

FLORIDA FIREFIGHTER CANCER BENEFIT PROGRAM

Frequently Asked Questions

Background of the Cancer Benefit Program (the Program) sponsored by the Florida Municipal Insurance Trust (FMIT)

- Q. Why did FMIT partner with Hartford to create a cancer benefit program for eligible Florida firefighters?
- A. FMIT's **Florida Firefighter Cancer Benefit Program** will help all local government employers of firefighters in several key ways. First, employers can instantly comply with the significant lump-sum benefit requirement of the new Law and reduce its related financial burden. Employers will also obtain lower pricing through FMIT's group purchasing platform. Additionally, FMIT's partnership with the Hartford will provide employers with seamless benefit administration. The Hartford is a leading provider of Group Life Insurance and Disability benefits, has been recognized by industry trade groups as the #2 insurer in the United States, and is an experienced leader in providing best-in-class cancer plan administration.
- Q. Is the Program available for all **eligible employed, full-time firefighters**?
- A. Yes, provided they satisfy the law's required term of employment.
- Q. Is the Program available for volunteer firefighters?
- A. No.
- Q. Is the FMIT/Hartford Program the only source of insurance compliant with the Law?
- A. Florida Statutes § 112.1816 (the Law) allows for other sources of insurance provided they are approved by the Florida Office of Insurance Regulation as being compliant with the Law.

Purpose of the Program

- Q. What is the purpose of the Program?
- A. The Program provides coverage that pays a \$25,000 lump-sum benefit to eligible firefighters when diagnosed with a specified cancer, as mandated under the Law.
- Q. What is the effective date of the coverage under the Law?
- A. Coverage begins on July 1, 2019.

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- Q. Who should pay for the lump-sum insurance coverage under the Law?
A. The Law requires the local governmental employer to provide the lump-sum benefit, directly or through insurance such as this Program
- Q. What cancers are covered under the Law?
A. The Law specifically lists 21 types of cancer compensable under the Law:
1. Bladder cancer
 2. Brain cancer
 3. Breast cancer
 4. Cervical cancer
 5. Colon cancer
 6. Esophageal cancer
 7. Invasive skin cancer
 8. Kidney cancer
 9. Large intestinal cancer
 10. Lung cancer
 11. Malignant melanoma
 12. Mesothelioma
 13. Multiple myeloma
 14. Non-Hodgkin's lymphoma
 15. Oral cavity and pharynx cancer
 16. Ovarian cancer
 17. Prostate cancer
 18. Rectal cancer
 19. Stomach cancer
 20. Testicular cancer
 21. Thyroid cancer.
- Q. Does the Law specify a benefit amount less than \$25,000 for less invasive cancers?
A. With the exception of the Law's requirement that skin cancer be "Invasive Skin Cancer" to qualify, the \$25,000 lump-sum benefit does not vary based on cancer severity.
- Q. Are cancers diagnosed prior to the July 1, 2019 effective date covered by the Program?
A. No. Only cancers diagnosed on or after the effective date are covered. Additionally, the firefighter must be eligible for coverage and enrolled in the Program's coverage at the time of diagnosis.

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Compliance with the Law

- Q. Is the government of Florida creating an insurance program at the State level?
A. No. Any private insurance company offering a program must be approved by the Florida Office of Insurance Regulation.
- Q. Has the FMIT/Hartford Program been approved by Florida regulators?
A. Yes. The FMIT/Hartford Program is compliant with the Law and approved by the Florida Office of Insurance Regulation.
- Q. How do I know if I am required to comply with the Law?
A. In the most basic terms, as a local governmental employer, if you employ eligible firefighters then you are subject to the Law.
- Q. I've determined that I am subject to the Law. How do I comply?
A. There are two methods: First, insurance coverage that complies with the Law can be purchased via the Program or from another insurer. The insurance offered under the Program has been specifically created to conform to the mandates of the Law. Alternatively, the local governmental employer can attempt to create an internal process of directly receiving these claims as they occur, approving eligibility and paying the lump-sum benefits directly to eligible firefighters as required by the Law.

Eligibility

- Q. How does the Law define "firefighter"?
A. "Firefighter" means an individual employed as a full-time firefighter within the fire department or public safety department of an employer whose primary responsibilities are the prevention and extinguishing of fires; the protection of life and property; and the enforcement of municipal, county, and state fire prevention codes and laws pertaining to the prevention and control of fires.
- Q. Is the Program available to all **employed full-time firefighters**?
A. A currently employed firefighter is eligible for coverage under the Program if the following criteria are met:
- a. The firefighter has been employed by his or her local government employer for at least five continuous years as a full time firefighter; and,
 - b. Has not used tobacco products for at least the preceding five years; and,
 - c. Has not been employed in any other position in the preceding five years which is proven to create a higher risk for any cancer

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- Q. Is a volunteer firefighter who has served as an employee firefighter for some part of the required 5-year period eligible?
- A. Eligible firefighters must have served as a full-time firefighter employee of the local government employer for at least five continuous years. Firefighters who have served only on a volunteer-firefighter basis are not eligible for the Program under the Law.
- Q. Who is responsible for determining whether an employed full-time firefighter is eligible for coverage under the Program?
- A. The employer is responsible for determining whether a firefighter is eligible to participate in the Program, and claims are subject to final review and approval by the Program.
- Q. How is “employer” defined in the Law?
- A. Following Florida Statute 112.191, the term “employer” means a state board, commission, department, division, bureau or agency, or a county, municipality, or other political subdivision of the state.
- Q. Will a firefighter who satisfied the five-year service requirement prior to 7/1/19, in addition to the other eligibility requirements, be covered under the Program as of 7/1/19?
- A. Yes.
- Q. If a firefighter satisfies the eligibility requirements after 7/1/19, when will their coverage be effective under the Program?
- A. Firefighters who satisfy the eligibility requirement after 7/1/19 will be added as a covered firefighter the date they fulfill any missing eligibility requirements.
- Q. Is the employer required to continue the lump-sum coverage when an eligible firefighter ends employment in the fire service?
- A. Yes. The employer must continue the lump-sum benefit for an eligible firefighter for 10 years following his or her separation from the fire service.
- Q. If a firefighter, covered under the Program, decides to leave the career service and becomes a volunteer firefighter, is the firefighter eligible for coverage?
- A. If and when firefighters satisfy the eligibility requirements of the Program, they are covered under the continuation

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provision for 10 years following separation from the fire service. However, to remain eligible, they must remain in their employer-sponsored health plan or group health insurance trust fund and may not become employed as a firefighter subsequent to their departure from the career service as noted in the question.

- Q. If a newly active firefighter serves three years with one department then moves to a second department and satisfies the 5-year full-time employment eligibility requirements, which fire department pays the benefit premium for the firefighter?
- A. The firefighter's current employer is responsible for premium payment. So in this scenario, once the firefighter accrues 5 years of service, the subsequent employer would be responsible for any benefits owed under the Law.
- Q. If a career firefighter is covered under the Program for a number of years with City of Sunflower, separates from employment with the City of Sunflower for a period of time, and then returns to firefighter service with City of Sunflower, does the firefighter need to re-satisfy eligibility criteria?
- A. The firefighter would be eligible for continuation coverage for up to 10 years from the date of separation from City employment, as long as he or she met the eligibility criteria for the Program initially (we assume her or she did), and he or she was not subsequently employed as a firefighter following the separation from City employment. He or she would not need to re-satisfy the eligibility requirements upon return to full-time duty. Once the period of separation from City employment exceeds 10 years, however, the firefighter would then have to re-establish eligibility under the Program, including the 5-year period of continuous full-time firefighter employment.
- Q. An eligible firefighter separates from employment with the City of Sunflower and the employer makes available the required 10-year continuation coverage under the Program. The firefighter then returns to active service for a period of time. After a period of time, the firefighter leaves the service a second time. Would the firefighter's second continuation period be 10 years or the balance of continuation?
- A. The Law only mandates that a 10-year period of continuation be provided. Therefore, as long as the firefighter continues to meet all eligibility requirements for the Program upon his or her second separation, the second post-employment continuation period

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would necessarily be 10 years.

- Q. When a covered firefighter separates from employment with one employer fire department and moves to another with *no break in service*, is the prior employer fire department required to continue coverage for 10 years?
- A. The prior employer fire department is not required to continue coverage for 10 years for an eligible firefighter who leaves and begins service as a firefighter with another employer fire department without a break in service. The new employer fire department is required to assume responsibility for assuring all firefighter eligibility requirements of the Law are met, including providing any benefits owed under the Law and/or paying Program coverage premiums for such newly hired firefighter.
- Q. When a covered firefighter leaves one department and moves to another with *a break in service*, is the prior department required to continue coverage for 10 years?
- A. Yes, for up to 10 years unless the firefighter is re-employed as a firefighter sooner. In the case of re-employment, continuation coverage would end upon re-employment.

Features of the FMIT/Hartford Program

- Q. Is the Program compliant with the Law?
- A. Yes. The Program provides a lump-sum benefit that complies with the Law.
- Q. Has the Office of Insurance Regulation approved the plan design and rates marketed under the Program as compliant with the Law?
- A. Yes. The Office of Insurance Regulation approved the Program's three plan options and rates:
- a. **Plan 1** - Covers only the cancers listed in the Law at an annual rate of \$74.88;
 - b. **Plan 2** – Covers only the cancers listed in the Law with a 2X recurrence provision (pays out for two diagnoses) at an annual rate of \$85.68;
 - c. **Plan 3** – Covers cancers listed in the Law and all other cancer (excluding non-invasive melanoma) with a 2X recurrence provision (pays out for two diagnoses) at an annual rate of

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\$98.28.

- Q. Does the cost for each eligible firefighter vary by age, occupation, or other distinctions?
- A. No. The annual cost for each eligible firefighter does not vary under the Program once a plan is selected by the employer.
- Q. Does the annual cost of the 10-year continuation coverage vary from the cost for employed full-time firefighters?
- A. The 10-year continuation coverage cost is the same as the cost for employed full-time firefighters.
- Q. For the 2X recurrence benefit, how much time must separate the two diagnoses to allow for more than one payout?
- A. There must be at least 90 days between separate diagnoses.
- Q. What is the maximum amount of benefits a firefighter would receive under the lump-sum benefit with 2x recurrence?
- A. A firefighter would receive a maximum of \$50,000.
- Q. If a firefighter dies of cancer without filing a claim for the lump-sum benefit, would the benefit still be paid?
- A. Yes, provided the firefighter satisfied all eligibility requirements for coverage under the Program.

Premium Administration

- Q. Is the State of Florida paying for any of the employer's costs for the Program?
- A. No.
- Q. How do I obtain a quote/proposal through the Program?
- A. The employer will provide the Program a roster of eligible firefighters with name, date of birth and date of hire. The Program will then send back a formal proposal. Any interested local government employer may call 833.861.9424 for more information.
- Q. How is the premium calculated?
- A. The premium is calculated based upon the number of eligible firefighters (both current full-time employees and former full-time employees to be covered in the 10-year continuation coverage group). The employer communicates to the Program the entire eligible firefighter roster and plan option chosen under the Program. That number is then multiplied by the

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annual rate to calculate premium.

Q. When are premiums due?

A. The Program works on an annual billing cycle with an October 1st effective date. Those participating in the Program will receive an electronic invoice prior to October 1st. Premium is due 30 days after receipt of the invoice.

Q. Where are premiums sent?

A. Participating governmental employers will remit premiums to FMIT once each year.

Claims Administration

Q. How does a firefighter submit a claim under the Program?

A. The claims submission process is broken out below:

1. A firefighter must submit a claim directly to the Hartford;
2. The firefighter will contact the Hartford for claim filing instructions and complete their part of the form, supplying the contact information of their employer and attending physician;
3. Hartford will review the master roster (database of names of participating firefighters and their employer) to determine eligibility. If the name appears on the master roster, Hartford then processes the claim;
4. If the name of the firefighter does not appear on the master roster, Hartford will contact the employer to confirm eligibility of the firefighter;
5. Hartford will direct the firefighter to contact their oncologist for medical records supporting the diagnosis;
6. If Hartford requires additional records, they will follow up with the attending physician for any necessary medical records.

Q. Is the FMIT involved in claim administration?

A. No. The Hartford will manage information received from firefighter claimants, the submitted and verified rosters from the local government employer entity and medical records of the claimant's attending physician.

Questions Regarding the Program

Q. If I have questions, how do I contact the Program directly?

A. You may contact the Program directly by the following

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methods:

1. The Program website at <https://www.thehartford.com/resources/gb/florida-firefighters;>
2. A call center is established to answer any questions via telephone toll free – 833.861.9424;
3. An email address is available to forward any written questions – FFCP@flcities.com