill 116 – Uniform Money Services Act. This act will protect Alaskan consumers and those in Alaska who use money transfer services.

The bill will require any individual or business that provides money transmission services to have a license. This license allows provision of both money transmission and currency exchange. This will bring Alaska in line with other states who have adopted a uniform standard.

The bill will not only establish a the criteria for operating in Alaska, but will set up security requirements to protect the public from a money transmitter bankruptcy. In addition, a licensed money transmitter will be required to submit an annual report along with their license renewal fee. Thus, the State can keep better track of these businesses, and when necessary investigate and enforce the laws.

Legitimate money transmission businesses in Alaska are in favor of this legislation and want to see it passed so that disreputable ones will not be able to compete. This bill is good for consumers in Alaska and will bring us in line with other states who have adopted these uniform rules.

Thank you for your support of SB 116.

Sincerely,

Steve Cleary
AkPIRG Director



The National Money Transmitters Association, Inc.

12 Welwyn Road, Suite C
Great Neck, NY 11021
tel (516) 828-2742
fax (516) 706-0203
www.nmta.us

March 19, 2007

Senator Johnny Ellis
Labor & Commerce Committee Chair
State Capitol
Juneau, AK 99801
Fax (907) 465-2529
Sen.Johnny.Ellis@legis.state.ak.us

By mail, email and fax (1 page)

Re: Request for a Hearing on the proposed Uniform Money Services Act (SB 116)

Dear Senator Ellis:

The NMTA was founded in 1999 to defend the rights and the very survival of the state-licensed remittance companies of the United States. Currently, we have 44 member companies that, in the aggregate, handle over \$19 billion a year in migrant worker remittances.

When a transmitter lives in a state that has no license requirement, the NMTA relaxes its rules if he seems OK. One of our money transmitter members, Mr. Alyn Moore, a resident of Alaska, has been shut out of the banking system on 'anti-money laundering compliance grounds.' This was not due to any failing on his part, but because the Federal government says that all money services businesses are high-risk.

Without banking facilities, Mr. Moore is out of business, so he would like Alaska to pass a money transmitter law. What does state licensing of money services businesses have to do with Mr. Moore getting his bank account back?

The first step on the road to recognition for small-to-mid-size money transmitters like Mr. Moore, is getting a state license. Since, in 1994, the US Congress decided to leave the regulation of money services businesses to the individual states, there is no federal certification available. We are very grateful to Senator Kim Elton, who introduced the subject Uniform Money Services Act, for his assistance in taking this first step.

The banking crisis we are going through is of immediate concern, but forty-seven states have decided to regulate money transmission or check selling for other compelling reasons:

- To protect the consumer and instill public confidence in the industry
- To assure transparency and disclosure in price and service
- To assure the safety and soundness of the supervised firms
- For the prevention and detection of financial crime

For all these reasons, we ask that you hold a hearing as soon as possible on the need for regulation of the Money Services Industry in Alaska and the need to bank these businesses. The NMTA supports SB 116, and urges its passage as soon as possible.

Please call me with any questions you may have, and thank you for your attention. The NMTA stands ready to help in any way we can.

Sincerely,

David Landsman
Executive Director

cc: Mr. Jesse Klehl

email: david@nmta.us
cellular (917) 821-8829



AKPIRG

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Steve Cleary
AkPIRG Director



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Thank you for your support of SB 116.

Sincerely,

Steve Cleary
AkPIRG Director

SB

117

SENATE COMMITTEE REPORT
First Committee of Referral

DATE: 3/14/07

FURTHER: Health, Education and
 Social Services
 Finance

Date of 5-Day Notice: _____
 (in accordance with Uniform Rule 23)

DATE TURNED
 IN TO OFFICE: 2/6/08

Labor and Commerce Committee considered SENATE BILL NO. 117

SB 117 WORKERS' COMP: DISEASE PRESUMPTION

"An Act relating to the presumption of coverage for a workers' compensation claim for disability as a result of certain diseases for certain occupations."

and recommends:

- be replaced with SCS or CS SB 117 (L+C)
- adopt previous SCS or C _____ (_____)
- attached amendment(s)
- adopt _____ Letter of Intent
- further referral to _____ Committee

SENATE BILL:	
<input checked="" type="checkbox"/>	Same Title
<input type="checkbox"/>	New Title
HOUSE BILL:	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	Technical Title Change
<input type="checkbox"/>	New Title w/ SCR # _____

NEW FISCAL NOTE(S):

ADMIN	2/1/08		✓	
TLWD	2/1/08		✓	

PREVIOUS FISCAL NOTE(S):

APPROPRIATION - no fiscal note

Beardo	Burns		✓	
B Davis	DAVIS		✓	
Stevens	STEVENS			✓
Hoffman	Hoffman			✓
CHAIR: J. Ellis	Ellis		✓	

Alaska State Legislature



Senator Hollis French

Sponsor Statement: Senate Bill 117 Presumptive Disability for Firefighters

Each year citizens throughout Alaska rely on professional and volunteer firefighters to come to their assistance in times of emergency. Firefighters work on behalf of us all to save lives and property, often at great personal risk. In doing so, they are often exposed to toxic chemicals such as benzene, carcinogenic substances such as solvents, dyes, soots, and asbestos, and high levels of carbon monoxide or other substances that can affect the heart and lungs.

Senate Bill 117 would create a presumption in the Workers' Compensation program that a firefighter with at least seven years on the job who has passed health screening exams earlier in their careers will be provided with benefits if they contract certain forms of pulmonary or heart disease or cancers, as it will be presumed to be a result of their occupation. This presumption is restricted to diseases known to occur with greater frequency among firefighters, and is also capped so that claims cannot be made after sixty months from the firefighter's last date of employment.

Forty-one states currently provide some form of presumptive coverage for firefighters. Although arguments have been made that this coverage will be prohibitively expensive, the fact is that has not been the case elsewhere. For instance, the State of California has over 30,000 paid firefighters and more than 30,000 volunteers, but the addition of cancer presumptive benefits has had "no impact" on the actuarial assumptions system for its retirement system. Similarly in Illinois, in the six years following provision of cancer presumption to firefighters, claims actually were 8.3% lower than in the six years prior to passage.

Firefighters place their lives at risk on behalf of us all. In return, they should be able to use Worker's Compensation benefits for illnesses they incur as a result of the work they do. I urge you to join me in supporting Senate Bill 117.

LEGAL SERVICES

DIVISION OF LEGAL AND RESEARCH SERVICES
LEGISLATIVE AFFAIRS AGENCY
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FAX (907) 485-2029
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State Capitol
Juneau, Alaska 99801-1182
Deliveries to: 129 6th St., Rm. 329

MEMORANDUM

March 21, 2007

SUBJECT: Sectional summary regarding presumption of disability for certain diseases for firefighters, peace officers, emergency medical, and rescue personnel (SB 117, Work Order No. 25-LS0641C)

TO: Senator Hollis French
Attn: Andy Moderow

FROM: Dennis C. Bailey *DCB*
Legislative Counsel

You have requested a sectional summary of the above-described bill.

As a preliminary matter, note that a sectional summary of a bill should not be considered an authoritative interpretation of the bill and the bill itself is the best statement of its contents.

Section 1. Creates a rebuttable presumption that a claim for workers' compensation disability made by a firefighter who suffers respiratory diseases, certain cardiovascular events, and certain cancers is within the workers' compensation chapter if certain conditions are met.

Creates a rebuttable presumption that a claim for workers' compensation disability made by a firefighter, peace officer, or emergency and rescue personnel who is an employee of a first responder, rescue service, ambulance service or fire department is within the workers compensation chapter if the claim for disability results from certain contagious diseases and if certain conditions are met.

If I may be of further assistance, please advise.

DCB:lmb
07-067.lmb

State Presumptive Disability Laws

The following states have presumptive disability laws which recognize that fire fighters are at increased risk for certain illnesses. The laws create a presumption that the specified diseases are job related. Because the laws vary greatly from state to state, readers should review the specific state laws to determine the law's application.

State	Heart Disease	Lung Disease	Cancer	Infection Disease
Alabama	✓	✓	✓	✓*
Alaska				
Arizona			✓*	✓*
Arkansas				
California	✓		✓	✓
Colorado	✓	✓		✓
Connecticut	✓			
Delaware				
District of Columbia				
Florida	✓	✓*		✓*
Georgia	✓	✓		
Hawaii	✓	✓		
Idaho	✓	✓		
Illinois	✓	✓	✓	✓*
Indiana	✓	✓	✓	✓*
Iowa	✓	✓		
Kansas	✓	✓	✓	
Kentucky	✓	✓		
Louisiana	✓	✓	✓*	
Maine	✓	✓		✓
Maryland	✓	✓	✓*	
Massachusetts	✓	✓	✓	
Michigan	✓	✓		
Minnesota	✓	✓	✓	✓
Mississippi				

State	Heart Disease	Cancer	Infectious Diseases
Missouri	✓	✓	
Montana			
Nebraska			✓
Nevada	✓	✓	✓*
New Hampshire	✓	✓	
New Jersey		✓	
New Mexico			
New York			✓*
North Carolina			
North Dakota	✓	✓	✓*
Ohio	✓	✓	
Oklahoma	✓	✓	✓*
Oregon	✓	✓	
Pennsylvania	✓	✓	✓*
Rhode Island		✓	✓
South Carolina	✓	✓	
South Dakota	✓	✓	✓
Tennessee	✓**	✓**	✓**
Texas	✓	✓	✓*
Utah	✓	✓	✓*
Vermont	✓*		
Virginia	✓	✓	✓*
Washington	✓	✓	✓
West Virginia			
Wisconsin	✓	✓	✓*
Wyoming			

* Indicate that only specified diseases in these categories are covered

** Applies only to certain localities

California Workers' Compensation Rates for Firefighters

Year	Job Classification Code	
	7766 Professionals	7767 Volunteers
1996	4.98	147.01
1997	4.91	131.06
1998	4.86	124.58
1999	5.12	148.00
2000	5.93	198.84
2001	7.12	255.76
2002	8.97	339.45
2003	12.45	521.66
2004	11.36	428.62
2005	10.05	446.26
2006	6.11	353.79
2007	4.67	317.77

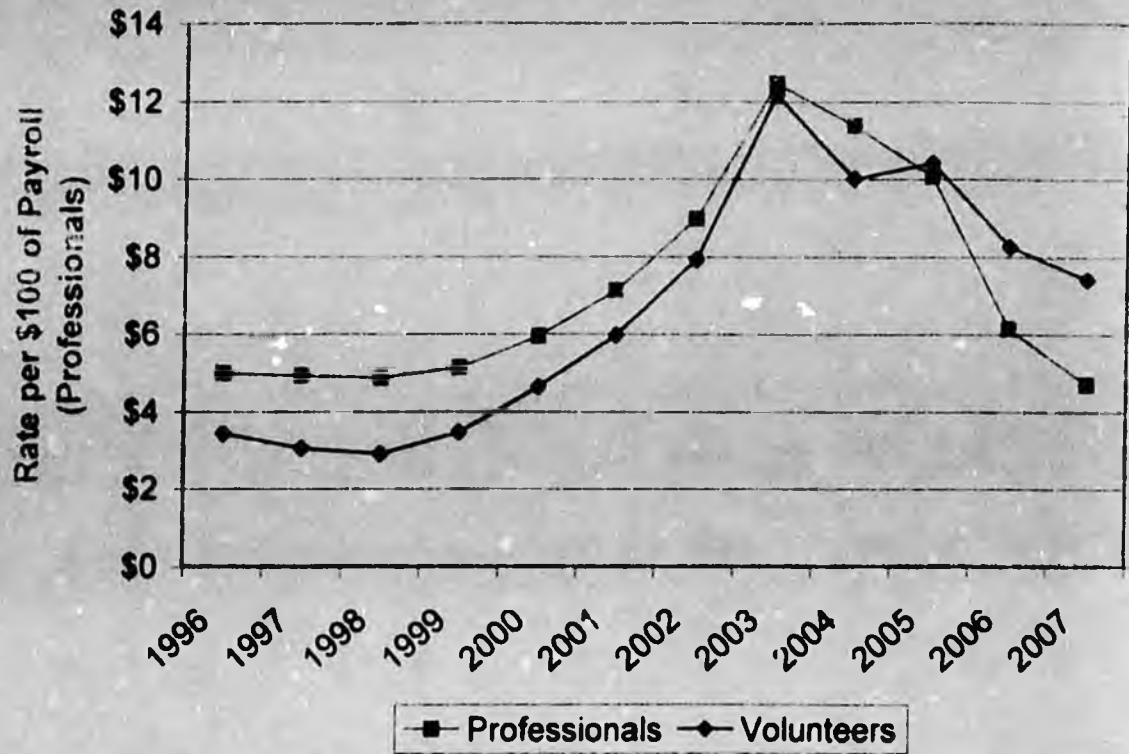
NOTES: The presumptive disability provision of California Labor Code § 3212.1 (Development or manifestation of cancer in active firefighters; Rebuttable presumption) was added in 1999 and applied to claims for benefits filed or pending on and after January 1, 1997.

Rates noted above for professional firefighters represent "pure premium rates" effective at the beginning of each year for new and renewing policies and are expressed as a rate per \$100 of payroll. These pure premium rates are based on loss and payroll data submitted to the Workers' Compensation Insurance Rating Bureau (WCIRB) by all insurance companies. They reflect the amount of losses an insurer can expect to pay in benefits due to workplace injuries. They do not, however, account for administrative and other overhead costs that an insurer incurs. Consequently, insurer premium rates--although derived from the advisory pure premium rates--are typically higher than the pure premium rates.

Rates noted for volunteer firefighters are not based on payroll; they reflect exposure based on a per volunteer per year average risk of loss.

SOURCE: Workers' Compensation Insurance Rating Bureau of California.

**Workers' Compensation Insurance Rating Bureau of California I
for Firefighters**



<p>Same</p>	<p>Pg. 1, ln. 6-9: Presumption of occupational disease or infection applies to: fire fighters for disease classes 1-4; fire fighters, peace officers, and emergency medical/rescue personnel for disease class 4. Pg. 4, ln. 3-5: New presumption applies to claims for benefits made after bill's effective date even if all exposures supporting claim occurred before bill's effective date.</p>	<p>RCW 51.32.185 (1); Presumption for fire fighters only.</p>
<p>Same</p>	<p>Pg. 1, ln. 6-9: Presumption rebuttable by a preponderance of evidence of a cause including tobacco use, physical fitness/weight, lifestyle, heredity, and exposure in other employment or non-employment activities.</p>	<p>RCW 51.32.185 (1); Same.</p>
<p>Same</p>	<p>Pg. 1, ln. 13 – Pg. 2, ln. 2: Fire fighter presumption disease class 1: “respiratory disease.”</p>	<p>RCW 51.32.185 (1)(a); Same.</p>
<p>Same</p>	<p>Pg. 2, ln. 3-4: Fire fighter presumption disease class 2: “cardiovascular events” experienced “within 72 hours after exposure to smoke, fumes, or toxic substances.”</p>	<p>RCW 51.32.185 (1)(b); “heart problems” rather than “cardiovascular events.”</p>
<p>Only seven cancer types, did not include prostate cancer.</p>	<p>Pg. 2, ln. 5-13: Fire fighter presumption disease class 3: cancer – eight types; “prostate, kidney, ureter, bladder, non-Hodgkin’s lymphoma, leukemia, malignant melanoma, primary brain cancer.”</p>	<p>RCW 51.32.185 (1)(c) and (3): Only seven cancer types, does not include prostate cancer.</p>
<p>Same</p>	<p>Pg. 2, ln. 14-17: Fire fighter presumption for disease classes 1 – 3 continues up to five years after end of employment. (Three months for each year of service.)</p>	<p>RCW 51.32.185 (2); Same.</p>
<p>Must serve ten years to qualify for presumption.</p>	<p>Pg. 2, ln. 18-20: Fire fighter must serve seven years to qualify for presumption for disease classes 1-3.</p>	<p>RCW 51.32.185 (3); Must serve ten years to qualify for presumption.</p>
<p>Same</p>	<p>Pg. 2, ln. 21-24: Fire fighter must have “qualifying medical examination,” either “upon becoming a fire fighter or during employment,” that “did not show evidence of the disease” to qualify for presumption for disease classes 1-3.</p>	<p>RCW 51.32.185 (3); “qualifying medical examination” only “upon becoming a fire fighter.”</p>
<p>Same</p>	<p>Pg. 2, ln. 25-29: To qualify for presumption of disease class 3 (cancers), fire fighter must “demonstrate” exposure during employment to a “known carcinogen” “associated” with a disabling cancer as defined by the International Agency for Research on Cancer or the National Toxicology Program.</p>	<p>No requirement.</p>
<p>Five types of contagious disease only, no open-ended Labor Secretary determination process.</p>	<p>Pg. 2, ln 30- Pg. 3, ln5: Presumption of occupational disease or infection applies to fire fighters, peace officers, and emergency medical/rescue personnel for disease class 4 – “contagious diseases.” Diseases covered are HIV, AIDS, all types of hepatitis, meningococcal meningitis, mycobacterium tuberculosis, and “any uncommon infectious disease” the U.S. Labor Secretary determines contraction is related to the hazards of “fire protection activities.”</p>	<p>RCW 51.32.185 (4); Fire fighters only, five types of contagious disease only, no open-ended Labor Secretary</p>

Same	Pg. 3, ln. 16-20: Must undergo "qualifying medical examination" that "did not show evidence of the disease" to qualify for presumption for disease class 4.	RCW 51.32.185 (4); No examination requirement.
Same	Pg. 3, ln. 21-23: Fire fighter presumption for disease classes 1 - 2 (respiratory, cardiovascular event) inapplicable if there is a history of "tobacco product use."	RCW 51.32.185 (5); Fire fighter presumption for "heart or lung condition" inapplicable if there is regular use or a history of "tobacco product use."
Same	Pg. 3, ln. 24 - 27: By regulation DOL&WD must establish; a) type and extent of "qualifying medical examination" needed for presumption to apply; b) disqualifying tobacco product use based upon "existing medical research."	No requirement.

SB 117

FIRE FIGHTER PRESUMPTIVE DISABILITY LAW

BACKGROUND

Fire fighters serve as the state's leading provider of emergency medical services, exposing them to infectious diseases, heat and stress, and various toxic substances in uncontrolled environments. As a result of these exposures, fire fighters contract heart and lung diseases, infectious diseases and cancers at a much higher rate than any other class of workers. Studies show that these diseases are occupational hazards of the profession and among the leading causes of death and disability for fire fighters.

In recognition of this, 40 other states have "Presumptive Disability" laws, which provide the necessary protections for fire fighters and emergency workers engaged in hazardous occupations. No such laws exist to cover fire fighters in Alaska.

AKPFFA POSITION

AKPFFA strongly supports SB 117 which recognizes and supports Alaskan fire fighters.

AKPFFA ARGUMENTS

- SB 117 does not guarantee coverage for an illness, SB 117 provides a disability presumption. The employer has the right to contest a claim.
- This is fiscally responsible legislation that disclaims any fire fighter with less than 7 years of service, is in poor physical shape, or uses tobacco products.
- This bill includes any fire fighter, either volunteer or paid, who meets the standards set forth and verified by a medical doctors finding.
- Fire fighters facing these diseases are literally fighting for their lives. This bill insures that they don't have to concurrently fight for their rights.

CURRENT BILL STATUS

SB 117 was introduced on March 14, 2007 and is currently assigned to the Labor & Commerce Committee.

AKPFFA Legislative Director Mike Davidson at (907)230-4960



ALASKA CORRECTIONAL OFFICERS ASSOCIATION

"Walking Alaska's Toughest Beat"

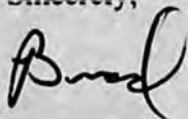
April 5, 2007

Senator Johnny Ellis
Alaska State Legislature
State Capitol, Room 9
Juneau, Alaska 99801-1182

Dear Senator Ellis,

The Alaska Correctional Officers Association and Correctional Officers state-wide request your support for Senate Bill 117. Firefighters, peace officers and emergency medical and rescue personnel work in environments where they are regularly exposed to the specific health risks addressed in this Bill. These diseases are serious line-of-duty hazards for these Officers and passage of this Bill is vitally important to all Correctional Officers around the state. Please help us by supporting this Bill. If there is anything we can do to assist you, please feel free to contact us.

Sincerely,



Brad Wilson
Business Manager

P.O. Box 210290 • Anchorage, Alaska 99521
Phone: 1 (907) 646-2262 • Fax: 1 (907) 646-2286
Website: www.acoa.us

D.C.

ALASKA FIRE CHIEF'S ASSOCIATION
2358 Bradway Road, North Pole, AK 99705

EIN #92-0098649

Phone: (907) 488-3400

FAX: (907) 488-6118



March 25, 2007

Senator Hollis French
Alaska Senate
State Capital, Room 417
Juneau, Alaska 99801-1182

Ref: SB 117

Dear Senator Hollis French:

The Alaska Fire Chief's Association is in support of SB 117 which would provide presumption coverage for our fire fighters for respiratory disease, heart attacks and cancers that are occupational hazards in the fire service.

The fire chiefs of Alaska see the need to provide this coverage for our employees that are protecting Alaska, in order to provide for those that have served our communities in their time of need. We encourage the passage of House Bill 200 with the endorsement of the Alaska Fire Chief's Association.

Sincerely,

A handwritten signature in black ink, appearing to read "Warren B. Cummings". The signature is fluid and cursive, written over a horizontal line.

Warren B. Cummings, Fire Chief
President AFCA



ALASKA CORRECTIONAL OFFICERS ASSOCIATION

"Walking Alaska's Toughest Beat"

April 5, 2007

Senator Hollis French
Alaska State Senate
State Capitol, Room 417
Juneau, Alaska 99801-1182

Dear Senator French,

The Alaska Correctional Officers Association and Correctional Officers state-wide thank you for your sponsorship and support of Senate Bill 117. Firefighters, peace officers and emergency medical and rescue personnel work in environments where they are regularly exposed to the specific health risks addressed in your Bill. These diseases are serious line of duty hazards for these Officers and passage of this Bill is vitally important to all Correctional Officers around the state. If there is anything we can do to assist in the passage of this very important Bill, please feel free to contact us.

Sincerely,

Brad Wilson
Business Manager



Anchorage Firefighters Local 1264



P.O. Box 242041 • Anchorage, AK 99524-2041
(907) 349-1264 • (907) 349-5580 (fax)

Senator French
Representative Dahlstrom

I would like to personally thank you both for your support of SB117 and HB200 respectively. As a newly hired Firefighter/ Paramedic w/ the Anchorage Fire Department, it is comforting that you both are looking out for the interest of my family and brothers of the IAFF Local 1264. It is comforting for me to know that your diligence and representation in the House and Senate is for the betterment of Firefighters in our great state of Alaska.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Don L. Wagner', written over a faint circular stamp.

Don L. Wagner
Firefighter/ Paramedic
Anchorage Fire Department

**Tim Molle
Station 4 Engineer
Anchorage Fire Department**

It is with great admiration that I write this letter to express my deep felt appreciation for the legislation that Rep. Nancy Dahlstrom and Senator Hollis French have put forward to help first responders to cope with the inherent dangers of their job. I have worked for the Anchorage Fire Department for sixteen years, and this legislation will be a comfort for the present and future first responders who have committed to a career of helping people. Thank you once again and I hope that the position that you have taken will be viewed as a fair legislation by all that must act.

Yours Sincerely;

Tim Molle

**James R. Veatch
3141 Vadla Way
Anchorage, AK. 99504**

**Senator Hollis French and
Representative Nancy Dahlstrom
State Capitol room #417
Juneau, AK. 99801-1182**

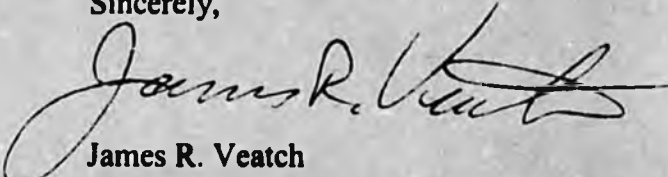
March 19, 2007

Dear Senator French and Representative Dahlstrom,

I would like to thank you both for sponsoring Senate Bill 117 and House Bill 200 respectively. History has proven time and again that long after we hang up our helmets and retire from this career we cannot escape the long term health risks and problems associated with this line of work. I am a 49 year old Captain who has been a firefighter with the city of Anchorage for 23 years. I have worried about the future of my health and I'm glad steps are being taken to assist us with health benefits.

I won't make this a long letter but please accept my gratitude and that of my family for moving this bill through the long and tedious process. The Anchorage Fire Fighters will not forget you.

Sincerely,


James R. Veatch



Anchorage Firefighters Local 1264

P.O. Box 242041 • Anchorage, AK 99524-2041
(907) 349-1264 • (907) 349-5580 (fax)

Senator French and Representative Dahlstrom,
I would like to thank you for sponsoring this
very important Legislation, HB 200 and SB 117. I'm
thankful you realize the need and importance
of the legislation to my colleagues and I. As
a 12 yr firefighter for Anchorage Fire Dept, I'm
concerned with the inherent risks of my pro-
fession, rising health care costs, and how these
will effect my family and I in the future.

Thanks for your efforts

Sincerely,
Robert Fuller
Firefighter



International Association of Fire Fighters

HAROLD A. SCHAIBERGER
General President

VINCENT J. BOLLON
General Secretary-Treasurer

SENATOR HOLLIS FRENCH : REPRESENTATIVE DAHLSTROM

THANK YOU FOR SUPPORTING HOUSE BILL 200 AND
SENATE BILL 117. AS A FIRE FIGHTER I WANT TO THANK
YOU FOR HELPING TO FIGHT FOR OUR HEALTH BENEFITS.

AFD FIRE FIGHTER

DAVID BELLVILLE

19 MARCH 07

REP. NANCY DAHLSTROM AND SEN. HOLLIS FRENCH,

I JUST WANTED TO LET YOU KNOW
THAT I APPRECIATE YOUR CONTINUED
SUPPORT FOR HOUSE BILL 200 AND SENATE
BILL 117.

RESPECTFULLY,

TED FUSSELL, ANCHORAGE FIRE DEPT.



Anchorage Firefighters Local 1264

P.O. Box 242041 • Anchorage, AK 99524-2041

(907) 349-1264 • (907) 349-5580 (fax)

DEAR SENATOR FRENCH -

I WANTED TO SAY THANK YOU FOR
YOUR INTRODUCTION AND SUPPORT OF SB117.
I FULLY SUPPORT THIS LEGISLATION AND
LOOK FORWARD TO SERVING MY COMMUNITY WITH
THE COMFORT OF KNOWING I WILL BE
TAKEN CARE OF IN THE EVENT OF
TRAGEDY.

SINCERELY,
ADAM PETERSON



ANCHORAGE FIRE FIGHTERS UNION
IAFF — LOCAL 1264

ANDY MULLEN

HOME 907-988-0160
CELL 907-980-1313
EMAIL eb2@iaff1264.com

OFFICE 907-348-1264
P.O. BOX 242041
ANCHORAGE, AK 99524

Senator French & Rep. Dahlstrom

I enjoyed my first trip to Juneau last month. Thank you for meeting with us and for all the work you have put into our presumptive disability legislation.

All of us at Anchorage Fire Dept. really have our fingers crossed that HB 200 & SB 117 pass quickly.

Thank you - Thank you - Thank you!

-Andy Mullen

May 3, 2007

Senator Johnny Ellis,
Senate Labor and Commerce Committee Chair
And Committee Members

Re: SB117

Dear Senator Ellis and Committee members,

Was just informed of the meeting due to begin at 1:30 this afternoon. Because of previous engagements, I am unable at this time to testify, much as I would like to. My thoughts about the bill follows.

As a member of AML, I urge the Labor and Commerce Committee to carefully review this bill and the potential implications for all municipalities, and then vote DO NOT PASS.

This bill would create a presumption for workers compensation coverage for firefighters for cardio/respiratory problems as well as a variety of cancers for firefighters with seven or more years of service. My concern is that all of these diseases are chronic, that often have genetic and/or lifestyle choices as their cause.

As many other municipalities in the state, the Kenai Peninsula is also struggling with ever increasing medical obligations. Without a clear determination, that would create even more financial obligation for us. I cannot support that.

Again, I respectfully request you vote a DO NOT PASS on SB 117.

Thank you,

Sincerely,



Milli Martin

P.O. Box 2652

Homer, Alaska 99603

907-235-6652

Email: millimom@xyz.net



Alaska Independent Insurance Agents & Brokers, Inc.

Alaska Independent Insurance Agents & Brokers

Position Paper on SB117

The Alaska Independent Insurance Agents & Brokers is a professional trade association representing business people throughout Alaska. We work with our insurance company partners while representing the interests of our clients. Because we deal with the Alaskan consumer on a daily basis, we are particularly sensitive to their needs and concerns. We believe the best consumer protection is a healthy, competitive insurance marketplace.

SB117 - "An Act relating to the presumption of coverage for a workers' compensation claim for disability as a result of certain diseases for certain occupations."

The Alaska Independent Insurance Agents & Brokers Oppose SB117.

Concerns that we have with this bill include but are not limited to:

- Disease is a health issue and should remain under health coverage rather than making it a workers' compensation benefit.
- Allowing these types of claims to be worker's compensation rather than health will continue to exacerbate the problems in the workers' compensation market.
- It can be incredibly expensive and could eliminate the employer's ability to controvert a claim.

We respectfully request that you consider these issues when reviewing the bill. We welcome the opportunity to discuss the issues with you in more detail.

Sincerely,

Jim Barry
President

Date: May 3, 2007

From: Kevin Smith, Executive Director

To: Members of the Senate Labor and Commerce Committee

REGARDING: SB117 Testimony

Introduction

Good afternoon, Mr. Chairman, members of the committee. My name is Kevin Smith. I'm the executive director of the Alaska Municipal League Joint Insurance Association. My job is not on the policy side of the house. I am more of a technician. I help run the Municipal League sponsored property, liability and workers' compensation self-insurance program for 152 member cities, municipalities and school districts in Alaska. The members pool together to cover the first \$500,000 for each workers' compensation claim, and purchase reinsurance or excess coverage to statutory limits above that amount.

I'd like to thank the firefighters that have testified for the job they choose to do. Alaska's cities and boroughs appreciate our public safety workers. Fire fighters, emergency responders, police officers. I defend their actions every day as part of my job.

We also appreciate our public works crews that clear our snow, the wastewater treatment operators that make life convenient, and the teachers

that stop our kids' bloody noses. We appreciate our health aides that meet the ambulance crews at the clinic.

And in municipal government, we also have the utmost respect for the citizens that pay the taxes that equip our public safety, public works, and other employees. **And help pay for unfunded mandates.**

For us, this bill is not about appreciation of one class of workers over another. It is about asking struggling municipalities to pay for an unnecessary state mandate.

What does the bill do?

Currently, when any employee files a claim for any of the diseases listed in SB117, as long as a medical opinion links it to work, the claims would be accepted as compensable. This bill proposes to turn the current workers' compensation system upside down.

SB117 would place fire fighters with 7 or more years of service in a preferred category where they would not be subject to the same proof requirements for occupational injuries or illnesses as all other workers, both public and private sector. Cardiovascular events, respiratory problems, and cancer will be presumed to be work related. SB117 would require tax-payer funded municipalities to prove a negative: that the firefighter's cancer, for example, was NOT caused by the job.

This bill is bad public policy for many reasons, not the least of which it is not supported by science.

Who will the provisions of SB117 apply to?

[According to the Division of Fire Prevention, there are nearly 6,350 fire fighters in Alaska. Nearly 1,400 are career, paid professionals. Another 875 are paid, or paid on-call responders. The remainder, 4,100, are volunteers, many of whom rarely spend time in the field where the potential for occupational exposure exists.

Of those 6,350, 2,100 of them are also EMS responders. The Division of Emergency Services reports approximately another 1,400 EMTs and Paramedics.

And the Alaska Police Standards Council reports approximately 1500 police officers and troopers.]

The bill affects some 9,250 first responders. Since municipalities employ the vast majority of Alaska's first responders, you can understand AML's interest in SB117.

Some of you may have heard that the AML is OK with this bill. Or that the AML doesn't oppose this bill. Let me set the record straight. **The AML strongly opposes this piece of legislation.**

What's the Cost?

The costs of this bill are difficult to gauge. The cost of cancer, for example, varies by the type of cancer, how early it is detected, the treatment options, among other factors. The National Commission on Compensation Insurance (NCCI) promulgates the base rates for workers' compensation rates across the country. NCCI estimates increased costs for the fire fighter class code at 15 to 30 percent for the cancer presumption alone. But, mind you, this bill provides more than just a cancer presumption. In other states with a cancer presumption, the rates would indicate otherwise. Take Nevada, for example.

According to Patricia Young at Legislative Research, Nevada is one of only 10 states in the country that cover some form of each category of disease that is proposed in SB117, not 41 states as the firefighters have previously testified.

NCCI currently recommends a base rate for Alaska of \$4.99 per hundred dollars of payroll. Nevada's rate is \$15.03. That is 3 times as much.

California's rate is \$10.94 per hundred or more than twice as much.

About half of Alaska's registered firefighters are volunteers. Most small communities can't afford to pay firefighters, so they have volunteers. But they still need to buy workers' comp. for the volunteers. Volunteer rates will necessarily have to increase to cover the costs of the presumptions in this bill. Judging by the rates in Nevada and California, probably by hundreds of percentage points. When tax payers in smaller municipalities

can't afford to pay firefighters, why would we expect them to afford to pay much, much more for this extraordinary benefit?

Many of the jurisdictions that provide this coverage don't provide the presumption for volunteers.

Proponents of the bill have used California as an example in previous testimony. They have stated that the effect on the actuarial assumptions for the California Public Employee Retirement System as "negligible" or "minimal." As lawmakers, I know you understand that it is difficult to compare one jurisdiction with another. California, for example, provides a 50 percent rebate for unfunded mandates. Data from 2000 to the present shows local agency requests for reimbursement on firefighter cancer costs of approximately \$20 million for their firefighters' presumption. That means the actual cost is twice that amount, or \$40 million. In actual fact, according to the California League of Cities, that figure is probably understated. Whatever the figure, it is not a "negligible" amount.

To take advantage of the presumptions in this bill, medical screenings are necessary. This is a great idea, except that the costs of medical screenings are expensive. While costs vary, Juneau Fire and Rescue reports they pay \$1300 for a medical screening and EKG. Using that figure and assuming 9250 affected employees, you're looking over \$12 million in screening costs alone.

The Science

Cancer is a terrible disease that touches each of our lives. According to the American Cancer Society's statistics, about half the men in this room will be diagnosed with some sort of cancer in their lifetime. Yesterday's Anchorage paper cited the following Cancer Society statistics: Prostate cancer is the second most diagnosed cancer in men after skin cancer. It is the second leading cause of cancer death.

One third of the women will be diagnosed with cancer. And the causes remain largely unexplained.

The science behind this bill is far from conclusive. The International Fire Fighters Union is basing their data on a "meta-analysis" performed by LeMasters and others. A meta-analysis, I learned, is a study of previous studies.

The approach used by LeMasters to identify relevant studies is considered by epidemiologists as a sound one. In the LeMasters' study, none of the cancers rise to the level of medical certainty. Statistically speaking, there are associations, but in none of the listed diseases has the standardized mortality ratio (SMR) exceeded 200.0, the standard epidemiologists use to determine causation. In fact, in the case of bladder and kidney cancers, the study indicates that firefighting is "unlikely" to contribute significantly.

The LeMasters' study concludes that more study is needed and that we need to develop more innovative, comfortable protective equipment.

[The approach used by LeMasters to identify relevant studies is considered by epidemiologists as a sound one. The comparison of observed and expected numbers of cases by cancer site is an appropriate way to begin asking whether firefighting can predispose someone to the occurrence of one or more forms of cancer. LeMasters went further, however, to form a finding of at least a ten percent increased risk in firefighters that, based on the number of observations across all studies, was not plausibly the result of chance. From these results, they concluded that for only two of the cancers listed in the bill was the relation between firefighting and incidence more than "unlikely" or "possible." Those cancers are Non-Hodgkins Lymphoma and Prostate cancer. (*Dr. Noel Weiss, MD, UW Dept. of Epidemiology, Feb 22 testimony to Management Labor Advisory Committee, Oregon State Legislature*).

Again, in no event does a cancer listed in the bill exceed or equal the relative risk or 2.0 or reach the level of causal. In both cases, the general population of males has a high risk of contracting one of these diseases.]

>>>>

Nearly 3 out of 10 men in the general population will develop one of the cancers listed in SB117. If we accept the LeMasters study, being a fire fighter increases risk by about 28 percent. In other words, for every 4 cancer claims by fire fighters, 3 would have occurred regardless of their occupation.

If it is the desire of the Legislature to compensate fire fighters who develop cancer, then we suggest that a broad-based state funding source be found to finance this extraordinary benefit and unfunded mandate on local government employers and taxpayers that fund them.

[Speaking of studies, last month the New England Journal of Medicine published a Harvard University study that found 45 percent of job-related firefighter deaths were related to a coronary condition. This is especially significant since a low percentage of their time is actually spent fighting fires. The report states that poor diet and lack of exercise are contributing factors in the deaths.

Similarly, in a September 2006 study authored by Dr. Lori Moore-Merrell, Assistant to the General President of the International Fire Fighters Union, the conclusion states, "the most prominent contributing factors to firefighter line of duty death in the United States are health/wellness/fitness/medical status of firefighters, personal protective equipment, and human error."

I mention this because diet and exercise are related to cancer risk much the same way they are related to heart disease. Let's face it, the demographics of America, and Alaska is no exception, are getting older and heavier.]

>>>>

Let's be clear, I'm not an epidemiologist or a statistician. But I have reviewed a number of the studies and they seem to contradict each other with the exception of one thing. More study is needed.

Bear Man

Passage of SB117 would crack the door for other special interest groups that would like a similar presumption. Make no mistake about it, there is chatter in the lobby about others that would like to join this bill. Last session, an amendment was offered to add nurses to the bill. They wanted to know, "Why does the exposure to bloodborne pathogens stop at the emergency room door?" That is a reasonable question. I referred to the bill as letting the bear's nose into the cabin. [Before you know it, we'll be like Charlie Vandergaw, the former teacher with the Yetna River Homestead. We'll be inviting the whole bear into the cabin.]

The bill is discriminatory. Similar laws have been challenged in Nevada on constitutional grounds. The bill was overturned in New Hampshire because it also violated the constitution – this time for violating the unfunded mandate clause.

Many people have occupational exposures in their jobs. Workers' compensation already provides the protection for them. Turning the system upside down for one class of employees is bad public policy.

Conclusion

So in summary, SB117 is a piece of special interest legislation that provides a tremendous benefit to a single group of employees at local taxpayer expense.

Welders, construction demolition, honey bucket haulers are all exposed to the same carcinogenic or contagious agents as firefighters. The difference is, unlike most of the firefighters, they are exposed on a daily basis.

The ailments listed in SB117 are already covered by workers' compensation if the employee can demonstrate a connection to work.

The LeMasters study shows an association of between firefighting and some cancers. **REMEMBER though non-firefighters can and do get the diseases while most firefighters never do.**

Proving or disproving the exact cause of a disease as complex as cancer is unnecessary. That's because for paid firefighters, municipal taxpayers already provide medical care and disability benefits for injured employees regardless of the cause of their illness. There is no need to change workers' compensation law to protect them.

This is not a vote about how much we appreciate Alaska's first responders. Of course we do. This is a vote about whether it is good public policy to continue to pile unfunded mandates on local governments to benefit one class of employee and requiring local taxpayers to foot the bill.

I urge you to vote "do not pass" on SB117.

Senator Hollis French

Capitol Room 417
465-3892
465-6595 fax



MEMORANDUM

Date: May 3, 2007

To: Senator Johnny Ellis, Chair
Senate Labor and Commerce Committee

From: Senator Hollis French **HSF**

RE: Proposed CS for SB 117

Attached is a proposed CS for SB 117 that clarifies an issue surrounding qualifying medical examinations.

This CS makes it clear that the bill doesn't place an obligation on a municipality or other employer to cover the costs of a qualifying medical exam. However, it does provide that an individual has the option to pay for their own exam if their employer doesn't provide them with one. Without a qualifying examination workers compensation claims can still be made (as existing law provides), but the presumption under this bill would not.

The change occurred on page 3, lines 24-30.

25-LS0641E

Bailey

5/1/07

CS FOR SENATE BILL NO. 117()**IN THE LEGISLATURE OF THE STATE OF ALASKA****TWENTY-FIFTH LEGISLATURE - FIRST SESSION****BY****Offered:****Referred:****Sponsor(s): SENATORS FRENCH, McGuire, Davis, Wielechowski, Elton****A BILL****FOR AN ACT ENTITLED**

1 **"An Act relating to the presumption of coverage for a workers' compensation claim for**
2 **disability as a result of certain diseases for certain occupations."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 *** Section 1. AS 23.30 is amended by adding a new section to read:**

5 **Sec. 23.30.121. Presumption of coverage for disability from diseases for**
6 **certain occupations. (a) There is a presumption that a claim for compensation for**
7 **disability as a result of the diseases described in (b) and (c) of this section for the**
8 **occupations listed under (b) and (c) of this section is within the provisions of this**
9 **chapter. This presumption of coverage may be rebutted by a preponderance of the**
10 **evidence. The evidence may include the use of tobacco products, physical fitness and**
11 **weight, lifestyle, hereditary factors, and exposure from other employment or**
12 **nonemployment activities.**

13 **(b) For a fire fighter covered under AS 23.30.243,**

14 **(1) there is a presumption that a claim for compensation for disability**

1 as a result of the following diseases is within the provisions of this chapter:

2 (A) respiratory disease;

3 (B) cardiovascular events that are experienced within 72 hours
4 after exposure to smoke, fumes, or toxic substances; and

5 (C) the following cancers:

6 (i) primary brain cancer;

7 (ii) malignant melanoma;

8 (iii) leukemia;

9 (iv) non-Hodgkin's lymphoma;

10 (v) bladder cancer;

11 (vi) ureter cancer;

12 (vii) kidney cancer; and

13 (viii) prostate cancer;

14 (2) notwithstanding AS 23.30.100(a), following termination of service,
15 the presumption established in (1) of this subsection extends to the fire fighter for a
16 period of three calendar months for each year of requisite service but may not extend
17 more than 60 calendar months following the last date of employment;

18 (3) the presumption established in (1) of this subsection applies only to
19 an active or former fire fighter who has a disease described in (1) of this subsection
20 that develops or manifests itself after the fire fighter has served at least seven years
21 and who

22 (A) was given a qualifying medical examination upon
23 becoming a fire fighter or during employment as a fire fighter that did not
24 show evidence of the disease; and

25 (B) with regard to diseases described in (1)(C) of this
26 subsection, demonstrates that, while in the course of employment as a fire
27 fighter, the fire fighter was exposed to a known carcinogen, as defined by the
28 International Agency for Research on Cancer or the National Toxicology
29 Program, and the carcinogen is associated with a disabling cancer.

30 (c) The presumption in this subsection applies to fire fighters covered under
31 AS 23.30.243, peace officers, and emergency medical and rescue personnel. In this

1 subsection, "emergency medical and rescue personnel" means a trauma technician,
2 emergency medical technician, rescuer, or mobile intensive care paramedic who is a
3 paid employee of a first responder service, a rescue service, an ambulance service, or a
4 fire department that provides emergency medical or rescue services as part of its
5 duties; under this subsection,

6 (1) there is a presumption that a claim for compensation for disability
7 as a result of the following contagious diseases is within the provisions of this chapter:

8 (A) human immunodeficiency virus;

9 (B) acquired immunodeficiency syndrome;

10 (C) all strains of hepatitis;

11 (D) meningococcal meningitis;

12 (E) mycobacterium tuberculosis; and

13 (F) any uncommon infectious disease the contraction of which
14 the United States Secretary of Labor determines to be related to the hazards to
15 which an employee in fire protection activities may be subject.

16 (2) the presumption established in (1) of this subsection applies only to
17 fire fighters covered under AS 23.30.243, peace officers, and emergency medical and
18 rescue personnel who were given a qualifying medical examination upon becoming or
19 during service as a fire fighter, peace officer, or provider of emergency medical or
20 rescue services who did not show evidence of the disease.

21 (d) The provisions of (b)(1)(A) and (B) of this section do not apply to a fire
22 fighter who develops a cardiovascular or lung condition and who has a history of
23 tobacco product use as established under (f)(2) of this section.

24 (e) The provisions of (c)(2) of this section may not be interpreted to require a
25 municipality or other employer of fire fighters covered under AS 23.30.243, peace
26 officers, or emergency medical and rescue personnel, including a municipality or other
27 organization that uses volunteers, to provide a qualifying medical examination. If an
28 employer or volunteer organization does not provide a qualifying medical
29 examination, an employee may independently obtain a qualifying medical
30 examination at the employee's expense.

31 (f) The department shall, by regulation, define

1 (1) for purposes of (b)(1) - (3) and (c)(1) - (2) of this section, the type
2 and extent of the medical examination that is needed to eliminate evidence of the
3 disease in an active or former fire fighter; and

4 (2) for purposes of (d) of this section, the nature and quantity of a
5 person's tobacco product use; the standards adopted under this paragraph shall use or
6 be based on existing medical research.

7 (g) In this section, "fire fighter" has the meaning given in AS 09.65.295.

8 * Sec. 2. The uncodified law of the State of Alaska is amended by adding a new section to
9 read:

10 **APPLICABILITY.** The presumption of coverage established by this Act applies to
11 claims made on or after the effective date of this Act, even if the exposure leading to the
12 occupational disease occurred before the effective date of this Act.

Dana Owen

From: Weston, Michelle R. [WestonMR@ci.anchorage.ak.us]
Sent: Monday, February 04, 2008 4:28 PM
To: Dana Owen
Subject: SB 117

Dear Senate Labor and Commerce Committee,

I support Senate Bill 117. Over the past number of years, I have seen other draft versions of this legislation and this version provides a strong assurance to the public that firefighters covered under this legislation, are suffering from diseases directly related to the job and not a history of poor health or tobacco use. I think this is a fiscally responsible approach. I started out as a volunteer firefighter before I switched to paid fire service employment. I applaud the decision to cover the volunteer firefighters of the State of Alaska. By including them, you have included the dedicated and often unsung heroes of our community, who have risked their lives to save those around them. Helping them fight the diseases they have contracted as a result of this community service is only right and just.

Sincerely,

Michelle Weston
Deputy Chief
Anchorage Fire Department

2/4/2008

Dana Owen

From: Goodrich, Craig P. [GoodrichCP@ci.anchorage.ak.us]
Sent: Monday, February 04, 2008 5:20 PM
To: 'dana_owen@legis.state.ak.us'
Subject: FW: dana_olson@legis.state.ak.us

This e-transmission is sent in strong support SB 117.

Honorable members of the Committee,

According to Retirement Board statistics until 1980 the survival rate of a fire fighter in the Anchorage Fire Department after retirement was 10 years or age 55, whichever came first. Deaths were largely from heart and lung disease and those issues were recognized and notably addressed with the "heart and lung" provisions of the Retirement System. Fortunately, with the advent of SCBA (Self Contained Breathing Apparatus) and improved fitness and health requirements morbidity rates for heart and lung disease are on decline. Unfortunately - and coincidental to these health improvements came the unprecedented widespread use of plastics in common household furnishings, offices, and in transportation. Fires burn hotter, faster, and generate infinitely more BTU per square foot than previous furnishings but the greater issue is that they propagate carcinogens in toxic quantities unimagined only a decade earlier. Today, the quality of life we lead exposes the emergency responder to an array and abundance of toxic and hazards materials as never before. As a result the cases of specific cancers within the fire service cohort are rising exponentially, in concert with the increased risks and exposures. 4/5th of the States have deemed it clearly evident and time to act.

Your forbearers recognized the inordinate risk emergency first responders faced and made accommodations within the Police and Fire Retirement System with presumptive heart and lung language. I am imploring you to do likewise - especially given the overwhelming and compelling evidence relating to hazardous and toxic substances. There are those who say "Well, you knew the risk when you joined up!" No one could even begin to imagine the breadth, frequency, and severity of these exposures to toxic and hazardous substances and it seems unconscionable that an elected official representing "the people" would or even could hearken back to such an antiquated 19th Century notion. Please! Do the "next right thing" and support SB 117 to help protect those who protect you and your loved ones each and every day.

Thank you / Craig P. Goodrich, Fire Chief, Municipality of Anchorage



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February 1, 2008

The Honorable Johnny Ellis, Chair, and
The Honorable Gary Stevens, Vice Chair
Senate Labor and Commerce Committee
Alaska State Capitol
Juneau, Alaska 99801

RE: Oppose SB117

Dear Senator Ellis and committee members:

The Alaska Municipal League and the Alaska Municipal League Joint Insurance Association (AMLJIA) continue to oppose SB117. As I testified before Senate Labor and Commerce last year the bill reaches conclusions not scientifically conclusive and confers preferential benefits to one class of employees over all others.

In the past month, I've noted a study that shows that night workers have a greater risk of cancer than the general population. As a result, the International Agency for Research on Cancer will add overnight shift work as a probable carcinogen. Sales workers also have an association with increased bladder cancer. In fact, studies have found higher bladder cancer rates among people in various occupations, including hairdressers, textile workers, truck drivers and workers in the rubber, leather and chemical industries. It's thought that long-term chemical exposures are to blame.

Cancer is a terrible disease that has likely affected your life. Statistics from the American Cancer Society predict that half of American men and one-third of women will be diagnosed with cancer in their lifetime. Clearly, we are not all fire fighters.

This bill is an unfunded mandate on local governments. Local governments employ the majority of the state's first responders, including volunteers. By increasing lifetime benefits (and beyond lifetime to spouses and dependent children) for diseases that affect us all, how can we expect costs will not go up?

Please take a moment to review the testimony I provided last year (attached). It is factual and I think compelling.

Make no mistake; Alaska's local governments appreciate our fire fighters, EMTs and police officers. This is not about appreciation. This is about unreasonably increasing the costs to the local taxpayers for diseases that touch all of our lives. While opposing this bill may be politically unpopular, it is financially responsible.

Sincerely,

Kevin Smith
Executive Director

PROTECT

A service of the ALASKA MUNICIPAL LEAGUE

Date: May 1, 2007

From: Kevin Smith, Executive Director

To: Members of the Senate Labor and Commerce Committee

REGARDING: SB117 Testimony

Introduction

Good afternoon, Mr. Chairman, members of the committee. My name is Kevin Smith. I'm the executive director of the Alaska Municipal League Joint Insurance Association. I run the Municipal League sponsored property, liability and workers' compensation self-insurance program for 152 member cities, municipalities and school districts in Alaska. The members pool together to cover the first \$500,000 for each workers' compensation claim, and purchase reinsurance or excess coverage to statutory limits above that amount.

I'd like to thank the firefighters that have testified for the job they choose to do. Alaska's cities and boroughs appreciate their public safety workers. Fire fighters, emergency responders, police officers. I defend their actions every day as part of my job.

We also appreciate our public works crews that clear our snow, the wastewater treatment operators that make life convenient, and the teachers that stop our kids' bloody noses. We appreciate our health aides that meet the ambulance crews at the clinic.