



**REQUEST FOR COVERAGE PURSUANT TO
FLORIDA FIREFIGHTER CANCER
& DEATH BENEFIT LAWS**

Marketed By:
UNITED BADGES
INSURANCE SERVICES

Name of Policyholder: Marion County Board of County Commissioners / Marion County Fire Rescue (OPTION 1)

Mailing Address: 521 SE 26th Court

City: Ocala State: Florida Zip Code: 34470

Contact Person: Thomas Futch Position/Title: Risk Manager

Email Address: thomas.futch@marionfl.org Phone Number: 352-438-2341

Eligibility Descriptions:

	Non-Tobacco Lives	Tobacco Lives	Total Lives
--	-------------------	---------------	-------------

Class 1: An active full-time Firefighter (as defined below)

Estimated Number of Class 1 Firefighters with at least five (5) continuous years of employment as a Firefighter:	303	0	303
Estimated Number of Class 1 Firefighters eligible for the Line of Duty Cancer Death Benefit:	480	0	480

Class 2: After having qualified as a Firefighter in Class 1, a Firefighter whose employment has terminated shall remain eligible for 10 years following the date on which the Firefighter terminates employment.

Estimated Number of Class 2 Firefighters with at least five (5) continuous years of employment prior to termination as a Firefighter:	19	0	19
Estimated Number of Class 2 Firefighters eligible for the Line of Duty Cancer Death Benefit:	19	0	19

Class 3: An active full-time Civilian Fire Service Employee (as defined below)

Estimated Number of Class 3 Civilian Fire Service Employees with at least five (5) continuous years of employment as a Civilian Fire Service Employee:	3	0	3
Estimated Number of Class 3 Civilian Fire Service Employees eligible for the Line of Duty Cancer Death Benefit:	3	0	3

Class 4: After having qualified as a Civilian Fire Services Employee in Class 3, a Civilian Fire Services Employee whose employment has terminated shall remain eligible for 10 years following the date on which Civilian Fire Services Employee terminates employment.

Estimated Number of Class 4 Civilian Fire Service Employees with at least five (5) continuous years of employment prior to termination as a Civilian Fire Service Employee:	0	0	0
Estimated Number of Class 4 Civilian Fire Service Employees eligible for the Line of Duty Cancer Death Benefit:	0	0	0

Total Estimated Covered Lives with at least five (5) continuous years of employment:	325	0	325
Total Estimated Covered Lives eligible for the Line of Duty Cancer Death Benefit:	502	0	502

Do you wish to purchase Statutory Cancer coverage (21 cancers) or coverage for expanded cancers?	Statutory 21 Cancers
Do you wish to purchase a Lifetime Maximum Benefit of \$50,000 or \$75,000?	\$75,000

Coverage Desired
(Select Y/N for each):

	Cost Per Benefit
<input type="checkbox"/> Y <input type="checkbox"/> N Line of Duty Cancer Initial Diagnosis Lump Sum Benefit \$25,000:	\$36,172.50
<input type="checkbox"/> Y <input type="checkbox"/> N Line of Duty Cancer Expense Reimbursement Benefit up to \$12,000:	\$15,356.25
<input type="checkbox"/> Y <input type="checkbox"/> N Additional Diagnosis Benefit up to \$25,000:	\$8,360.63
<input type="checkbox"/> Y <input type="checkbox"/> N Recurrence Diagnosis Benefit up to \$25,000:	\$8,360.63
<input type="checkbox"/> Y <input type="checkbox"/> N Line of Duty Cancer Death Benefit - Class 1 & 3 Only \$75,000:	\$33,689.25
<input type="checkbox"/> Y <input type="checkbox"/> N Line of Duty Cancer Death Benefit - Class 2 & 4 Only \$75,000:	\$3,819.00

Effective Date Desired: 10/1/2024 Total Annual Premium: \$97,397.63

Signature of Authorized Personnel: _____ Date Signed: _____

Please note: product available for group sizes over 50. For smaller groups, please contact Allen Durham using the information below.

An adjustment premium invoice may be issued if the actual number of eligible lives during an applicable policy term exceeds +/- 25% of the number of estimated eligible lives utilized for initial premium determination at policy term inception.

Civilian Fire Service Employee means non-firefighting employee of a fire department or a public safety department of an Employer whose primary responsibilities are supporting those who provide 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.

Coinsurance means the percentage of costs of a covered health care service the Insured Person must pay (20%, for example) after he or she has paid the Deductible.

Copayment means the fixed amount (\$20, for example) that the Insured Person must pay for a covered health care service after he or she has paid the Deductible.

Deductible means the amount the Insured Person must pay for covered health care services before his or her Employer-sponsored health plan or Employer-sponsored group health insurance trust fund will pay a claim.

Diagnosed/Diagnosis means a definitive and unequivocal diagnosis identifiable by a code under the most current ICD code structure made by a Physician who specializes in the condition for which benefits are being claimed: (1) based upon the use of clinical and/or laboratory investigations as supported by the Insured Person's medical records; and (2) meeting any Diagnostic Requirements set forth in this Policy for Line of Duty Cancer. The disease or infirmity shall be presumed to have been caused by or to have resulted from the work performed. This presumption shall be rebuttable by evidence meeting judicial standards.

Employer means a state board, commission, department, division, bureau or agency, or a county, municipality, or other political subdivision of the state.

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.

Lifetime Maximum Benefit means the maximum dollar amount this Policy and any attached riders will pay in benefits to an Insured Person during his or her lifetime. The Lifetime Maximum Benefit does not apply to the Line of Duty Cancer Death Benefit.

Line of Duty Cancer means: Bladder cancer, Brain cancer, Breast cancer, Cervical cancer, Colon cancer, Esophageal cancer, Invasive skin cancer, Kidney cancer, Large intestinal cancer, Lung cancer, Malignant melanoma, Mesothelioma, Multiple myeloma, Non-Hodgkin's lymphoma, Oral cavity and pharynx cancer, Ovarian cancer, Prostate cancer, Rectal cancer, Stomach cancer, Testicular cancer, Thyroid cancer.

LINE OF DUTY CANCER BENEFITS OFFERED:

Benefit Amount:

Line of Duty Cancer Initial Diagnosis Benefit		\$25,000 Lump Sum
Line of Duty Cancer Expense Reimbursement Benefit	Up to	\$12,000
Line of Duty Cancer Additional Diagnosis Benefit	Up to	\$25,000 Lump Sum
Line of Duty Cancer Recurrence Diagnosis Benefit	Up to	\$25,000 Lump Sum
Lifetime Maximum Benefit		\$75,000
Line of Duty Cancer Death Benefit - Classes 1 and 3 Only		\$75,000 Lump Sum
Line of Duty Cancer Death Benefit - Classes 2 and 4 Only		\$75,000 Lump Sum

Line of Duty Cancer Initial Diagnosis Benefit

If, while coverage under this Policy is in force, an Insured Person is Diagnosed with Line of Duty Cancer, by a Physician in the medical specialty appropriate for the type of cancer Diagnosed, the Company will pay the Benefit Amount shown in the Schedule of Benefits subject to the Lifetime Maximum Benefit, Diagnostic Requirements and Benefit Payment Conditions.

Once a Line of Duty Cancer has been so Diagnosed and an Initial Diagnosis Benefit has become payable to an Insured Person, no benefits are payable to that Insured Person with respect to a subsequently Diagnosed recurrence of the same Line of Duty Cancer or a subsequently Diagnosed separate Line of Duty Cancer.

Payment of benefits upon the Diagnosis of Line of Duty Cancer is subject to:

1. the Diagnosis is made while the Insured Person's coverage is in force under the Policy;
2. the Insured Person has been employed as a Firefighter with the Employer for at least five (5) continuous years; and
3. the Insured Person has not been employed in any other position in the five (5) years preceding Diagnosis which is proven to create a higher risk for any cancer.

If an Insured Person terminates employment with the Employer, the Line of Duty Cancer Initial Diagnosis Benefit is payable upon Diagnosis of Line of Duty Cancer for 10 years following the date on which the Firefighter terminates his or her employment.

After termination of employment, payment of benefits upon the Diagnosis of Line of Duty Cancer is subject to:

1. the Diagnosis is made while the Insured Person's coverage is in force under the Policy;
2. after termination of employment, the Insured Person continued coverage in the Employer-sponsored health plan or Employer-sponsored group health insurance trust fund;
3. after termination of employment, the Insured Person was not subsequently employed as a Firefighter;
4. prior to termination of employment, the Insured Person was employed as a Firefighter with the Employer for at least five (5) continuous years; and
5. the Insured Person has not been employed in any other position in the five (5) years preceding Diagnosis which is proven to create a higher risk for any cancer.

Line of Duty Cancer Expense Reimbursement Benefit

If, while coverage under this Policy is in force, an Insured Person is Diagnosed with Line of Duty Cancer and a Line of Duty Cancer Initial Diagnosis Benefit is payable under this Policy, the Company will pay the Benefit Amount shown in the Rider Schedule subject to the Lifetime Maximum Benefit, Diagnostic Requirements and Benefit Payment Conditions. The Company will reimburse the following out-of-pocket expenses incurred by an Insured Person due to the treatment of Line of Duty Cancer: Deductible, Coinsurance, or Copayment. The Company shall not pay more than the Benefit Amount shown in the Rider Schedule for all out-of-pocket expenses resulting from the same Line of Duty Cancer.

In addition to any exclusions, conditions or limitations provided under the Policy, no Benefits shall be payable for the following treatments or services, unless coverage is specifically provided:

1. cosmetic surgery, except for reconstructive surgery needed as the result of a Line of Duty Cancer;
2. any elective or routine treatment, surgery, health treatment, or examination, including any service, treatment or supplies that:
 - (a) are deemed by the Company to be experimental or investigational; and
 - (b) are not recognized and generally accepted medical practice in the United States;
3. services or treatment provided by persons who do not normally charge for their services, unless there is a legal obligation to pay.

Line of Duty Cancer Additional Diagnosis Benefit

If, while coverage under this Policy is in force, an Insured Person is subsequently Diagnosed with a separate Line of Duty Cancer from the initial Line of Duty Cancer for which a Line of Duty Cancer Initial Diagnosis Benefit has been paid under this Policy, the Company will pay the Benefit Amount shown in the Policy Schedule of Benefits subject to the Lifetime Maximum Benefit, Diagnostic Requirements and Benefit Payment Conditions.

Payment of benefits upon the Diagnosis of an additional Line of Duty Cancer is subject to the following:

1. The subsequently Diagnosed Line of Duty Cancer must be medically unrelated to the initial Line of Duty Cancer; and
2. The second date of Diagnosis must occur ninety (90) days or more after the initial date of Line of Duty Cancer Diagnosis.

Line of Duty Cancer Recurrence Diagnosis Benefit

If, while coverage under this Policy is in force, an Insured Person is subsequently Diagnosed with a recurrence of the same Line of Duty Cancer for which a Line of Duty Cancer Initial Diagnosis Benefit has been paid under this Policy, the Company will pay the Benefit Amount shown in the Policy Schedule of Benefits subject to the Lifetime Maximum Benefit, Diagnostic Requirements and Benefit Payment Conditions.

Payment of benefits upon the recurrence of a Line of Duty Cancer is subject to the following:

1. The subsequent Diagnosis must occur ninety (90) days or more after the initial Line of Duty Cancer Diagnosis; and
2. The Insured Person has not had symptoms of or been treated for the Line of Duty Cancer during the ninety (90) days before the date of the subsequent Diagnosis. For the purposes of this Policy, "treatment free" means that all primary treatment for the initial Line of Duty Cancer (including chemo and radiation therapy) has been completed. Routine follow-up examinations and maintenance medications are not considered treatment; and
3. The Insured Person has been in complete remission prior to the date of the subsequent Diagnosis, as evidenced by the absence of all clinical, radiological, biological, and biochemical proof of the presence of the initial Line of Duty Cancer.

Line of Duty Cancer Death Benefit - Classes 1 and 3 Only

If, while coverage under this Policy is in force, an Insured Person dies as a result of Line of Duty Cancer or from circumstances that arise out of the treatment of Line of Duty Cancer, the Company will pay the Benefit Amount shown in the Schedule of Benefits, subject to the Benefit Payment Conditions.

Payment of Line of Duty Cancer Death Benefit is subject to the following:

1. the death must occur while the Insured Person's coverage is in force under the Policy; and
2. acceptable proof must be provided to the Company, or its authorized claims payor, that such death was a result of Line of Duty Cancer or circumstances that arise out of the treatment of the Line of Duty Cancer.

Line of Duty Cancer Death Benefit - Classes 2 and 4 Only

If, an Insured Person is diagnosed with a Line of Duty Cancer for which a Line of Duty Cancer Initial Diagnosis Benefit is payable, and he or she subsequently dies as a result of the Line of Duty Cancer or from circumstances that arise out of the treatment of the Line of Duty Cancer, the Company will pay the Benefit Amount shown in the Schedule of Benefits, subject to the following Benefit Payment Conditions.

Payment of Line of Duty Cancer Death Benefit is subject to the following:

1. the death must occur while the Insured Person's coverage is in force under the Policy;
2. the death must occur within 10 years of diagnosis of Line of Duty Cancer; and
3. acceptable proof must be provided to the Company, or its authorized claims payor, that such death was a result of Line of Duty Cancer or circumstances that arise out of the treatment of the Line of Duty Cancer.

An Insured Person is eligible for benefits under this policy as an alternative to pursuing workers' compensation benefits under chapter 440. If the Insured Person is already paid workers' compensation benefits under chapter 440 they will not be eligible for benefits under this policy. Coverage provided may not embody all benefits afforded to a Firefighter under Section 112.1816, F.S.

Please direct all inquiries to Allen Durham at United Badges Insurance Services | adurham@unitedbadges.com | 850-841-9992

[Please return this form to us to request coverage.](#)

The coverage described in this proposal is underwritten by AXIS Insurance Company. This proposal outlines in general some of the important features of the proposed insurance program. The controlling provisions will be in the Policy, and this proposal is not intended in any way to modify the provisions or their meanings. The policy will be subject to the laws of Florida. This insurance coverage is administered by Provident Agency, Inc. of Pittsburgh, PA.

This program is administered by Provident, PO Box 11588, Pittsburgh, PA 15238.

Please visit www.providentins.com to learn more about us.