

Title 3. Commerce, Community, and Economic Development

Part 2. Division of Insurance

Chapter 25. Surplus Lines - Unauthorized Insurers

3 AAC 25.090 is amended by adding a new subsection to read:

(e) In AS 21.34.080(a)(1), “insured” means the “First Named Insured” for the transaction described in the report. (Eff. 8/28/91, Register 119; am 10/21/92, Register 124; am 6/11/2006, Register 178; am 7/25/2008, Register 187; am 9/4/2014, Register 211; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.34.080 AS 21.34.250

3 AAC 25.100(a) is amended to read:

(a) The quarterly report required of a surplus lines broker by AS 21.34.170 [MAY] **shall** be filed electronically **in the location required by the director**. Filing of the quarterly report must occur [, OR A PAPER FILING MUST BE POSTMARKED,] on or before the corresponding due date under AS 21.34.170. The quarterly report must be signed by the surplus lines broker. **The signature may be an electronic signature.** If no transactions took place during the period, a report is not required for that period. (Eff. 8/28/91, Register 119; am 3/11/98, Register 145; am 6/11/2006, Register 178; am 7/25/2008, Register 187; am 12/28/2008, Register 188; am 9/4/2014, Register 211; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.34.080 AS 21.34.170
AS 21.34.180 AS 21.34.190 AS 21.34.250

3 AAC 25.900 is amended to by adding a new paragraph to read:

(3) “Surplus Lines Broker” means a firm or agency, or an individual that is not employed by a firm or agency, licensed under AS 21.27.790. (Eff. 8/28/91, Register 119; am 6/11/2006, Register 178; am 7/25/2008, Register 187; am 9/4/2014, Register 211; am _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.34.250 AS 21.97.900

Chapter 26. Trade Practices

Article

Article 1. Unfair Claims Settlement Acts or Practices (3 AAC 26.010 - 3 AAC 26.300)

Article 2. Unfair Discrimination (3 AAC 26.410 - 3 AAC 26.410)

Article 3. Military Sales Practices (3 AAC 26.430 - 3 AAC 26.449)

Article 4. Coverage for Attorney Fees Taxable as Costs Against an Insured According to Alaska Rule of Civil Procedure 82 (3 AAC 26.500 - 3 AAC 26.559)

Article 5. Privacy of Consumer Financial and Health Information (3 AAC 26.605 - 3 AAC 26.749)

Article 6. Annuity Contract Disclosures (3 AAC 26.750 - 3 AAC 26.769)

Article 7. Suitability in Annuity Contract Transactions (3 AAC 26.770 - 3 AAC 26.789)

Article 8. Life Insurance Policy and Annuity Contract Replacements (3 AAC 26.790 - 3 AAC 26.819)

Article 9. Use of Senior-specific Certifications and Professional Designations (3 AAC 26.820 - 3 AAC 26.825)

Article 10. Retained Asset Accounts (3 AAC 26.850 - 3 AAC 26.865)

Article 11. Consumer Payment Clauses (3 AAC 26.900 – 3 AAC 29.969)

**Article 4. Coverage for Attorney Fees Taxable as Costs Against an Insured According to
Alaska Rule of Civil Procedure 82**

3 AAC 26.500 is amended to read:

Minimum acceptable standards for limitation of coverage for attorney fees taxable against an insured under Alaska Rule of Civil Procedure 82 and disclosure are established under 3 AAC 26.510 - **3 AAC 26.559** [3 AAC 26.550] for all policies written on risks in this state or relative to a subject resident, located or to be performed in this state. (Eff. 7/1/96, Register 138; am ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.36.900

3 AAC 26.510 is amended to read:

3 AAC 26.510. Policy with a right or duty [DUTY] to defend [POLICY]. A policy under which an insurer has a right or duty to provide a defense for an insured **for liability which the policy provides coverage** must provide coverage for the payment of attorney fees taxable as costs against the insured under Alaska Rule of Civil Procedure 82 subject to the following minimum limits, **except as provided in 3 AAC 26.525 and 3 AAC 26.535:**

(1) as an additional amount of coverage, a policy that provides a defense in addition to **an applicable** [THE] limit of liability must provide for payment of attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82 that is not less than

the amount calculated by applying the schedule for contested cases in Alaska Rule of Civil Procedure 82(b)(1) to the limit of liability of the applicable coverage;

(2) as an additional amount of coverage, a policy that provides a defense within an applicable limit of liability less than \$1,000,000 must provide for payment of attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82 that is not less than the greater of

(A) the amount calculated by applying the schedule for contested cases in Alaska Rule of Civil Procedure 82(b)(1) to the limit of liability of the applicable coverage; or

(B) \$10,000;

(3) a policy that provides a defense within an applicable limit of liability of \$1,000,000 or more may include within its applicable limit of liability coverage for attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82. (Eff. 7/1/96, Register 138; am ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.42.120
AS 21.42.130 AS 21.42.160

3 AAC 26.520 is repealed and readopted to read:

3 AAC 26.520. Policy with no right or duty to defend. (a) A policy under which an insurer has neither a right nor a duty to provide a defense but agrees to indemnify an insured for the costs of defense for liability for which the policy also provides coverage must provide coverage to indemnify an insured for the payment of attorney fees taxed as costs against the

insured under Alaska Rule of Civil Procedure 82 subject to the following minimum limits, except as provided in 3 AAC 26.525 and 3 AAC 26.535:

(1) as an additional amount of coverage, a policy that indemnifies an insured for the costs of defense in addition to an applicable limit of liability must provide for payment of attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82 that is not less than the amount calculated by applying the schedule for contested cases in Alaska Rule of Civil Procedure 82(b)(1) to the limit of liability of the applicable coverage;

(2) as an additional amount of coverage, a policy that indemnifies an insured for the costs of defense within an applicable limit of liability less than \$1,000,000 must provide for payment of attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82 that is not less than the greater of

(A) an amount calculated by applying the schedule for contested cases in Alaska Rule of Civil Procedure 82(b)(1) to the limit of liability of the applicable coverage; or

(B) \$10,000;

(3) a policy that indemnifies an insured for the costs of defense within an applicable limit of liability of \$1,000,000 or more may include within its applicable limit of liability coverage for attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82.

(b) A policy under which an insurer has neither a right nor duty to provide and has not agreed to indemnify the insured for the costs of defense against a liability for which the policy also provides coverage is not required to provide coverage for the payment of attorney fees

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awarded as costs against an insured under Alaska Rule of Civil Procedure 82, except as required by 3 AAC 26.535. (Eff. 7/1/96, Register 138; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.42.120
AS 21.42.130 AS 21.42.160

3 AAC 26 is amended by adding a new section to read:

3 AAC 26.525. Defense-only coverage. A policy providing defense-only coverage is not required to provide coverage for the payment of attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.42.120
AS 21.42.130 AS 21.42.160

3 AAC 26.530 is repealed:

3 AAC 26.530. Policy with no defense cost obligation. Repealed. (Eff. 7/1/96, Register 138; repealed ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.42.120
AS 21.42.130 AS 21.42.160

3 AAC 26 is amended by adding a new section to read:

3 AAC 26.535. Cost sharing provisions. (a) A cost sharing provision that effects the amount of coverage for defense costs may be extended to apply specifically to coverage for attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82. In no event may a cost sharing provision apply specifically to coverage for attorney fees awarded as

costs against an insured under Alaska Rule of Civil Procedure 82 unless the application is at least as favorable with respect to that coverage as it is with respect to defense costs coverage in general.

(b) For purposes of this section:

(1) "Cost sharing provision" means policy provisions relating to deductibles, policyholder retentions, policyholder loss reimbursement obligations, or the sharing of costs between the policyholder and insurer;

(2) a provision that limits coverage for defense costs to a specific dollar or percentage amount is considered a provision relating to sharing of defense costs between the policyholder and insurer, except for a provision that:

(A) makes coverage for defense costs subject to an applicable limit of liability; or

(B) applies to defense-only coverage;

(3) a policy provision that establishes an insurer's right to participate in the defense of its insured at its own cost is considered a provision relating to the sharing of defense costs between the policyholder and insurer; and

(4) a provision will be considered at least as favorable with respect to coverage for attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82 as it is with respect to defense costs coverage in general if the proportion that attorney fees awarded as costs against an insured under Alaska Rule of Civil Procedure 82 covered after application of the limitation allowed under part (a) bears to the minimum amount of coverage for the attorney fees that would be required by 3 AAC 26.510 and 3 AAC 26.520 if no limitation existed is at least as great as the proportion that those defense costs, which are either covered by the policy or

incurred by the insurer due to its participating in or providing a defense, after application of a limitation allowed under part (a), bear to the total incurred defense costs. (Eff.

_____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.42.120
AS 21.42.130 AS 21.42.160

3 AAC 26.550(a) is amended to read:

(a) A policy issued by an insurer that limits coverage as permitted under 3 AAC 26.510 = **3 AAC 26.535** [, 3 AAC 26.520, OR 3 AAC 26.530] must include a policyholder notice regarding Alaska Rule of Civil Procedure 82.

3 AAC 26.550(b) is amended to read:

(b) The notice required by (a) of this section must

(1) conform with the division's

(A) Attorney Fees Coverage Notice A, dated March 29, 1996, and hereby adopted by reference, for a policy with a **right or** duty to defend in addition to **an applicable** [ITS] limit of liability;

(B) Attorney Fees Coverage Notice B, dated March 29, 1996, and hereby adopted by reference, for a policy with a **right or** duty to defend within **an applicable** [ITS] limit of liability;

(C) Attorney Fees Coverage Notice C, dated March 29, 1996, and hereby adopted by reference, for an indemnity policy that covers defense costs **within an applicable limit of liability**; [OR]

(D) Attorney Fees Coverage Notice D, dated March 29, 1996, and hereby adopted by reference, for a policy with no defense cost obligations; [OR]

(E) Attorney Fees Coverage Notice E, dated MM DD, 2020, and hereby adopted by reference, for an indemnity policy that covers defense costs in addition to an applicable limit of liability; or

(F) Attorney Fees Coverage Notice F, dated MM DD 2020, and hereby adopted by reference, for a policy providing defense-only coverage; or

(2) be approved in writing by the director upon a determination that the proposed notice:

(A) is substantially equivalent to the division's Attorney Fees Coverage Notice A, B, C,[OR] **D, E, or F; or**

(B) provides notice similar in detail and format to the division's Attorney Fees Coverage Notices, but with terms related to the coverage for attorney fees taxable as costs against the insured under Alaska Rule of Civil Procedure 82 that:

(i) reflect the application of cost sharing provisions permitted under 3 AAC 26.535, or

(ii) are more favorable than the terms described in the division's Notices. (Eff. 7/1/96, Register 138; am ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.39.020
AS 21.39.030 AS 21.39.040

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3 AAC 26 is amended by adding a new section to read:

3 AAC 26.559. Definitions. In 3 AAC 26.500 – 3 AAC 26.550,

(1) "Defense-only coverage" means liability insurance covering defense costs but not settlements or indemnity payments related to events that give rise to the covered defense costs. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.900 AS 21.42.120
AS 21.42.130 AS 21.42.160

Article 5. Privacy of Consumer Financial and Health Information

3 AAC 26.615 is amended by adding a new subsection to read:

(c) A licensee that provides nonpublic personal information to nonaffiliated third parties only in accordance with 3 AAC 26.660 – 3 AAC 26.670, and has not changed its policies and practices with regard to disclosing nonpublic personal information from the policies and practices that were disclosed in the most recent disclosure sent to consumers in accordance with this section or 3 AAC 26.610, may not be required to provide an annual disclosure under this section until such time as the licensee fails to comply with the criteria described in this subsection. (Eff. 1/1/2005, Register 172; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.510

3 AAC 26.695 is amended by adding a new subsection to read:

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(c) Nothing in 3 AAC 26.605 - 3 AAC 26.749 modifies, limits, or supersedes 15 U.S.C. 6801 – 6809 (Gramm-Leach-Bliley Act). (Eff. 1/1/2005, Register 172; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.510

Article 11. Consumer Payment Clauses

3 AAC 26 is amended by adding new sections to read:

Section

900. Purpose and applicability

910. Credit, charge, or debit card payments

920. Payment plans and other fees

930. Insurer options for accepting Premium Payments

949. Definitions

3 AAC 26.900. Purpose and applicability. The purpose of 3 AAC 26.900 – 3 AAC 26.949 is to preserve for consumers the benefits of being able to use alternative forms of payment for insurance transactions while preventing potential unfair practices. 3 AAC 26.900 – 3 AAC 26.949 apply to all insurers authorized under AS 21.09. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.090 AS 21.36.120

3 AAC 26.910. Credit, charge, or debit card payments. Insurers may accept credit, charge, or debit cards for payment of premium payment transactions, either directly or via a third-party payment processor, subject to the following restrictions:

(1) the credit, charge, or debit card option for payment of premiums must be made available to all insureds without arbitrary or unfair discrimination;

(2) a fee associated with a policyholder's payment of premium by credit, charge, or debit card is subject to the requirements of 3 AAC 26.920;

(3) a refund of unearned premium must be made directly to the credit, charge, or debit card holder or as a credit to the insured's credit, charge, or debit card account, unless the insurance producer has a lien against the unearned premium;

(4) the insurance may be cancelled only by the named insured, policyholder, insurer, or in the case of health insurance, the health care exchange. The insurance may not be cancelled by another person or entity such as the credit, charge, or debit card company, or a payment processor;

(5) failure of the insured to pay credit, charge, or debit card charges may not cause coverage to be canceled by the insurer unless the credit, charge, or debit card has been canceled or the charge or credit limit has been exceeded;

(6) the election to pay by credit, charge, or debit card at the time of application for insurance must be treated the same as paying the premium in cash where immediate coverage is provided, unless the credit, charge, or debit card has been canceled or the charge or credit limit has been exceeded; and

(7) a producer who accepts a credit, charge, or debit card in payment of insurance premium must deal with the funds when they are actually received in accordance with the

provisions of the statute addressing the fiduciary responsibility of the producer. (Eff.

_____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.36.090 AS 21.36.120

3 AAC 26.920 Payment plans and other fees. (a) Fees associated with premium payment transactions, including late payment fees, insufficient funds fees, installment fees, and convenience fees, are allowable subject to the following requirements, regardless of whether the fees are associated with payments made under a payment plan:

(1) fees must be reasonably related to the cost to the insurer of providing the service to the applicable policyholders, may not be applied in a way that results in arbitrary or unfair discrimination, and may not duplicate costs already reflected in rates;

(2) for types of insurance subject to AS 21.39.040, fees may not be charged until they have been filed in accordance with the rate filing requirements;

(3) rate filings made in accordance with subsection (a)(2) must include documentation to demonstrate compliance with subsection (a)(1);

(4) rate filings not specifically related to the fees described in subsection (a) above must clearly account for fees the insurer has collected within the experience period covered by the expense information required to be included in support of the rate by 3 AAC 31.230(2) or 3 AAC 31.235; and

(5) this subsection does not apply to cancellation fees.

(b) A policyholder's choice of payment plan or payment method may not affect premiums unless the applicable rates and rules have been filed in accordance with the rate filing requirements in AS 21.39.040, 3 AAC 31.235, or 3 AAC 28.472(b) and the rate filing includes

documentation sufficient to demonstrate the differences in premiums complies with 3 AAC 29.250(c), 3 AAC 31.235, or 3 AAC 28.472(b).

(c) Payment plans must allow for policyholders to pay the remainder of their outstanding premium at any time without incurring additional fees.

(d) Payment plans do not have to be filed if they do not have fees associated with them, except as required elsewhere in statute or regulation. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.030 AS 21.39.040

3 AAC 26.930. Insurer options for accepting premium payments. (a) Except to the extent that an insurer's filed rating plans or policy forms dictate otherwise, nothing in 3 AAC 26.910 or 3 AAC 26.920 requires an insurer to:

(1) accept payment of premium by a particular method

(2) offer a premium payment plan;

(3) charge fees specifically in connection with:

(A) premium payment plans,

(B) providing other services, or

(C) accepting premium payments by a particular method.

(4) consider a policyholder's choice of payment plan or payment method as a risk characteristic in rating.

(b) An insurer that does not charge fees described in subsection (a)(3) is not considered in violation of AS 21.36.090 or AS 21.36.120 solely due to the insurer not passing on incurred expenses on an itemized basis. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.36.090 AS 21.36.120

3 AAC 26.949. Definitions. In 3 AAC 26.900 – 3 AAC 26.930,

(1) "convenience fee" means any fee charged by a third party vendor or payment processor associated with a premium payment transaction.

(2) "payment plan" means an arrangement or plan by which an insurer offers their policyholders an alternative to advance payment of the entire premium.

(3) "payment method" is the way in which a policyholder pays their premium including, electronic fund transfers, automated clearing houses, direct billing, cash, checks, a credit, charge or debit card, or third-party payment processor.

(4) "premium payment transactions" means any payment made in consideration for insurance, including payments related to acquiring, issuing, maintaining, modifying, servicing, or reinstating a policy.

(5) "rate" and "rate filing" includes loss cost adjustment and loss cost adjustment filing. (Eff. ____ / ____ / ____, Register ____)

Authority: AS 21.06.090

Chapter 29. Property, Casualty, and Related Insurance

Article

1. (Repealed)
2. Rate and Rating Plan Filings (3 AAC 29.200 – 3 AAC 29.300)
3. Group-Marketed Property and Casualty Insurance (3 AAC 29.305 – 3 AAC 29.369)
4. Motor Vehicle Liability Insurance Senior Discount (3 AAC 29.380 – 3 AAC 29.395)
5. Schedule And Individual Risk Rating Plans (3 AAC 29.400 – 3 AAC 29.469)

6. Information Filings for Commercial Insurance (3 AAC 29.500 – 3 AAC 29.550)

7. Reporting of Statistical Data by Property and Casualty Insurance Companies (3 AAC 29.600 – 3 AAC 29.669)

8. General Provisions (3 AAC 29.900)

Article 2. Rate and Rating Plan Filings

3 AAC 29.220(c) is repealed:

(c) Repealed ____ / ____ / _____. (Eff. 8/7/92, Register 123; am 12/24/93, Register 128; am 1/17/98, Register 145; am ____ / ____ / _____, Register _____)

Authority: AS 21.06.090 AS 21.39.040 AS 21.39.070

AS 21.39.130

3 AAC 29.280 is repealed:

3 AAC 29.280. Implementation. Repealed. (Eff. 8/7/92, Register 123; am 1/17/98, Register 145; repealed ____ / ____ / _____, Register _____)

Authority: AS 21.06.090 AS 21.39.040 AS 21.39.070

AS 21.39.130

3 AAC 29 is amended by adding a new section to read:

3 AAC 29.290. Limits on using accidents or losses in automobile rating. An insurer may not cancel, deny, nonrenew, underwrite, or rate an automobile insurance policy based upon:

(1) accidents or losses involving an applicant or insured unless:

(A) the accident involved injury to a person or more than \$200 damage to property;

(B) the applicant or insured has been determined to be 50 percent or more at-fault. The determination of fault must be based on a reasonable investigation of all of the available information and may not be presumed based solely on the existence of an accident in a database or motor vehicle record report that identifies accidents without regard to fault; and

(C) none of the following applies to the accident or loss:

(i) the automobile was lawfully parked (an automobile rolling from a parked position need not be considered as lawfully parked, but may be considered as the operation of the last operator);

(ii) the applicant or insured was struck in the rear and has not been convicted of a moving traffic violation in connection with the accident;

(iii) another party was convicted of a moving traffic violation in connection with the accident and the applicant or insured was not;

(iv) the owner and operator of the other vehicle is unknown or has left the scene and the applicant or insured reported the accident to the appropriate authorities within 24 hours;

(v) damage is the result of contact with animals or fowl; or

(vi) damage is limited to and caused by flying gravel, missiles, or falling objects;

(2) the existence of a resident or relative if that resident or relative is excluded from coverage in compliance with AS 28.20.440(1);

(3) the prior insurance history, including the previous insurance company of an applicant or insured, unless detailed actuarial support is included within the applicable rate filing;
or

(4) an applicant or insured's failure to maintain continuous automobile insurance coverage, when the failure does not result in violation of the Mandatory Insurance Act, AS 28.22. (Eff. ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.36.090 AS 21.36.125
AS 21.36.210 AS 21.36.240 AS 21.36.305
AS 21.39.030

Article 5. Schedule And Individual Risk Rating Plans

3 AAC 29.415(a)(5) is amended to read:

(5) a statement **describing compliance with the requirements of 3 AAC 29.420 and 3 AAC 29.430** [THAT ANY PREVIOUSLY APPROVED SCHEDULE RATING PLAN APPLICABLE TO THE SAME CLASS OF INSUREDS IS WITHDRAWN UPON APPROVAL OF THE FILING].

3 AAC 29.415(b) is amended to read:

(b) A schedule rating plan filing must conform to the requirements of 3 AAC 31.200 - 3 AAC 31.217 and 3 AAC 31.225 [AND MUST ACKNOWLEDGE AN OBLIGATION TO COMPLY WITH 3 AAC 29.420 AND 3 AAC 29.430]. (Eff. 7/24/98, Register 147; am 11/12/2006, Register 180; am ____ / ____ / ____, Register ____)

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Authority: AS 21.06.090 AS 21.39.030 AS 21.39.040

3 AAC 29.435 is repealed:

3 AAC 29.435. Use of schedule rating plans approved before 7/24/98. Repealed. (Eff. 7/24/98, Register 147; repealed _____ / _____ / _____, Register _____)

Authority: AS 21.06.090 AS 21.39.030 AS 21.39.040
AS 21.39.050

Article 6. Information Filings for Commercial Insurance

3 AAC 29.505 is amended to read:

3 AAC 29.505. Authorization for informational rate filings. An insurer providing insurance coverage for an exempt commercial policyholder shall submit an informational rate filing to the director no more than 30 days after the proposed effective date of the filing. The informational filing is exempt from the **filing** [PRIOR APPROVAL] requirements of AS 21.39.040(a)(1) and (d), AS 21.39.041, AS 21.39.210, and AS 21.39.220. **The filing shall be open to public inspection after the director completes the review of the filing or after the filing becomes effective, whichever is later.** (Eff. 6/11/2005, Register 174; am _____ / _____ / _____, Register _____)

Authority: AS 21.06.090 AS 21.39.040 AS 21.39.220

3 AAC 29.510(4) is amended to read:

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(4) meet the filing requirements of **3 AAC 31.205** [3 AAC 31.200] - 3 AAC 31.217 and 3 AAC 31.225 [- 3 AAC 31.240]; (Eff. 6/11/2005, Register 174; am 11/12/2006, Register 180; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.040

3 AAC 29.525 is amended to read:

An insurer providing insurance coverage for an exempt commercial policyholder shall submit an informational form filing to the director no more than 30 days after the proposed effective date of the filing. The informational filing is exempt from the **filing** [PRIOR APPROVAL] requirements of AS 21.42.120**(b), AS 21.42.123, and AS 21.42.125. The filing shall be open to public inspection after the director completes the review of the filing or after the filing becomes effective, whichever is later.** (Eff. 6/11/2005, Register 174; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.220 AS 21.42.120
AS 21.42.123 AS 21.42.125

3 AAC 29.530(4) is amended to read:

(4) meet the filing **requirements** [PROCEDURES] of 3 AAC 31.205 - 3 AAC 31.217, [AND] 3 AAC 31.225, **and 3 AAC 31.250**; and (Eff. 6/11/2005, Register 174; am 11/12/2006, Register 180; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.42.120

Article 7. Reporting of Statistical Data by Property and Casualty Insurance Companies

3 AAC 29 is amended by adding new sections to read:

Section

- 600. Purpose and applicability
- 610. Examination of statistical agents
- 615. Filing of statistical plans by statistical agents
- 620. Statistical plans and reporting by insurers
- 625. Statistical agents' compliance with the statistical handbook
- 630. Multiple statistical agents for the same line of insurance
- 635. Edit and control procedures for statistical agents
- 640. Insurer edit and audit procedures
- 645. Disclosure of complying and non-complying insurers
- 650. Access to data
- 655. Lines of insurance without a statistical agent
- 669. Definitions

3 ACC 29.600. Purpose and applicability. (a) Except for data reported directly to the director by insurers, 3 AAC 29.600 – 3 AAC 29.669:

- (1) sets out the manner of reporting data by insurers to statistical agents;
- (2) prescribes reports statistical agents submit to the director; and
- (3) prescribes the conduct associated with (1) and (2) of this section.

(b) 3 AAC 29.600 – 3 AAC 29.669 apply to all lines of insurance for which rates are subject to filing with the director under AS 21.39.040. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.610. Examination of statistical agents. To be designated by the director as a statistical agent to collect statistics from insurers for the purposes of fulfilling the statistical reporting requirements under 3 AAC 29.600 – 3 AAC 29.669, a person, other than an advisory organization, must agree to be subject to the same examination provisions in AS 21 applicable to advisory organizations. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.615. Filing of statistical plans by statistical agents. A statistical agent shall file with the director every statistical plan and every modification of a statistical plan that the statistical agent proposes to use to collect statistics to meet the requirements of 3 AAC 29.600 – 3 AAC 29.669. The director will consider the filings to meet the requirements of 3 AAC 29.600 – 3 AAC 29.669 unless disapproved by the director in writing within 30 days of filing. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.620. Statistical plans and reporting by insurers. An insurer authorized in this state shall report the insurer's insurance statistical experience for lines of insurance described under 3 AAC 29.600(b) to a statistical agent designated by the director. The insurer shall submit the data in accordance with the statistical plans approved by the director under 3 AAC 29.615.

(Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.625. Statistical agents' compliance with the statistical handbook. For every line of insurance that a statistical agent collects statistics in this state, the statistical agent shall, at a minimum, collect statistics and file reports and compilations, in the form and detail provided in the National Association of Insurance Commissioners' *Statistical Handbook of Data Available to Insurance Regulators*, 2012 edition, and adopted by reference; unless otherwise specified by the director. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

Editor's note: The National Association of Insurance Commissioners' *Statistical Handbook of Data Available to Insurance Regulators*, 2012 edition, may be obtained from the National Association of Insurance Commissioners; 1100 Walnut Street, Suite 1500; Kansas City, Missouri 64106. The document may also be viewed electronically on the National Association of Insurance Commissioners' website at http://www.naic.org/documents/prod_serv_statistical_sta_zu.pdf.

3 AAC 29.630. Multiple statistical agents for the same line of insurance. For a line of insurance where more than one statistical agent is designated and collecting statistics in this state, the statistical agents, if directed by the director, shall file combined reports for all statistical agents collecting data for the affected lines of insurance. The statistical agents may make arrangements among themselves for the equitable sharing of the costs to produce the combined reports. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.635. Edit and control procedures for statistical agents. A statistical agent shall adopt edit and control procedures to screen and check data for reasonableness, apparent accuracy, and completeness. The procedures, at a minimum, shall conform to the specifications provided in the National Association of Insurance Commissioners' *Statistical Handbook of Data Available to Insurance Regulators*, 2012 edition, unless otherwise specified by the director. (Eff. _____ / _____ / _____, Register _____)

Authority: AS 21.06.090 AS 21.39.130

Editor's note: The National Association of Insurance Commissioners' *Statistical Handbook of Data Available to Insurance Regulators*, 2012 edition, may be obtained from the National Association of Insurance Commissioners; 1100 Walnut Street, Suite 1500; Kansas City, Missouri 64106. The document may also be viewed electronically on the National Association of Insurance Commissioners' website at http://www.naic.org/documents/prod_serv_statistical_sta_zu.pdf.

3 AAC 29.640. Insurer edit and audit procedures. An insurer, required by 3 AAC 29.620 to report data, shall adopt edit and audit procedures to screen and check the data to ensure the data meets the standards for reasonableness and accuracy provided in the National Association of Insurance Commissioners' *Statistical Handbook of Data Available to Insurance Regulators*, 2012 edition, unless otherwise specified by the director. (Eff. _____ / _____ / _____, Register _____)

Authority: AS 21.06.090 AS 21.39.130

Editor's note: The National Association of Insurance Commissioners' *Statistical Handbook of Data Available to Insurance Regulators*, 2012 edition, may be obtained from the

National Association of Insurance Commissioners; 1100 Walnut Street, Suite 1500; Kansas City, Missouri 64106. The document may also be viewed electronically on the National Association of Insurance Commissioners' website at http://www.naic.org/documents/prod_serv_statistical_sta_zu.pdf.

3 AAC 29.645. Disclosure of complying and non-complying insurers. A statistical report must contain a listing of each insurer whose data is included in the report. If data, from an insurer who agreed to have the insurer's data included in the report, is not included in the report, the statistical agent submitting the report shall also submit a list of all of the insurers not included in the report. At the request of the director, the statistical agent shall provide the director with the reasons for the exclusion. (Eff. ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.650. Access to data. Upon request of the director, a statistical agent shall provide the director:

- (1) with access to all statistical data collected by the statistical agent for the purpose of fulfilling the requirements of 3 AAC 29.600 – 3 AAC 29.669; and
- (2) a copy of a report the statistical agent produces from the data that the director required the statistical agent to collect. (Eff. ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.655. Lines of insurance without a statistical agent. A licensed insurer, writing a line of insurance for which rates are subject to filing with the director under

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AS 21.39.040, shall notify the director as soon as practicable if the insurer finds, or believes to have found, that the insurer is writing a line of insurance for which no statistical agent will accept data. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

3 AAC 29.669. Definitions. In 3 AAC 29.600 – 3 AAC 29.669,

(1) "statistical agent" means a person that has been designated by the director to collect statistics from insurers and provide reports developed from the statistics to the director for the purpose of fulfilling the statistical reporting obligations of the insurers;

(2) "statistical plan" means a statistical agent's system for collecting information from reporting insurers, including exposure, coverage, classification, territory, premium, loss, and other information. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130

Article 8. General Provisions

3 AAC 29 is amended by adding a new section to read:

Section

900. Reimbursement of losses and nonpayment of premium.

3 AAC 29.900. Reimbursement of losses and nonpayment of premium. (a) A property or casualty policy that requires reimbursement by an insured of losses or loss expenses paid by the insurer may not, unless specified in the policy,

(1) consider the failure of the insured to make a reimbursement as a nonpayment of premium for the purposes of AS 21.36.210 - 21.36.310; or

(2) require the insured to prefund amounts the insured agreed to pay under the policy as reimbursements, or to post collateral to secure the insured's obligation to reimburse the insurer.

(b) The failure of an insured to meet prefunding or collateral requirements specified in a policy may not be considered nonpayment of premium.

(c) "Collateral" means cash, a letter of credit, a surety bond, or other form of security an insured posts with an insurer to secure the insured's obligations to reimburse the insurer. (Eff. _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.36.210 AS 21.42.075

Chapter 30. Workers' Compensation

Article

1. Assigned Risk Pool (3 AAC 30.010 – 3 AAC 30.040)
2. Premium Installment Payments (3 AAC 30.100 – 3 AAC 30.130)
3. Workers' Compensation Review and Advisory Committee (3 AAC 30.200)
- 4. Workers' Compensation Loss Reimbursement Requirements (3 AAC 30.300 – 3 AAC 30.349)**

Article 1. Assigned Risk Pool

3 AAC 30.020 is repealed:

3 AAC 30.020. Pool continuity. Repealed. (Eff. 1/1/77, Register 61; repealed _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.39.155(b)

Article 3. Workers' Compensation Review and Advisory Committee

3 AAC 30.200(d) is amended to read:

(d) A meeting of the committee may be called by or at the request of the chairperson, the director, or upon written request of three members. A notice stating the time, place, and purpose of the meeting must be sent to each member and the director at least 10 days before the date of the meeting. Regular meetings must be scheduled at least quarterly, [and] must take place in this state, **and are open to the public**. A person may participate telephonically. Five members constitute a quorum for the committee to conduct business at any meeting. The director will consider acts of a majority of the voting members present to be the acts of the committee as a whole.

3 AAC 30.200 is amended by adding a new subsection to read:

(e) The committee is not directly involved in the review and approval of rate, rule, or form filings submitted to the director under AS 21.39.041 or AS 21.42.120, however, a rating organization shall share with the committee details of any proposed filing before it is submitted to the director, unless the director waives this requirement. This section is not intended to restrict the advice or actions of the committee to matters related to rating organization rate, rule, or form filings. (Eff. 12/20/96, Register 140; am _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.39.060 AS 21.39.120
AS 21.39.155

Article 4. Workers' Compensation Loss Reimbursement Requirements

3 AAC 30 is amended by adding new sections to read:

Section

- 300. Applicability
- 310. Workers' compensation deductibles prohibited
- 320. Adjustment of claims
- 330. Reimbursement limits and aggregates
- 349. Definitions

3 AAC 30.300. Applicability. Except for an excess workers' compensation policy issued to an employer who holds a self-insurance certificate under AS 23.30.090, 3 AAC 30.300 – 3 AAC 30.349 applies to workers' compensation policies issued to an employer in this state. (Eff. ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.39.130 AS 23.30.025

3 AAC 30.310. Workers' compensation deductibles prohibited; reimbursement of losses or loss expenses allowed. (a) An insurer may not include a deductible in a policy of workers' compensation insurance providing coverage under AS 23.30.001 – 23.30.400 (Alaska Workers' Compensation Act).

(b) An insurer may include a provision in a policy of workers' compensation insurance providing coverage under AS 23.30.001 – 23.30.400 (Alaska Workers' Compensation Act) requiring an employer to reimburse the insurer for losses or loss expenses.

(c) A workers' compensation loss reimbursement policy is also subject to the requirements under 3 AAC 29.900. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.39.130 AS 21.42.075
AS 23.30.025 AS 23.30.030

3 AAC 30.320. Adjustment of claims. (a) An insurer shall handle the defense and settlement of all claims as if no reimbursement provision applies. An employer may not pay amounts directly to claimants or to another person other than the insurer or, if applicable, the insurer's third-party administrator, to settle workers' compensation obligations or to pay the associated settlement costs. An employer may not adjust or administer claims or control a third-party administrator or adjuster.

(b) An insurer shall pay claims and settlement costs notwithstanding the failure of an employer to reimburse the insurer or, if applicable, the insurer's third-party administrator.

(c) The cancellation or expiration of a loss reimbursement policy does not affect a person's obligations for injuries under the policy which arose before the policy's cancellation or expiration. (Eff. ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.42.075 AS 23.30.030

3 AAC 30.330. Reimbursement limits and aggregates. (a) An insurer shall specify in a loss reimbursement policy the

- (1) nature of losses for which an employer must reimburse the insurer; and
- (2) basis of the reimbursement limit.

(b) An insurer may limit the aggregate amount an employer must reimburse the insurer due to the aggregation of all of the claims arising during the policy period if the aggregate limitation is included in the same policy.

(c) If an insurer includes an aggregate limitation in a loss reimbursement policy, the insurer shall also include in the policy a provision providing for the proration of the aggregate limits if the insurer cancels the policy, unless

- (1) the aggregate limits are a function of the audited exposure; or
- (2) the insurer cancels the policy

(A) due to non-payment of premium; or

(B) for a reason set out in AS 21.36.220(b) associated with the 10 day notice of cancellation requirement.

(d) An employer, contracting with an insurer in a loss reimbursement policy, may not obtain insurance to cover the amounts the employer agreed to reimburse the insurer under the policy. (Eff. ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.36.220 AS 21.42.075

3 AAC 30.349. Definitions. In 3 AAC 30.300 – 3 AAC 30.349,

(1) "deductible" means a provision in an insurance policy where the policyholder must absorb or pay part of the insured loss before qualifying for recovery from the insurer under the policy;

(2) "excess workers' compensation policy" means a policy:

(A) issued by an insurer to an employer certified as a self-insurer under AS 23.30.090; and

(B) which reimburses the self-insured employer for amounts

(i) accepted by, imposed upon, or assumed by the employer under AS 23.30.001 – 23.30.400 for death, disablement, or injury to the employer's employees; and

(ii) above either a specific or an aggregate attachment point or self-insured retention, but the amounts do not, by themselves, satisfy the requirements under AS 23.30.025 or AS 23.30.075;

(3) "loss reimbursement" means a provision in a workers' compensation policy

that:

(A) maintains an insurer's entire obligation under the policy for payment of insured loss under AS 23.30.001 – 23.30.400; and

(B) provides that an insured employer will reimburse the insurer under the policy for the first part of the loss subject to an agreed upon limit;

(4) "loss reimbursement policy" means any workers' compensation policy containing a loss reimbursement provision, whether or not the loss reimbursement provision is effected via endorsement to a standard workers' compensation policy. (Eff. ____/____/____, Register _____)

Authority: AS 21.06.090 AS 21.42.075 AS 21.42.130

Chapter 31. Miscellaneous

Article 1. Fees

3 AAC 31.060(a)(11) is amended to read:

(11) initial [REGISTRAION] **service of process filing fee** of a risk retention group, \$1,000;

3 AAC 31.060(a)(12) is amended to read:

(12) annual **service of process filing fee** continuation of a risk retention group, \$200; (Eff. 6/2/88, Register 106; am 7/1/89, Register 110; am 7/1/92, Register 123; am 3/30/94, Register 129; am 3/15/97, Register 141; am 8/23/2001, Register 159; am 12/30/2006, Register 180; am 10/13/2011, Register 200; am 1/1/2014, Register 208; am 9/4/2014, Register 211; am 11/26/2015, Register 216; am 8/20/2016, Register 219; am 3/3/2018, Register 225; am 3/15/2018, Register 225; am ____ / ____ / ____, Register ____)

Authority: AS 21.06.090 AS 21.06.250 AS 21.27.010
AS 21.27.025 AS 21.34.040 AS 21.36.355
AS 21.59.140 AS 21.59.160 AS 21.59.200
AS 21.61.105 AS 21.61.109 AS 21.66.210
AS 21.75.045

Article 2. Filing Procedure for Forms, Rates, Manuals, Rating Plans, and Rules

3 AAC 31.200 is amended to read:

3 AAC 31.200. Applicability and scope. 3 AAC 31.200 - 3 AAC 31.299 apply to all persons who are required to file forms, rates, manuals, rating plans, rules, policies, certificates, or other documents under AS 21.39.040, 21.39.041, **21.39.043**, 21.39.210, 21.39.220; AS

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21.42.120, 21.42.123, 21.42.125; AS 21.51.405; AS 21.54.015; AS 21.57.080; AS 21.66.370, 21.66.450; AS 21.84.255; AS 21.86.070; AS 21.87.180, or 21.87.190. (Eff. 12/4/94, Register 132; am 11/12/2006, Register 180; am 3/26/2015, Register 213; am ____/____/____, Register ____)

Authority:	AS 21.06.090	AS 21.39.040	AS 21.39.041
	AS 21.39.043	AS 21.39.210	AS 21.39.220
	AS 21.42.120	AS 21.42.123	AS 21.42.125
	AS 21.51.405	AS 21.54.015	AS 21.57.080
	AS 21.66.370	AS 21.66.450	AS 21.84.255
	AS 21.86.070	AS 21.87.180	AS 21.87.190

3 AAC 31.205(b) is amended to read:

(b) If the director receives a filing **or other requested information** on a weekend or state holiday, or after 3:00 p.m. Alaska Time, the receipt date is the next working day. (Eff.

11/12/2006, Register 180; am 8/20/2016, Register 219; am ____/____/____, Register ____)

Authority:	AS 21.06.090	AS 21.39.040	AS 21.39.041
	AS 21.39.210	AS 21.39.220	AS 21.42.120
	AS 21.42.123	AS 21.42.125	AS 21.51.405
	AS 21.54.015	AS 21.57.080	AS 21.66.370
	AS 21.66.450	AS 21.84.255	AS 21.86.070
	AS 21.87.180	AS 21.87.190	AS 21.96.080

3 AAC 31.210(d)(1) is repealed:

(1) repealed ____ / ____ / ____;

3 AAC 31.210(d)(2) is repealed:

(2) repealed ____ / ____ / ____;

3 AAC 31.210(g) is amended to read:

(g) An insurer shall include in each applicable filing a cross-reference to other similar or related filings that are submitted simultaneously with the **subject** [NEW] filing, or other similar or related filings that have already been submitted. The filing must describe any differences between the new rates, rules, or forms in the **subject** [NEW] filing and any similar or related filing.

3 AAC 31.210(h) is amended to read:

(h) If a filing **contains** [IS] a revision to or replacement of an existing rate, rule, or form, the filing must include each assigned identification number under which the material proposed for revision is currently approved or authorized. The filing must also include a marked copy of the form, rule, or rate page showing the new material underlined and the deleted material with a line stricken through it, or by a similar method of identifying changes that has been approved by the director. A revised or replaced item that is not identified as required may not be approved or authorized for use.

3 AAC 31.210(i) is amended to read:

(i) If a filing is a resubmission of a prior filing that was withdrawn or disapproved, the filing must include the identification number assigned to the withdrawn or disapproved filing and must specifically address any questions or comments raised by the director with respect to the withdrawn or disapproved filing. The filing must also include a marked copy of the form, rule or rate page **identifying any revisions that have been made compared to the corresponding form, rule, or rate pages contained in the withdrawn or disapproved filing. The marked copy must follow the format described in subsection (h).** [SHOWING THE NEW MATERIAL UNDERLINED AND THE DELETED MATERIAL WITH A LINE STRICKEN THROUGH IT, OR BY A SIMILAR METHOD OF IDENTIFYING CHANGES THAT HAS BEEN APPROVED BY THE DIRECTOR. A REVISED OR REPLACED ITEM THAT IS NOT IDENTIFIED AS REQUIRED MAY NOT BE APPROVED OR AUTHORIZED FOR USE.]

3 AAC 31.210(o) is amended to read:

(o) A filing is not required if the only change to the form **or rule page** is a change to the insurer's logo, **letterhead information, pagination, or formatting that does not affect the text of the currently authorized or approved form, rule, or rate page and which is not subject to special formatting requirements.**

3 AAC 31.210 is amended by adding a new subsection to read:

(p) Responses to the director's questions must describe or otherwise clearly identify the changes proposed within the response and must update the information required by 3 AAC 31.221 or 3 AAC 31.225 that has changed. (Eff. 12/4/94, Register 132; am 11/12/2006, Register

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180; am 1/1/2011, Register 196; am 8/20/2016, Register 219; am ____/____/____, Register _____)

Authority:	AS 21.06.090	AS 21.39.040	AS 21.39.041	AS 21.39.210
	AS 21.39.220	AS 21.42.120	AS 21.42.123	AS 21.42.125
	AS 21.48.010	AS 21.54.060	AS 21.54.070	AS 21.57.080
	AS 21.66.370	AS 21.66.450	AS 21.84.255	AS 21.86.070
	AS 21.87.180	AS 21.87.190	AS 21.96.080	

3 AAC 31.215(b) is amended to read:

(b) The director will respond to a filing submitted by electronic mail with the receipt date and with the assigned identification number under 3 AAC 31.210(j). The appropriate timeline under AS 21.39.040, 21.39.041, 21.39.210, 21.39.220; AS 21.42.123, 21.42.125; **AS 21.51.405;** **AS 21.54.015;** AS 21.57.080; AS 21.66.370, 21.66.450; AS 21.84.255; AS 21.86.070; or AS 21.87.180 will apply based upon the receipt date stated in the director's response. (Eff.

11/12/2006, Register 180; am 8/20/2016, Register 219; am ____/____/____, Register _____)

Authority:	AS 21.06.090	AS 21.39.040	AS 21.39.041	AS 21.39.210
	AS 21.39.220	AS 21.42.120	AS 21.42.123	AS 21.42.125
	AS 21.51.405	AS 21.54.015	AS 21.57.080	AS 21.66.370
	AS 21.66.450	AS 21.84.255	AS 21.86.070	AS 21.87.180
	AS 21.87.190	AS 21.96.080		

3 AAC 31.217(b) is amended to read:

(b) If the electronic filing system becomes unavailable for use, the director may extend the review timelines under AS 21.39.040, 21.39.041, 21.39.220; AS 21.42.123, 21.42.125; **AS 21.51.405; AS 21.54.015;** AS 21.57.080; AS 21.66.370, 21.66.450; AS 21.84.255; AS 21.86.070; or AS 21.87.180 by an additional working day for each day the system is unavailable. For purposes of identifying the additional working day under the extended timeline, the director will use the procedure set out in 3 AAC 31.205(b). (Eff. 11/12/2006, Register 180; am 8/20/2016, Register 219; am ____/____/____, Register ____)

Authority:	AS 21.06.090	AS 21.39.040	AS 21.39.041
	AS 21.39.210	AS 21.39.220	AS 21.42.120
	AS 21.42.123	AS 21.42.125	AS 21.51.405
	AS 21.54.015	AS 21.57.080	AS 21.66.370
	AS 21.66.450	AS 21.84.255	AS 21.86.070
	AS 21.87.180	AS 21.87.190	AS 21.96.080

3 AAC 31.225 is repealed and readopted to read:

3 AAC 31.225. Property, casualty, surety, marine, mortgage guaranty, and title insurance transmittal document. (a) The transmittal document or transmittal document information in the case of filings submitted using an electronic filing system approved by the director under AS 21.96.080 required under 3 AAC 31.210(a) must include:

(1) the name of the rating organization, if the filing is made by a rating organization;

(2) the National Association of Insurance Commissioners' group and company numbers and, if the filing is not made by a rating organization, the names of the companies making the filing;

(3) the name of the person to contact regarding the filing;

(4) a brief description of the purpose of the filing and any changes that the filing will introduce;

(5) the date the filing is made;

(6) whether the filing is a rate, rule, or form filing;

(7) the type of insurance to which the filing applies;

(8) the specific product to which the filing applies;

(9) the insurer's identification number for the filing, if any;

(10) identification of whether each form, rule, or rate page is a replacement and, if so and if available, the division's identification number for previous filing;

(11) the requested effective date;

(12) the insurer's identification number of any corresponding filings or filings that are substantially similar, in whole or in part, including filings described in 3 AAC 31.210(f)(2);

(13) if the filing references a rating organization filing, the rating organization's name, the rating organization's identification number, and the division's identification number of the referenced filing;

(14) if the filing is submitted for information purposes under 3 AAC 29.500 - 3 AAC 29.550, a statement to that effect; and

(15) if the filing is a resubmission of a prior filing that was withdrawn or disapproved, the identification number assigned to the withdrawn or disapproved filing.

(b) If the filing is a form filing, in addition to the requirements of (a) of this section, the transmittal document must include:

- (1) the form number, edition date, and name of each form;
- (2) whether the filing is submitted for consideration subject to prior approval under AS 21.42.123 or to file and use under AS 21.42.125; and
- (3) whether a similar filing has been made in the insurer's state of domicile and the status of the filing in that state.

(c) If the filing is a rate or rule filing, in addition to the requirements of (a) of this section, the transmittal document must include:

- (1) whether the filing is submitted for consideration subject to prior approval under AS 21.39.041, to flex-rating under AS 21.39.210, or to file and use under AS 21.39.220;
- (2) the overall effect of the rate level change requested in the filing, if applicable; and
- (3) the maximum and minimum rate changes an individual policyholder may receive.

(d) Responses to the director's questions on a filing submitted by electronic mail must include:

- (1) the name of the rating organization, if the response is made by a rating organization;
- (2) the National Association of Insurance Commissioners' group and company numbers and, if the filing is not made by a rating organization, the name of the company making the filing;
- (3) the name of the person to contact regarding the response;

- (4) a description of the changes proposed in the response;
- (5) the date the response is made;
- (6) whether the filing is a rate, rule, or form filing;
- (7) the type of insurance to which the filing applies;
- (8) the specific product to which the filing applies;
- (9) the insurer's identification number for the filing, if any;
- (10) the division's identification number assigned to the filing;
- (11) the requested effective date; and
- (12) if the filing is submitted for information purposes under 3 AAC 29.500 - 3

AAC 29.550, a statement to that effect.

(e) Responses to the director's questions must revise any transmittal document information required by (a), (b), or (c) of this section, when the information requires revision to accurately reflect the proposal as amended by the response. (Eff. 11/12/2006, Register 180; am 8/20/2016, Register 219; am ____ / ____ / ____, Register ____)

Authority:	AS 21.06.090	AS 21.39.040	AS 21.39.041
	AS 21.39.210	AS 21.39.220	AS 21.42.120
	AS 21.42.123	AS 21.42.125	AS 21.66.370
	AS 21.66.450	AS 21.96.080	

3 AAC 31.230 is amended to read:

(a) In addition to the requirements under 3 AAC 31.200 - 3 AAC 31.217 and 3 AAC 31.225, a property, casualty, surety, marine, or mortgage guaranty rate filing must include

(1) premium and loss experience, both nationwide and specifically for Alaska, shown separately by each year in the experience period used or with a full explanation if that information is not available; in the case of a filing for more than one company, the premium and loss experience of the different companies may be combined if an explanation is provided;

(2) expense information, both nationwide and specifically for Alaska [THIS STATE], if available; expense information must be broken out in detail at least as specific as the expense groups shown on Part III of the insurance expense exhibit of the annual statement required by AS 21.09.200; if loss adjustment expenses are included in the loss experience, that fact must be clearly explained;

(3) support showing how investment income was incorporated into the proposed rate or loss cost adjustment;

(4) an explanation of the actuarial methodology used in developing an indicated rate [CHANGE], rating component, or loss cost adjustment, including a description of any trending or credibility procedures used, as well as the role of judgment in the formulation of a final rate proposal;

(5) support for any deviation included in a filing, whether the deviation is between companies or from a rating organization filing;

(6) any other information that the company considers relevant, including reference to rating organization experience or published industry statistics, if appropriate; and

(7) any other information requested by the division in support of the filing.

3 AAC 31.230 is amended by adding a new subsection to read:

(b) If the filing is submitted for flex-rating under AS 21.39.210, the filing must also include an exhibit detailing the cumulative rate change of all the rate filings that became effective or will become effective within the 12 months immediately preceding the proposed effective date, including the effect of the rate change of the subject filing. The exhibit must calculate the rate change separately for each company to which the filing applies and must include the division's identification numbers for each of the applicable historical rate filings. (Eff. 12/4/94, Register 132; am 11/12/2006, Register 180; am 8/20/2016, Register 219; am _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.09.200 AS 21.39.040
AS 21.39.041 AS 21.39.060 AS 21.39.070
AS 21.39.130 AS 21.39.210 AS 21.39.220
AS 21.66.370

3 AAC 31.240 is amended to read:

In addition to the requirements under 3 AAC 31.200 - 3 AAC 31.217, 3 AAC 31.225, and 3 AAC 31.230, a filing by a participating insurer of a rating organization that aims to modify the rating organization's filed and approved loss costs for a **type of insurance** [LINE OF BUSINESS] by applying a loss cost adjustment must include copies of the loss cost adjustment form provided by the director. An explanation, including information upon which the insurer relies to support the deviation, must be included regarding any deviation contained in the filing. (Eff. 12/4/94, Register 132; am 1/17/98, Register 145; am 11/12/2006, Register 180; am _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.39.040 AS 21.39.041

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AS 21.39.060 AS 21.39.070 AS 21.39.130
AS 21.39.210 AS 21.39.220

3 AAC 31.250(a) is repealed:

(a) Repealed ____/____/____. (Eff. 11/12/2006, Register 180; am 3/26/2015,

Register 213; am 8/20/2016, Register 219; am ____/____/____, Register ____)

Authority: AS 21.06.090 AS 21.42.120 AS 21.42.123
AS 21.42.125 AS 21.42.160 AS 21.66.450
AS 21.86.070 AS 21.87.180

3 AAC 31 is amended by adding a new section to read:

3 AAC 31.260. Fees. A licensee or their affiliate or subsidiary is not prohibited from charging and collecting fees included in an insurer’s rate filing that has been properly filed. (Eff. ____/____/____, Register ____)

Authority: AS 06.40.010 AS 06.40.020 AS 21.06.090
AS 21.36.490

3 AAC 31.299 is repealed and readopted to read:

3 AAC 31.299. Definitions. In 3 AAC 31.200 - 3 AAC 31.299,

(1) a “replaced” or “revised” form, rule, or rate page:

(A) means a form, rule, or rate page with the same basic content or effect as a currently authorized or approved form, rule, or rate page and that will be used in place of the currently authorized or approved form, rule, or rate page regardless of

whether the name or other identifying information associated with the form, rule, or rate is changing;

(B) does not include a form, rule, or rate page

(i) with changes limited to the insurer's logo, letterhead information, pagination, or formatting that does not affect the text of the currently authorized or approved form, rule, or rate page, and which is not subject to special formatting requirements; or

(ii) defined under 3 AAC 31.221(d)(2) or (3).

(2) "rate filing" includes a loss cost filing. (Eff. 3/26/2015, Register 213; am _____/_____/_____, Register _____)

Authority:	AS 21.06.090	AS 21.42.120	AS 21.42.123
	AS 21.42.125	AS 21.57.080	AS 21.66.450
	AS 21.84.255	AS 21.86.070	AS 21.87.180

Article 7. General Provisions

3 AAC 31.900 is amended by adding a new paragraph to read:

(8) "type of insurance" means, for property and casualty insurers, the Type of Insurance as defined and identified within the applicable *Uniform Property & Casualty Product Coding Matrix* adopted by the National Association of Insurance Commissioners revised as of January 1, 2017, and adopted by reference. (Eff. 12/4/94, Register 132; am 4/20/97, Register 142; am 11/26/2015, Register 216; am _____/_____/_____, Register _____)

Authority: AS 21.06.090 AS 21.09.200

Editor's note: The National Association of Insurance Commissioners' *Uniform Property & Casualty Product Coding Matrix*, 2017 edition, may be obtained from the National Association of Insurance Commissioners; 1100 Walnut Street, Suite 1500; Kansas City, Missouri 64106. The document may also be viewed electronically on the National Association of Insurance Commissioners' website at https://www.naic.org/documents/industry_pcm_p_c_2017.pdf.