



LAWS OF ALASKA

2009

Source

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Chapter No.

AN ACT

Relating to insurance, including treating as confidential certain information submitted to the director of insurance by the National Association of Insurance Commissioners; clarifying conditions for the release of insurer deposits; defining travel insurance that may be sold under a travel insurance limited producer license; exempting rewards under a wellness program from treatment as insurance discrimination or rebating; making certain insurance required of the Comprehensive Health Insurance Association permissive rather than mandatory; making certain provisions relating to statements on applications and guaranteed renewability for individual health insurance applicable to hospital and medical service corporations; making public certain forms and related documents filed for approval by a hospital or medical service corporation after the filing becomes effective; relating to deposits of self-funded multiple employer welfare arrangements; repealing reasons that the director of insurance may use to deny or revoke a license; and providing for an effective date.

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

THE ACT FOLLOWS ON PAGE 1

AN ACT

1 Relating to insurance, including treating as confidential certain information submitted to the
2 director of insurance by the National Association of Insurance Commissioners; clarifying
3 conditions for the release of insurer deposits; defining travel insurance that may be sold under
4 a travel insurance limited producer license; exempting rewards under a wellness program
5 from treatment as insurance discrimination or rebating; making certain insurance required of
6 the Comprehensive Health Insurance Association permissive rather than mandatory; making
7 certain provisions relating to statements on applications and guaranteed renewability for
8 individual health insurance applicable to hospital and medical service corporations; making
9 public certain forms and related documents filed for approval by a hospital or medical service
10 corporation after the filing becomes effective; relating to deposits of self-funded multiple
11 employer welfare arrangements; repealing reasons that the director of insurance may use to

1 deny or revoke a license; and providing for an effective date.

2 _____
3 * **Section 1.** AS 21.06.060(f) is amended to read:

4 (f) The following information or records submitted to or obtained by the
5 director are confidential:

6 (1) personally identifiable consumer information; however, the director
7 may disclose the information or records for the purpose of attempting to resolve a
8 consumer complaint;

9 (2) information or records established by a showing satisfactory to the
10 director to be a trade secret or proprietary business information, including

11 (A) detailed health insurance claim cost data; and

12 (B) justification for usual, customary, and reasonable charge
13 determinations;

14 (3) information or records provided by a person not subject to this title
15 at the request of the director if the information or records are identified as confidential
16 by the director; and

17 (4) [FINANCIAL] analysis ratios and examination synopses
18 concerning insurance companies that are submitted to the director by the National
19 Association of Insurance Commissioners.

20 * **Sec. 2.** AS 21.06.180(b) is amended to read:

21 (b) The office of administrative hearings (AS 44.64.010) shall conduct a
22 hearing on behalf of the director if required under AS 44.64.030. Otherwise, the
23 director shall conduct a hearing if required by a provision of this title, or upon written
24 demand to the director by a person aggrieved by an act, threatened act, or failure of the
25 director to act, or by a report, regulation, or order of the director (other than an order
26 for the holding of a hearing, or an order on hearing or under it). A demand must
27 specify the grounds to be relied upon at the hearing as a basis for the relief. **Except as**
28 **provided under AS 21.27.420(d), unless** [UNLESS] postponed by mutual consent or
29 for good cause shown, the hearing shall be held within 30 days after receipt by the
30 director of the written demand.

1 * **Sec. 3.** AS 21.06.180(c) is amended to read:

2 (c) **Except as provided under AS 21.27.420(d), if,** [IF] within the 30-day
3 period, the director does not either (1) grant the hearing, or (2) issue an order refusing
4 the hearing, as to the previous report, regulation, or order as to which the person so
5 claims to be aggrieved, the hearing shall be considered to have been refused.

6 * **Sec. 4.** AS 21.06.190(a) is amended to read:

7 (a) **Except as provided in AS 21.27.420(d), a** [A] demand for a hearing
8 received by the director before the effective date of an order issued or within 10 days
9 after an order is delivered stays the effectiveness of the order pending the hearing and
10 an order made thereon, except as to action taken or proposed under an order

11 (1) on hearing;

12 (2) under and supplemental to an order on hearing; or

13 (3) based upon impairment of assets or unsound financial condition of
14 an insurer.

15 * **Sec. 5.** AS 21.24.130(d) is amended to read:

16 (d) If **a domestic** [THE] insurer is subject to delinquency proceedings **under**
17 [AS DEFINED IN] AS 21.78, [UPON THE ORDER OF A COURT OF
18 COMPETENT JURISDICTION,] the director shall yield the assets and securities held
19 on deposit under AS 21.09.090(b) to the receiver, conservator, rehabilitator, or
20 liquidator of the **domestic** insurer [, OR TO ANY OTHER PROPERLY
21 DESIGNATED OFFICIAL OR OFFICIALS WHO SUCCEED TO THE
22 MANAGEMENT AND CONTROL OF THE INSURER'S ASSETS]. The director
23 may release the deposit directly to the guaranty fund of which the insurer is a member
24 if the right to receive all or a portion of the deposit is assigned to the guaranty fund.

25 * **Sec. 6.** AS 21.24.130(f) is amended to read:

26 (f) If **a foreign** [AN] insurer **that is a member of the Alaska Life and**
27 **Health Insurance Guaranty Association (AS 21.79) or the Alaska Insurance**
28 **Guaranty Association (AS 21.80)** is found to be insolvent by a proceeding under
29 AS 21.78 or by a court of competent jurisdiction in another state, the director shall
30 take control of the insurer's deposit made under AS 21.09.090(b). The deposit assets
31 shall be released [, AT THE DISCRETION OF THE DIRECTOR,] to the **applicable**

1 **guaranty association upon a showing to the director that the association paid**
2 [ALASKA INSURANCE GUARANTY ASSOCIATION (AS 21.80) TO
3 REIMBURSE FOR] a valid loss, [AND] loss expense, **or contractual obligation**
4 [CLAIM PAYMENT MADE BY THE ASSOCIATION] that is within the purpose of
5 the deposit. **After the director determines that all losses, loss expense liabilities, or**
6 **contractual obligations that were incurred on the insurer's policies written in this**
7 **state for which the deposit was required have been paid, the** [THE] director shall
8 pay the remaining deposit assets to the receiver, conservator, rehabilitator, or
9 liquidator of the insurer, or to another properly designated official who succeeds to the
10 management and control of the insurer's assets [, AFTER THE DIRECTOR
11 DETERMINES THAT ALL LOSS AND LOSS EXPENSE LIABILITIES HAVE
12 BEEN PAID THAT WERE INCURRED ON THE INSURER'S POLICIES
13 WRITTEN IN THIS STATE FOR WHICH THE DEPOSIT WAS REQUIRED].

14 * **Sec. 7.** AS 21.24.130 is amended by adding a new subsection to read:

15 (g) If an insurer is not a member of the Alaska Life and Health Insurance
16 Guaranty Association established by AS 21.79 or the Alaska Insurance Guaranty
17 Association established by AS 21.80, the director shall take control of the insurer's
18 deposit made under AS 21.09.090(b) if the insurer is found to be insolvent by a
19 proceeding under AS 21.78 or by a court of competent jurisdiction in another state.
20 The director shall release the deposit assets to the receiver, conservator, rehabilitator,
21 or liquidator of the insurer, or to any other properly designated official who succeeds
22 to the management and control of the insurer's assets.

23 * **Sec. 8.** AS 21.27.140(b) is amended to read:

24 (b) A firm may not be licensed as an insurance producer, managing general
25 agent, reinsurance intermediary broker, reinsurance intermediary manager, surplus
26 lines broker, or independent adjuster, or transact insurance unless each individual
27 employed as an insurance producer, managing general agent, surplus lines broker,
28 trainee independent adjuster, or independent adjuster by the firm is licensed as an
29 individual in the firm. [EACH COMPLIANCE OFFICER OF THE FIRM SHALL BE
30 LICENSED AS AN INDIVIDUAL IN THE FIRM FOR A SPECIFIC LINE AND
31 CLASS OF AUTHORITY. IF THERE IS MORE THAN ONE COMPLIANCE

1 OFFICER, THE COMBINED AUTHORITY OF ALL COMPLIANCE OFFICERS
2 SHALL COVER ALL THE POWERS CONFERRED BY THE FIRM'S LICENSE.]

3 * **Sec. 9.** AS 21.27.150(a) is amended to read:

4 (a) The director may issue a

5 (1) travel insurance limited producer license to a person who **is**
6 **appointed under AS 21.27.100 and who** sells **insurance connected with**
7 **transportation provided by a common carrier, and limited to a specific trip, that**
8 **covers**

9 **(A) trip cancellation;**

10 **(B) trip interruption; or**

11 **(C) life, health, disability, or personal effects**

12 [TRANSPORTATION TICKETS OF A COMMON CARRIER OF PERSONS
13 OR PROPERTY, WHO IS APPOINTED UNDER AS 21.27.100 FOR
14 TRANSPORTATION TICKET POLICIES OF HEALTH INSURANCE,
15 BAGGAGE INSURANCE ON PERSONAL EFFECTS, AND TRIP
16 CANCELLATION OR TRIP INTERRUPTION INSURANCE];

17 (2) title insurance limited producer license to a person whose place of
18 business is located in this state and whose sole purpose is to be appointed by and act
19 on behalf of a title insurer;

20 (3) bail bond limited producer license to a person who is appointed by
21 and acts on behalf of a surety insurer pertaining to bail bonds;

22 (4) motor vehicle rental agency limited producer license to a person
23 and, subject to the approval of the director, to employees of the person licensed that
24 the licensee authorizes to transact the business of insurance on the licensee's behalf if,
25 as to an employee, the licensee complies with (D) of this paragraph and if the licensee

26 (A) rents to others, without operators,

27 (i) private passenger motor vehicles, including
28 passenger vans, minivans, and sport utility vehicles; or

29 (ii) cargo motor vehicles, including cargo vans, pickup
30 trucks, and trucks with a gross vehicle weight of less than 26,000
31 pounds that do not require the operator to possess a commercial driver's

1 license;

2 (B) rents motor vehicles only to persons under rental
3 agreements that do not exceed a term of 90 days;

4 (C) transacts only the following kinds of insurance:

5 (i) motor vehicle liability insurance with respect to
6 liability arising out of the use of a vehicle rented from the licensee
7 during the term of the rental agreement;

8 (ii) uninsured or underinsured motorist coverage, with
9 minimum limits described in AS 21.89.020(c) and (d) arising **from**
10 [OUT OF] the use of a vehicle rented from the licensee during the term
11 of the rental agreement;

12 (iii) insurance against medical, hospital, surgical, and
13 disability benefits to an injured person and funeral and death benefits to
14 dependents, beneficiaries, or personal representatives of a deceased
15 person if the insurance is issued as incidental coverage with or
16 supplemental to liability insurance and arises out of the use of a vehicle
17 rented from the licensee during the term of the rental agreement;

18 (iv) personal effects insurance, including loss of use,
19 with respect to damage to or loss of personal property of a person
20 renting the vehicle and other vehicle occupants while that property is
21 being loaded into, transported by, or unloaded from a vehicle rented
22 from the licensee during the term of the rental agreement;

23 (v) towing and roadside assistance with respect to
24 vehicles rented from the licensee during the term of the rental
25 agreement; and

26 (vi) other insurance as may be authorized by regulation
27 by the director;

28 (D) notifies the director in writing, within 30 days of
29 employment, of the name, date of birth, social security number, location of
30 employment, and home address of an employee authorized by the licensee to
31 transact insurance on the licensee's behalf; and

1 (E) provides other information as required by the director;

2 (5) nonresident limited producer license to a person; a license that the
3 director issues under this paragraph grants the same scope of authority as a limited
4 lines producer license issued to the person by the person's home state;

5 (6) credit insurance limited producer license to a person who sells
6 limited lines credit insurance;

7 (7) miscellaneous limited producer license to a person who transacts
8 insurance in this state that restricts the person's authority to less than the total authority
9 for a line of authority described in AS 21.27.115(1) - (6), (8), and (9).

10 * **Sec. 10.** AS 21.27.420 is amended by adding a new subsection to read:

11 (d) Without prior hearing, the director may order summary suspension of a
12 license if the director finds that protection of the public requires emergency action and
13 incorporates that finding in an order. The suspension is effective on the date specified
14 in the order or on the date of mailing by first class mail to the licensee's business
15 address on record with the division, whichever is later. If the licensee requests a
16 hearing, the director shall conduct a hearing on the suspension within a reasonable
17 time but not later than 20 days after the effective date of the summary suspension
18 unless the person whose license is suspended requests a later date. At the hearing, the
19 director shall determine if the suspension should be continued or withdrawn and, if
20 proper notice is given, may determine if the license should be revoked. The director
21 shall issue a decision within 30 days after the conclusion of the hearing. If the director
22 decides to continue the suspension or revoke the license, the suspension or revocation
23 must be based on one or more grounds in AS 21.27.410. The summary suspension
24 continues until the decision is issued. AS 21.06.190 and AS 44.64.030 are not
25 applicable to a hearing under this subsection.

26 * **Sec. 11.** AS 21.27.630 is amended by adding a new subsection to read:

27 (m) A person who is an employee of a third-party administrator and who acts
28 within the course and scope of that employment and within the scope of the written
29 contract required under AS 21.27.650(a)(4) is not required to be registered as a third-
30 party administrator under this section. The third-party administrator is responsible for
31 the acts of its employees regulated under this title.

1 * **Sec. 12.** AS 21.34.020 is amended by adding a new subsection to read:

2 (c) If a policyholder meets the standards of an exempt commercial
3 policyholder under this title and regulations adopted by the director, insurance may be
4 procured from a surplus lines broker without complying with (a)(2), (3), and (4) of this
5 section.

6 * **Sec. 13.** AS 21.34.040(d) is amended to read:

7 (d) A nonadmitted insurer may be eligible to provide coverage in this state if it
8 **files with** [FURNISHES TO] the director **or the director's designee** a copy of its
9 current annual **financial** statement that has been certified by the insurer. **The financial**
10 **statement must be** [EXCEPT IN THE CASE OF AN ALIEN INSURER, THE
11 STATEMENT SHALL BE PROVIDED NOT MORE THAN SIX MONTHS AFTER
12 THE CLOSE OF THE PERIOD REPORTED UPON AND THAT IS EITHER] filed
13 with and approved by the regulatory authority in the domicile of the nonadmitted
14 insurer, or certified by an accounting or auditing firm licensed in the jurisdiction of the
15 insurer's domicile. **A foreign insurer shall provide the approved or certified**
16 **financial statement not more than six months after the close of the reporting**
17 **period.** An alien insurer shall provide the **approved or certified financial** statement
18 not **more** [LATER] than nine months after the close of the reporting period. In the
19 case of an insurance exchange, the statement may be an aggregate combined statement
20 of all underwriting syndicates operating during the period reported upon.

21 * **Sec. 14.** AS 21.34.080(a) is amended to read:

22 (a) A surplus lines broker shall execute and file with the monthly report
23 required by AS 21.34.170 a written report, which shall be kept confidential, regarding
24 each surplus lines insurance transaction occurring in the preceding calendar month.
25 The report must include

26 (1) the name and address of the insured;

27 (2) the identity of each insurer including the National Association of
28 Insurance Commissioners [GROUP AND] company [INSURER] number and the
29 percentage of coverage provided by each;

30 (3) a complete description of the subject and location of the risk;

31 (4) the amount of **gross** premium **written** [CHARGED] for the

1 insurance; and

2 (5) other information required by the director.

3 * **Sec. 15.** AS 21.36.110 is amended to read:

4 **Sec. 21.36.110. Exceptions to discrimination and rebates.** Nothing in
5 AS 21.36.090, [AND] 21.36.100, **and AS 21.54.100** may be construed as including
6 within the definition of discrimination or rebates any of the following practices:

7 (1) in the case of a contract of life insurance or life annuity, paying
8 bonuses to policyholders or otherwise abating their premiums in whole or in part out
9 of surplus accumulated from nonparticipating insurance, if the bonuses [,] or
10 abatement of premiums **is** [ARE] fair and equitable to policyholders and for the best
11 interests of the insurer;

12 (2) in the case of **a** life insurance **policy** [POLICIES] issued on [THE]
13 industrial debit, preauthorized check, bank draft, or similar plans, making allowance to
14 policyholders who have [CONTINUOUSLY FOR A SPECIFIED PERIOD] made
15 premium payments directly to an office of the insurer or by preauthorized **debit,**
16 check, bank draft, or similar plan, in an amount that fairly represents the saving in
17 collection expense;

18 (3) readjustment of the rate of premium for a group insurance policy
19 based on the loss or expense experience thereunder, at the end of the first or a
20 subsequent policy year of insurance thereunder, which may be made retroactive only
21 for that policy year;

22 (4) issuance of life or health insurance policies or annuity contracts at
23 rates less than the usual rates of premiums for the policies or contracts, or modification
24 of premium or rate based on amount of insurance; but the issuance or modification
25 **may** [SHALL] not result in reduction in premium or rate in excess of savings in
26 administration and issuance expenses reasonably attributable to the policies or
27 contracts;

28 **(5) a reward under a wellness program established under a health**
29 **care plan that favors an individual if the wellness program meets the following**
30 **requirements:**

31 **(A) the wellness program is reasonably designed to promote**

1 health or prevent disease;

2 (B) an individual has an opportunity to qualify for the
3 reward at least once a year;

4 (C) the reward is available for all similarly situated
5 individuals;

6 (D) the wellness program has alternative standards for
7 individuals who are unable to obtain the reward because of a health
8 factor;

9 (E) alternative standards are available for an individual
10 who is unable to participate in a reward program because of a health
11 condition;

12 (F) the insurer provides information explaining the
13 standard for achieving the reward and discloses the alternative standards;
14 and

15 (G) the total rewards for all wellness programs under the
16 health insurance policy do not exceed 20 percent of the cost of coverage.

17 * **Sec. 16.** AS 21.36.355(a) is amended to read:

18 (a) A person who has a conviction for a felony involving dishonesty or a
19 breach of trust may not engage or participate in the business of insurance without
20 receiving prior written consent by the director or by the insurance regulatory
21 official of the person's home state as required under 18 U.S.C. 1033 and 1034
22 (Violent Crime Control and Law Enforcement Act of 1994).

23 * **Sec. 17.** AS 21.42.120(d) is amended to read:

24 (d) The director may, by order, require that a form or document be filed for
25 informational purposes or may exempt a form or document from the requirements
26 of this section for a time determined by the director when, [AN INSURANCE
27 DOCUMENT OR FORM OR TYPE THEREOF AS SPECIFIED IN THE ORDER,
28 TO WHICH,] in the opinion of the director, this section may not practicably be
29 applied, or the filing or [AND] approval of the form or document is [WHICH ARE],
30 in the opinion of the director, not desirable or necessary for the protection of the
31 public. [THE DIRECTOR SHALL, BY JULY 1, 2002, ADOPT REGULATIONS

1 CONSISTENT WITH THE NATIONAL ASSOCIATION OF INSURANCE
2 COMMISSIONERS PROPERTY AND CASUALTY MODEL RATE AND POLICY
3 FORM ACT AUTHORIZING A POLICY OF COMMERCIAL INSURANCE TO BE
4 FILED ON OR BEFORE THE DATE OF USE AND TO BE NOT SUBJECT TO
5 THE PRIOR APPROVAL OF THE DIRECTOR.]

6 * **Sec. 18.** AS 21.42.160(d) is amended to read:

7 (d) Each policy and annuity contract issued by **an** [A DOMESTIC] insurer,
8 and the forms thereof filed with the director, must have printed on them an appropriate
9 designating letter or figure, or combination of letters or figures, or terms identifying
10 the respective forms of policies or contracts, together with the year of adoption of the
11 form. When a change is made in the form, the designating letters, figures, or terms and
12 year of adoption **must** [SHALL] be correspondingly changed.

13 * **Sec. 19.** AS 21.42.385(b) is amended to read:

14 (b) The minimum coverage required under (a) of this section [MAY]

15 (1) **may** be provided under contract with another health care insurer;

16 [AND]

17 (2) **may** not be less than the dental, vision, and hearing coverage
18 provided on **July 1, 2009** [JANUARY 1, 1992], to an individual entitled to medical
19 benefits under AS 39.35.535 (public employees' retirement system of Alaska); **and**

20 **(3) shall be adjusted by the director on July 1, 2012, and every**
21 **three years thereafter to correspond to changes in coverage provided to**
22 **individuals entitled to medical benefits under AS 39.35.535.**

23 * **Sec. 20.** AS 21.55.100(b) is amended to read:

24 (b) The association **may** [SHALL] make available to residents who are high
25 risks, eligible for and covered by Medicare, 65 years of age or older, and eligible
26 under this chapter [AT LEAST] one **or more** Medicare supplement **plans** [PLAN]
27 that **meet** [MEETS] the minimum policy standards and minimum benefit standards
28 established by regulations adopted by the director under AS 21.89.060.

29 * **Sec. 21.** AS 21.55.500(19) is repealed and reenacted to read:

30 (19) "resident" means

31 (A) except for a federally defined eligible individual or TAA

1 eligible individual, an individual who meets the eligibility requirements in
2 AS 43.23.005; or

3 (B) for a federally defined eligible individual or TAA eligible
4 individual, an individual who is legally domiciled in this state.

5 * **Sec. 22.** AS 21.78.010(b) is amended to read:

6 (b) **Except as provided under AS 21.24, delinquency** [DELINQUENCY]
7 proceedings under this chapter constitute the sole and exclusive method of liquidating,
8 rehabilitating, reorganizing, or conserving an insurer, and a court may not entertain a
9 petition for the commencement of the proceedings unless it has been filed in the name
10 of the state on the relation of the director.

11 * **Sec. 23.** AS 21.84.465(b) is amended to read:

12 (b) A society transacting business in this state shall annually, [ON OR] before
13 March 2, unless the time has been extended by the director for cause shown, file with
14 the director a true statement of the society's financial conditions, transactions, and
15 affairs for the preceding calendar year and pay the applicable fee under AS 21.06.250.
16 The statement shall be in the general form and content approved by the National
17 Association of Insurance Commissioners for fraternal benefit societies and
18 supplemented by additional information required by the director.

19 * **Sec. 24.** AS 21.85.100 is amended to read:

20 **Sec. 21.85.100. Applicability of other provisions.** In addition to the
21 provisions contained or referred to in this chapter, the following chapters and
22 provisions of this title also apply with respect to self-funded multiple employer
23 welfare arrangements to the extent applicable and not in conflict with the express
24 provisions of this chapter and the reasonable implications of the express provisions,
25 and, for the purposes of the application, the arrangements shall be considered to be a
26 mutual insurer:

27 (1) AS 21.03;

28 (2) AS 21.06;

29 (3) AS 21.07;

30 (4) AS 21.09.100, 21.09.120, 21.09.130, 21.09.140 - 21.09.200,
31 21.09.210, 21.09.245 - 21.09.270, 21.09.300, and 21.09.320;

- 1 (5) AS 21.18.010 - 21.18.050, 21.18.080 - 21.18.086, and 21.18.100;
2 (6) **AS 21.24;**
3 **(7)** AS 21.33;
4 **(8)** [(7)] AS 21.36;
5 **(9)** [(8)] AS 21.42.120, 21.42.130, 21.42.345 - 21.42.365, and
6 21.42.375 - 21.42.500;
7 **(10)** [(9)] AS 21.48;
8 **(11)** [(10)] AS 21.54;
9 **(12)** [(11)] AS 21.55;
10 **(13)** [(12)] AS 21.56;
11 **(14)** [(13)] AS 21.78;
12 **(15)** [(14)] AS 21.89.060;
13 **(16)** [(15)] AS 21.90.

14 * **Sec. 25.** AS 21.87.180 is amended by adding a new subsection to read:

15 (e) A filing under this section is open to public inspection after the date the
16 filing becomes effective.

17 * **Sec. 26.** AS 21.87.340 is amended to read:

18 **Sec. 21.87.340. Other provisions applicable.** In addition to the provisions
19 contained or referred to previously in this chapter, the following chapters and
20 provisions of this title also apply with respect to service corporations to the extent
21 applicable and not in conflict with the express provisions of this chapter and the
22 reasonable implications of the express provisions, and, for the purposes of the
23 application, the corporations shall be considered to be mutual "insurers":

- 24 (1) AS 21.03;
25 (2) AS 21.06;
26 (3) AS 21.07;
27 (4) AS 21.09, except AS 21.09.090;
28 (5) AS 21.18.010;
29 (6) AS 21.18.030;
30 (7) AS 21.18.040;
31 (8) AS 21.18.080 - 21.18.086;

- 1 (9) AS 21.36;
2 (10) AS 21.42.110, 21.42.345 - 21.42.365, [AS 21.42.345 - 21.42.365]
3 and 21.42.375 - 21.42.395;
4 (11) AS 21.51.120 and 21.51.400;
5 (12) AS 21.53;
6 (13) AS 21.54;
7 (14) AS 21.56;
8 (15) AS 21.69.400;
9 (16) AS 21.69.520;
10 (17) AS 21.69.600, 21.69.620, and 21.69.630;
11 (18) AS 21.78;
12 (19) AS 21.89.060;
13 (20) AS 21.90.

14 * **Sec. 27.** AS 21.90.900 is amended by adding a new paragraph to read:

15 (46) "working day" means a calendar day other than Saturday, Sunday,
16 an official federal holiday, or an official holiday of this state.

17 * **Sec. 28.** AS 44.64.030(a)(17) is amended to read:

18 (17) AS 21.09, AS 21.22.190, AS 21.27, except under
19 AS 21.27.420(d), AS 21.34, AS 21.36, AS 21.69, AS 21.86.200, AS 21.87, and
20 AS 21.89 (insurance);

21 * **Sec. 29.** AS 21.07.250(19); AS 21.27.410(a)(10), 21.27.410(a)(11), 21.27.410(a)(12); and
22 AS 21.55.220(b) are repealed.

23 * **Sec. 30.** This Act takes effect July 1, 2009.