

ADDITIONAL REGULATION NOTICE INFORMATION  
(AS 44.62.190(d))

1. Adopting agency: Department of Labor and Workforce Development, Alaska Workers' Compensation Board
2. General subject of regulation: Updates to procedures, compliance with statutes and expansion of definitions.
3. Citation of regulation (may be grouped): 8 AAC 45.030; 8 AAC 45.032; 8 AAC 45.092-093; 8 AAC 45.122; 8 AAC 45.136; 8 AAC 45.174; 8 AAC 45.184; 8 AAC 45.210; 8 AAC 45.220; 8 AAC 45.900
4. Department of Law file number, if any: 2021200038
5. Reason for the proposed action:  
 Compliance with federal law or action (identify): \_\_\_\_\_  
 Compliance with new or changed state statute  
 Compliance with federal or state court decision (identify): \_\_\_\_\_  
 Development of program standards  
 Other (identify): Updating procedures.
6. Appropriation/Allocation: DOLWD/Workers' Compensation
7. Estimated annual cost to comply with the proposed action to:  
A private person: -0-  
Another state agency: -0-  
A municipality: -0-
8. Cost of implementation to the state agency and available funding (in thousands of dollars):

	Initial Year	Subsequent
	FY _____	Years
Operating Cost	\$ <u>0</u>	\$ <u>0</u>
Capital Cost	\$ <u>0</u>	\$ <u>0</u>
1002 Federal receipts	\$ <u>0</u>	\$ <u>0</u>

1003 General fund match	\$ <u>0</u>	\$ <u>0</u>
1004 General fund	\$ <u>0</u>	\$ <u>0</u>
1005 General fund/ program	\$ <u>0</u>	\$ <u>0</u>
Other (identify)	\$ <u>0</u>	\$ <u>0</u>


9. The name of the contact person for the regulation:

Name: Alexis Hildebrand  
 Title: Administrative Officer II  
 Address: P.O. Box 115512 Juneau, AK 99811-5512  
 Telephone: (907) 465-6059  
 E-mail address: alexis.hildebrand@alaska.gov

10. The origin of the proposed action:

Staff of state agency  
 Federal government  
 General public  
 Petition for regulation change<sup>7</sup>  
 Other (identify): \_\_\_\_\_

11. Date: 2/2/2021

Prepared by:   
 [signature]

Name: Charles Collins  
 Title: Director  
 Telephone: 907-465-2790