

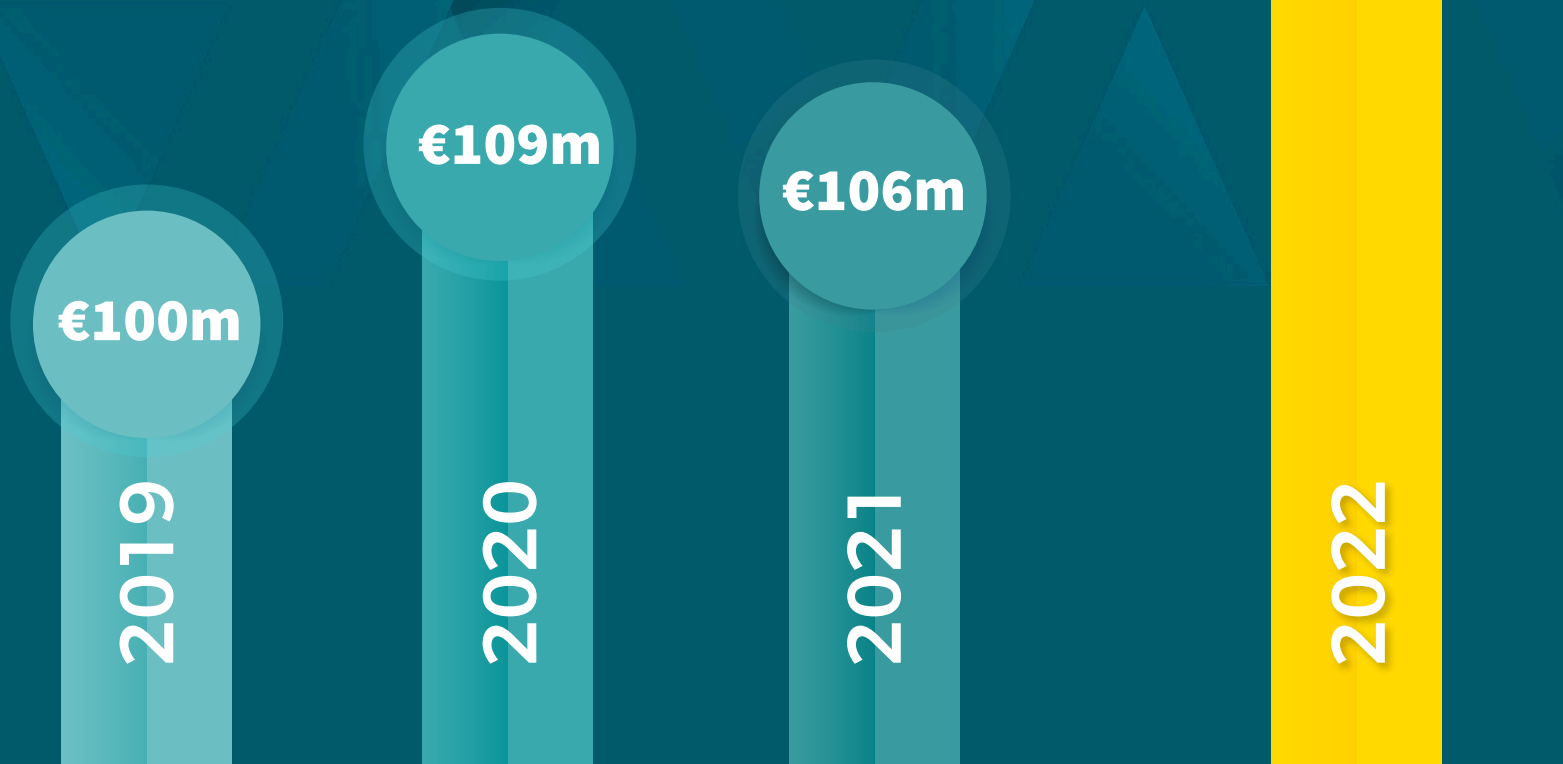


2022

A record year for protection claims

Protection Claims Paid
Report **2022**

€118m



Aviva Protection Claims Report 2022

Paying claims is at the heart of our protection business. We do what we can to make a positive difference in our customer's lives to help them in their time of need. In 2022, we paid the highest amount of claims since the merger of Friends First and Aviva back in 2018. More than 2,600 Irish protection claimants, across life insurance, specified illness and income protection policies were paid out over €118 million. Our longest claim in payment is ongoing for 31 years and we also helped get income protection customers back on their feet with €200,000 spent on rehabilitation.

2022 Irish claims at a glance



We paid out over
€118m



To more than
2,600
claimants



That's equal to
€323k
every day



We spent
€200k
on rehabilitation for
claimants

Headline Figures

	Life Insurance	Specified Illness	Income Protection
Percentage paid out	97%	89%	93%
Amount paid out	€56.4 million	€14.2 million	€48 million
No. of customers	471	157	2000

“ In paying out 93% of total claims, and over €118 million, the most important outcome is that we were there for more than 2,600 customers and their families when they needed us. ”

Income Protection Claims Statistics

Our Income protection cover gives our customers a financial cushion in the form of a replacement income of up to 75% of their previous earnings should an accident or illness prevent them from working and earning a living.

In 2022, approximately 2,000 claimants were paid on income protection policies, with just over €48 million paid in total. No one likes to imagine themselves facing illness or injury resulting in being unable to work, but the reality is that it affects all ages. In 2022, 50% of male income protection claims and 56% of female income protection claims came from the under 50's age band. Men were on average age 49 when they needed to claim and women were on average age 48.

Over the past 5 years (2018 - 2022)

The average time for a female to make a claim on an Individual or Executive policy was 6.5 years after first taking the policy out, with 38% of all claims made within the first 3 years of the policy start date.

The average time for a male to make a claim on an Individual or Executive policy was 12 years, with 40% of all claims made within the first 8 years of the policy (19% within the first 3 years).

93%

Percentage Paid

2,000

Number of claims paid*

€48m

Amount paid out*

5 Years

Average duration of claim

*approximately - to existing and new claimants

“ 5 years is the average length of time that people are out of work for on an income protection claim. The longest claim we have in payment is 31 years. ”



Colum Flanagan,
Risk Claims Manager

Claims Submitted 2022



56%
Female



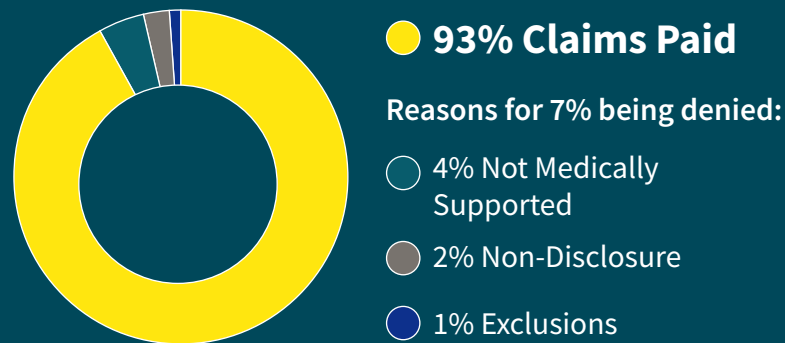
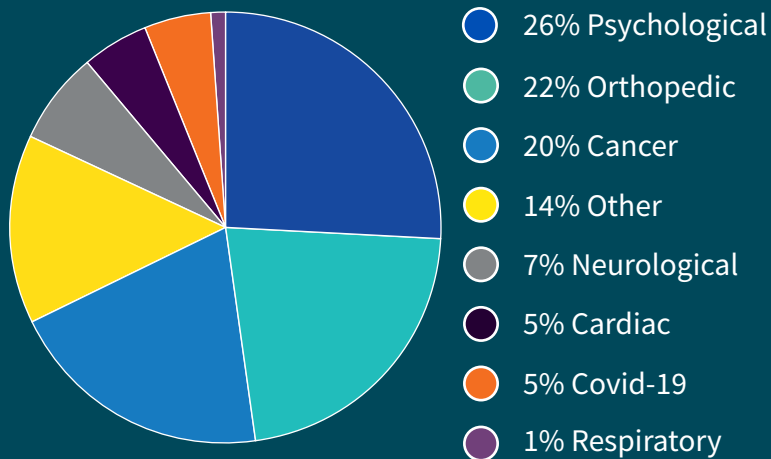
44%
Male

	Male	Female
Average age at time of Claim	49	48
Under Age 50 at time of Claim	50%	56%

Youngest Claimant Paid	Male	Female
Age	25	26

Earliest Claimant Paid	Male	Female
Time from Policy to Claim	3.5 mth	4 mth

Medical Reasons for Income Protection Claims



200k*

spent on rehabilitation for claimants

When our claimants have needed help to get back on their feet, we've been there to help them with support services tailored to their needs. In 2022, we spent €200,000 on rehabilitation costs alone. We work with a number of partners to provide the right kind.

Cancer Support Service

This third party psychological and physical support service is designed to help people diagnosed with cancer and provides:

- Cognitive Behavioural Therapy
- Graded Exercise
- Specialist Physiotherapy

Orthopaedic Solutions

This service supports claimants with musculoskeletal disorders by providing:

- Ergonomic Assessments
- Chartered Physiotherapy
- Functional restoration & weight management

Psychological Therapy Services

This third party stepped care service is designed to help people manage mental health issues by providing:

- Counselling
- Psychological Assessment
- Psychotherapy including Cognitive Behavioural Therapy (CBT)

Cases in Payment



Chef

Date of Claim	2021
Age of Claim	52
Time to Expiry	10 years
Medical Condition	Cancer
Benefit Received to date	€65,000



Pharmacist

Date of Claim	2020
Age of Claim	42
Time to Expiry	20 years
Medical Condition	Neurological
Benefit Received to date	€48,000



Accountant

Date of Claim	2018
Age of Claim	50
Time to Expiry	5 years
Medical Condition	Chronic Pain
Benefit Received to date	€100,000



Life Claims Statistics

Many of us worry about how our loved ones would cope if we were no longer around. Last year we paid €56.4 million to 471 customers and their families with life insurance and terminal illness benefit taking care of their loved ones financially. Cancer was the number one reason for Life claims in 2022 followed by cardiovascular then respiratory illness.

Life Claims Statistics

Top 3 Reasons for Claims

Cancer

Cardiac

Respiratory

97%

of Life Protection Claims were paid in 2022

471

number of Claims were paid in 2022

€56.4m

paid out to Life Protection claimants in 2022

€1.2m

largest claim paid in 2022

Specified Illness Claims Statistics

Throughout 2022, we've worked hard to support approximately 157 customers with specified illness claims. Having specified illness cover in place could give you a safety net to help you focus on your health instead of your finances.

89%

of Specified Illness claims were paid in 2022

€14.2m

was paid out to Specified Illness claimants in 2022

157

claims paid in 2022

€950k

the largest Claim paid in 2022

Claims Declined Breakdown	Total 2022
SI Policy Definition not satisfied	9%
Non-Disclosure	2%

*It does not include those cases where the medical condition cannot be considered under any of the SI Policy Definitions or where the medical condition has been excluded.

Medical Reasons for Specified Illness Claims

Female	
Breast Cancer	55%
Cancer (excluding Breast Cancer)	37%
Cardiac & Stroke	6%
Youngest Female Claimant Paid	35
Earliest Claim Paid	10 months

The average age at diagnosis



53

Female

Male	
Cancer	56%
Cardiac	30%
Stroke	4%
Youngest Male Claimant Paid	34
Earliest Claim Paid	5 months



54

Male

Much more than financial protection

Aviva Launched Aviva Care in 2023 but throughout 2022, we also took care of our customers with our exclusive added value benefits, Best Doctors Second Medical Opinion and Family Care Mental Health Support. These added benefits give customers the opportunity to talk to a registered Psychologist or global medical expert about any condition affecting their quality of life. The following details some of the reasons people have needed to use these services in the past year.



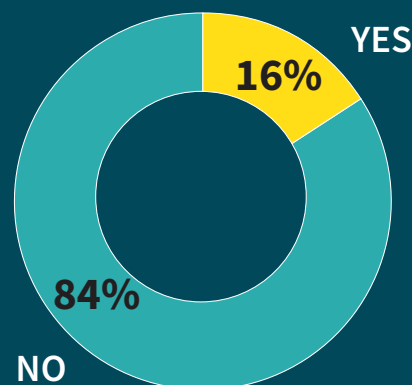
Best Doctors

Oncology, neurology and orthopaedics are the top 3 reasons people have used the Best Doctors service to date.

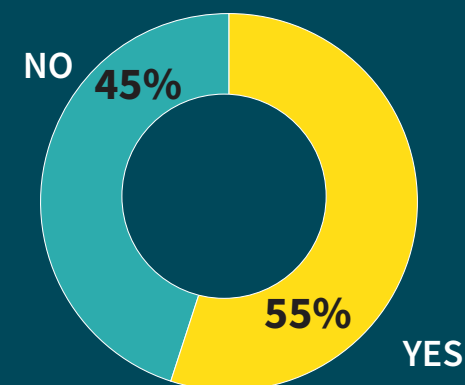
- 14% Oncology
- 13% Neurology
- 13% Orthopaedics
- 9% Rheumatology
- 5% Gastroenterology
- 5% Ophthalmology
- 4% Hematology
- 4% Neurosurgery
- 4% Endocrinology
- 3% Urology

Using the Best Doctors service has led to 16% of cases being advised of a change in diagnosis and 55% a change in treatment. (From 2020 until Dec-22)

Change in Diagnosis (% of Closed cases¹)



Change in Treatment (% of Closed cases¹)



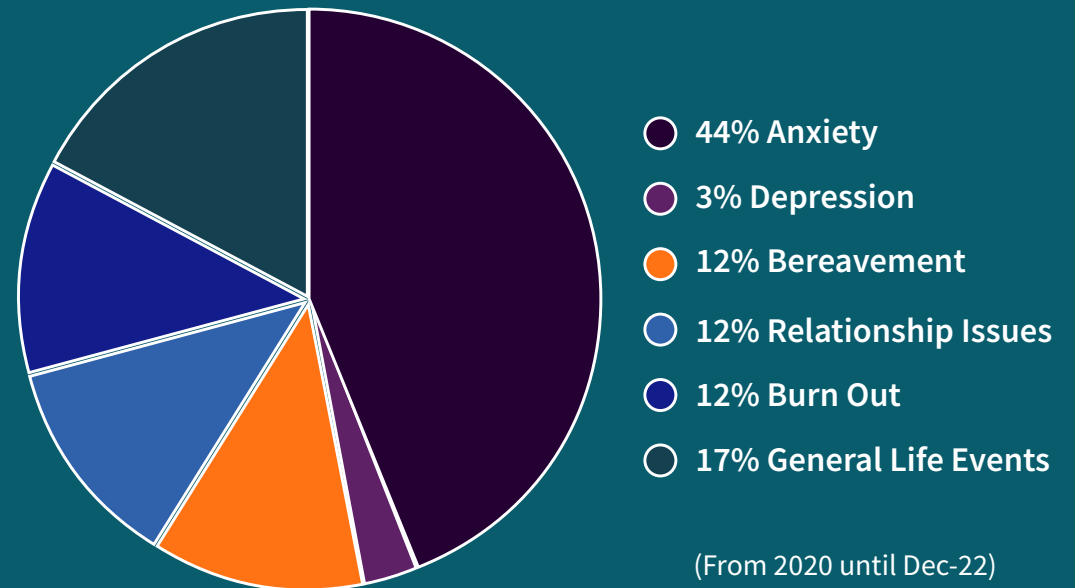
Source: December 2022 Reporting Notes: (1) Excludes cases for which change in diagnosis / treatment is "n.a."



Family Care

Managing your mental health is just as important as your physical health. When life brings new and unexpected changes, it's normal to feel anxious, stressed or low. Whatever your challenge, you're not alone. Our professional team of Psychologists are here. Family Care gives you access to a wide variety of specialised forms of therapy, including counselling and Cognitive Behavioural Therapy.

Anxiety is the number one reason people used the family Care mental health support service to date.



Paying claims is at the heart of what we do. Helping our customers get through the tough times, so they can look forward to a brighter future. For claims experience you can trust, **It takes Aviva.**



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