Individual protection claims report 2022



Contents

Our claims report provides a record of our 2021 claims data and insight. You'll find brief summaries about our individual protection products and their additional benefits <u>on page 28 of this report</u>. Your financial adviser will be able to help you with any other questions.

Protecting customers from day one

We believe that the benefits of protection begin the moment a customer buys one of our policies and we are committed to helping our customers from day one of their cover.

That's why we developed our Aviva DigiCare+ smartphone app. Available with all eligible personal protection policies, it offers a range of health and wellbeing services and tools to help prevent, detect and manage common health and wellbeing problems directly from your smart phone or device.

Since launching in December 2020, more than 74,000 individual protection customers and eligible family members have registered for the Aviva DigiCare+ app. As at 1/4/2022 registered users have benefited from the app's tools and services including:

- **13,383** annual health checks
- 1,323 nutrition consultations
- 1,475 mental health consultations...

You can find out more about DigiCare+ **on page 28 of this report**. Our **Aviva DigiCare+ guide** shows how the app works, the tools and services available and how to register.

Introduction

66 The heart of what we do

As a protection provider, paying claims is at the heart of what we do every day. So it's great to see that in 2021 we helped thousands of customers and their families settling 98% of all claims received. Paying out 53,713 claims across individual critical illness, life insurance and income protection. We paid the equivalent of £3m every day last year, paying out in total over £1bn to customers for the second consecutive year.

At a more personal level, our claims teams sent 149 'Project Teddy' gifts to families going through children's critical illness claims and worked with Macmillan Clinical Nurse Specialists to settle 244 cancer claims as quickly as possible. These not only reflect the great work our teams do to help support our customers when they need us most, they also helped us attain our position as Best Claims Management Team at the industry's 2020 COVER Customer Care Awards.



Fran Bruce Managing Director -Individual Protection

2021 headline data

In 2021, Aviva helped individual protection customers and their families



For the second year running we've paid out more than £1 billion, settling 98% of claims. Most importantly we've helped tens of thousands of customers through some of the most challenging times.



Jacqueline Kerwood, Claims Philosophy Manager

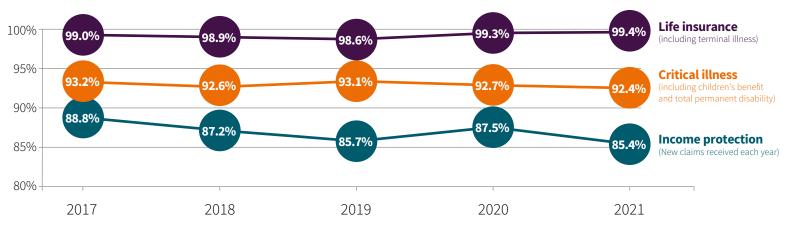
2021 at a glance

Number of claims paid	Life insurance (including terminal illness)	Critical illness (including children's benefit and total permanent disability)	Income protection	TOTAL
	43,954	4,367	4,300	53,713 (Including 1,092 Fracture Cover, Hospital and Trauma benefit claims)
Amount paid out	£732m £731,647,930	£310m £309,693,179	£51m £51,206,137	£1.1bn (Including £2,372,489 Fracture Cover, Hospital and Trauma benefit claims)

Our consistent track record

Since 2017, we've settled 97.7% of individual protection claims received. Paying out 183,348 claims and £5 billion to our customers and their families¹.

$Percentage \, of \, claims \, paid \, 2017 - 2021^2$



1 Aggregate claims data for 2017 to 2020 includes Fracture Cover. Data for 2021 includes Fracture Cover and additional benefits claims. 2 From 2020 Aviva Life insurance claims data includes Over 50s and Whole of Life claims not included in 2017-2019. Aviva's reputation and consistent track record for paying out claims is the corner stone of building customer trust and dispelling the perception that insurers don't pay out.

The last few years have made all of us more aware of our own mortality. By sharing our claims data in this report, we hope to give intermediaries and customers confidence that Aviva protection is truly focused on being there when it's needed most.



Daren Boys Protection Distribution Director

Income protection spotlight

Financial first aid

The thing with clichés is that, for the most part, they're true. And none more so than 'hope for the best, prepare for the worst'.

The last couple of years have shown how a serious illness is, potentially, never far away for any of us. You can cross your fingers and do what you can to keep safe, of course, but that's not a reliable long-term plan. Having the financial first aid of income protection insurance, propping you up with a monthly payment if an illness or injury stops you working, is one less sleepless night.

Every day our income protection claims team sees how customers benefit from their monthly insurance payment; working hard as a trusted partner, helping them through the bad times. That's the nature of backing up our income protection customers. Our 2021 claims figures highlight some of that too - here's a quick look at what goes on behind the numbers.

232 new rehabilitation cases started and a total of **416 policy holders received our** support in 2021

78% of all policyholders who we provided with rehabilitation support in 2021 returned to work*

Paying the bills is only half the story

Now, no one likes to think about suffering from illness or injury. But if it does happen, not knowing what to expect or how to deal with it can be a bigger worry than the actual problem. Knowing there are safe hands there to help is good – but knowing how they'll help is better.

Making an income protection insurance claim is a good example. It's great to know that your policy can help replace some of your earnings, and help you cover essential outgoings such as your mortgage, energy bills and food.

But paying the bills is only half the story. For some getting back to work can be a priority - and our income protection claims team is set up to help with that. They're specifically trained to look at each claim and work out, case-by-case, what else we can do to help support a return to normality.

If it's the best thing for you, we'll help speed up your recovery, through our rehabilitation support services. In fact, in 2021, 78% of customers we supported with these services successfully returned to work*.

*All rehabilitation support figures are based on Aviva's available 2021 rehabilitation data, rehabilitation intervention commencement date and case being active at some stage in the calendar year.

Alia, an A&E doctor was diagnosed with a large brain tumour when her youngest daughter was just eight-months old. Her income protection with Aviva provided more than just a payout - providing specialist rehabilitation and back to work support. Watch Alia's story



Expert support

Having someone looking out for your recovery can't be underestimated. It's nice to think you'll be able to cope without help but sometimes you just need a little more TLC.

For example, we could do something as simple as a regular phone call to help with a phased return to work plan. Or we could set up something more complex such as combating chronic fatigue through a gradual exercise programme, supported by CBT with one of our health partners.

There's no one-size-fits-all solution to your health, and of course, our rehabilitation support services won't be suitable for everyone. Our claims team does more than just tick the boxes and take care of the paperwork - they'll take the time to come up with a plan that suits you.

This means your insurance gives you options and second chances. Maybe you're desperate to get back to work quickly but you don't know how and you need help. Or maybe you're too unwell to continue your old job and you need to retrain for something new. Either way, you could find your policy goes far beyond a simple Direct Debit every month.

What's in it for you?

2

3

Income protection insurance is built around specific benefits. These are designed to work together, helping you cope with the financial fallout of serious illness or injury. Specifically:

Back to work benefit tops up your reduced earnings because illness or injury means you're either having to work in a different job or you've had to cut your hours and/or duties in your current job. You're paid a percentage of your monthly income protection benefit amount, based on the percentage your earnings have reduced.

Hospital benefit We'll pay this if because of your illness or injury, you have to be in hospital for more than six consecutive nights during your deferred period. We'll pay £100 for each night spent in hospital, for up to 90 nights during the policy term.

Trauma benefit is a one-off payment of either six times your benefit amount or £40,000, whichever is lower. It's paid if you suffer from our definition of: blindness, deafness, loss of hand or foot, loss of speech, limb paralysis, or loss of independence. It's worth having a look at your policy documents to see exactly what's covered and when.



When Lorraine was diagnosed with COVID-19, her income protection hospital benefit claim helped her financially and our rehabilitation support helped her on her road to recovery. **Watch Lorraine's story**



Luke was 31 when he was struck down with a nerve debilitating disease. Returning to work as a self-employed carpenter was not possible. Following a successful IP claim Luke's career took a different path after Aviva paid for his security training course. **Read Luke's story**

In 2021 at Aviva

Our income protection early intervention, rehabilitation support saw:

📀 232 new rehabilitation cases

a total of 416 policy holders received our support

Reason for rehabilitation support:

Percentages do not add up to 100% due to rounding.



All rehabilitation support figures are based on Aviva's available 2021 rehabilitation data, rehabilitation intervention commencement date and case being active at some stage in the calendar year.

Cancer spotlight

The impact of cancer

Analysis by Macmillan Cancer Support¹ shows that almost one in two people will receive a diagnosis of cancer at some point in their lives. And they estimate that, on average, someone is diagnosed with cancer every 90 seconds in the UK.

So, it's no surprise that cancer is one of the most common reasons for claim on Aviva's individual protection products². In 2021, 59% of critical illness, 37% of life insurance and 11% of new income protection claims paid were for cancer.

Figures as sobering as those are likely to make you sit up and take notice. They're also likely to get you thinking about what you might do if the worst were to happen.

Count on us

Being given a cancer diagnosis is difficult enough without the additional burden of money worries. Research by Macmillan Cancer Support³ shows that 83% of people with cancer in the UK suffer some kind of financial impact from their diagnosis. That financial impact can be pretty hefty too, with those affected having to find up to £891 a month on average, on top of their usual household spending. Add in the spiralling costs of living and there's a particularly unwelcome side effect to deal with.

Having insurance with us can help ease the financial strain and help our customers focus on recovery. It can also give them access to additional support if they ever have to make a claim for cancer.

Sources:

1 Macmillan Cancer Support, Statistics fact sheet, last updated September 2021. https://www.macmillan.org.uk/_images/cancer-statistics-factsheet_ tcm9-260514.pdf

2 Critical illness cancer claims include total permanent disability and exclude claims where site of cancer was unknown.

Life insurance cancer claims include terminal illness benefit and exclude claims where cause of death was not recorded in enough detail.

Income protection new cancer claims assessed in 2021 including declined new claims. Some income protection cancer claims may have been excluded due to data reporting constraints.

3 Macmillan Cancer Support/Truth survey of 1,329 adults who have received a cancer diagnosis. Fieldwork was undertaken between 13th January and 7th February 2020. The survey was carried out online. Sample is weighted to represent national population of people who have received a cancer diagnosis in terms of demographics (age, gender, region) and cancer type/time since diagnosis using prevalence data. For more details of the research, please see: Macmillan Cancer Support. Paying the price of cancer, December 8 2021.



Louise, Macmillan Clinical Nurse Specialist

Better together

Dealing with a cancer claim is a responsibility we take incredibly seriously and one that goes far beyond a cash payment. Backed up by years of experience we handle every claim with care and compassion. In addition, our partnership with the experts at Macmillan Cancer Support means we can better support customers living with cancer.

Working together since 2017, we've made the cancer claim process quicker and easier. By speaking directly to Macmillan Cancer Nurse Specialists, we've reduced the time it takes to pay a claim for some of our critical illness customers with a cancer diagnosis. By verifying the diagnosis directly with a nurse instead of waiting for a medical report, we can make sure they get the vital financial security they need quickly.

But the support isn't just financial. Macmillan have helped train our claims team to better understand and help our customers living with cancer. So, if they're getting in touch to make a claim, we can signpost to the wide range of advice and services that Macmillan offer – helping them get the information and support they need. 66

Facing a cancer diagnosis is shocking and devastating. We want to do everything we can to support our customers through that. Our partnership with Macmillan is all about going the extra mile to help people living with cancer access the support and expert advice they need.

Fiona Greenwood

Aviva Technical Claims Consultant

Winner of Cover magazine's Women in Protection Awards 2022, "Woman of the year: Claims"







Stepping up

Living with cancer can be a long and often debilitating journey. From diagnosis through to treatment, side effects, to recovery – we understand that everyone's experiences and needs are different. We also recognise that for many returning to work is part of the journey.

That's why as part of the cancer claims process, we can offer rehabilitation and back to work support wherever this is right for the individual customer.

Working with expert health partners and Macmillan, our claims team put tailored support packages in place to give financial, clinical, and emotional support to help get our customers on track for a return to work. Individual rehabilitation support plans can include specialist physiotherapy, counselling, workplace assessments and adjustment recommendations as well as phased return options. All designed to best meet our customers' individual needs.

In 2021, 79% of our income protection customers successfully returned to work after getting our cancer support*.

Looking ahead

Paying claims is the heart of our protection business and it's what we're here to do.

While we'd never claim to 'make everything better', we do what we can to make a positive difference in our customers' lives. With the right people and the right partnerships in place, we are here to help them financially, and to get them access to the emotional and clinical support they need.

Macmillan's insight on the financial impact of cancer was eye-opening. Bills don't stop with a cancer diagnosis. When we can confirm a diagnosis directly with the Macmillan Clinical Nurse Specialists, it can fast-track the claims acceptance process, sometimes to within 24 hours. This can really help take a weight off a customer's mind at a time when they have their health to focus on.

Claire

Aviva Claims Handler

Proudly supported by







Income protection

Our income protection cover helps customers cope financially if they're unable to work or suffer a loss of earnings due to illness or injury. In 2021, we paid 4,300 claims, paying out £51.2m to our customers.



One of our longest-running income protection claims paid throughout 2021, ran for more than 37 years. It started only a short time after the customer took out the policy and while they were still in their 20's. Over that time, we supported the customer with payments totalling approximately £200,000.

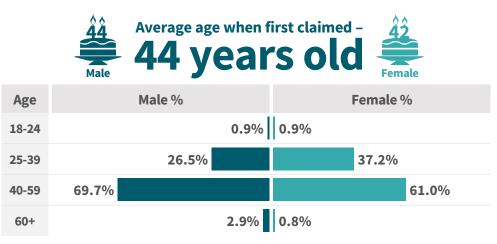
Remember that the length of claim and amount paid is dependent on the type of cover, policy term and monthly benefit amount selected.

Find out more about our current individual protection products and how they work <u>here</u>.

*Excludes claims received for 12 month and 2 year limited benefit income protection policies.

Income protection

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. On average in 2021, customers were 44 years old when they first claimed on their income protection cover. Let's see this broken down by age and gender:



The most common reasons for new claims received in 2021*:



IP claims data excludes some claims due to data reporting constraints. Percentages may not add up to 100% due to rounding.

Hospital, trauma and return to work benefits

In addition to the main monthly income benefit Hospital benefit, Trauma benefit and Back to work benefit are included in Income Protection+ cover. These benefits can help cover: costs incurred due to hospitalisation or serious trauma; or can pay a proportionate benefit to help support a return to work either with reduced hours or duties, or into a different role.

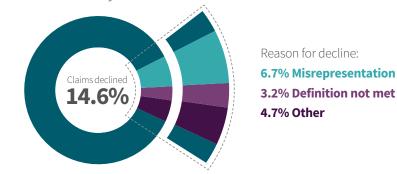
In 2021 we paid out:

	Amount paid	Number of claims paid
Hospital benefit	£157,118	98
Trauma benefit	£23,656	3
Back to work benefit	£8,591,133	454

You can find out more about how these benefits work in the **Income Protection+ policy summary**.

Claims not paid

In 2021, **15 in every 100** new claims received in 2021 were declined. Here's why:



Find out more about why we can't pay out and the three main reasons for decline **here**.

Income protection

To give you a flavour of the breadth of claims we pay, here are a few examples of typical income protection claims being paid in 2021:

	*		
Occupation:	Director of web design	Taxi Driver	Telesales Manager
Condition:	Coronavirus – Post COVID fatigue	Multiple Sclerosis	Stress
Monthly benefit*:	£3400	£1000	£1700
Claim started:	2020	2015	2015
Policy end date:	2038	2040	2038
Income protection cover	Full term benefit	Full term benefit	Full term benefit

*Monthly benefit amounts rounded down.

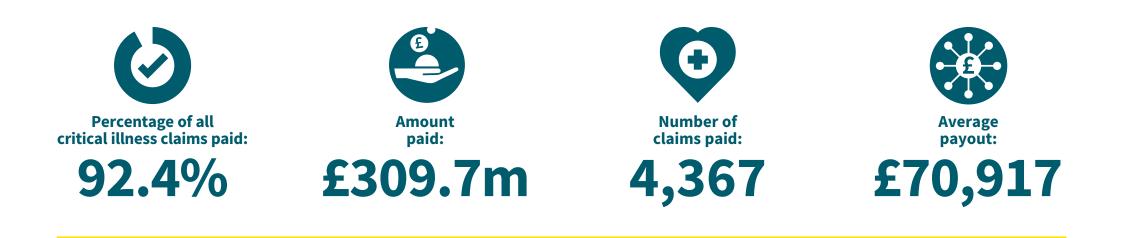
The monthly cost of income protection varies and is dependent upon the level of cover selected and the individual's personal circumstances.

Alia, an A&E doctor was diagnosed with a large brain tumour when her youngest daughter was just eight-months old. Her income protection with Aviva provided more than just a payout - providing specialist rehabilitation and back to work support. <u>Watch Alia's story</u> >

Critical illness

including total permanent disability and Children's benefit

Throughout 2021 we've worked hard to support our customers paying 4,367 critical illness, children's benefit and total permanent disability claims. Having critical illness cover in place could give you a safety net to help you focus on your health instead of your finances.



Find out more about our current individual protection products and how they work **here**.

Critical illness including total permanent disability benefit

The table below shows the claims we paid in 2021 by age and gender.

Critical illness claims by age & gender*:



Critical illness Hospital benefit claims

Hospital benefit is included with Upgraded Critical Illness+ cover and pays £100 per night up to a maximum of £3,000 if you have to spend more than seven consecutive nights in hospital. This can provide a financial cushion to help cover costs incurred during illness.

In 2021 we paid out:

Amount paid out	Number of claims paid
£42,800	45

Most common reason for claim (including Children's benefit)*:

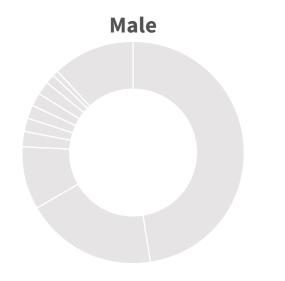
The three big causes for claim continue to be cancer, heart attack and stroke. Cancer claims account for more than half of all claims paid in 2021.

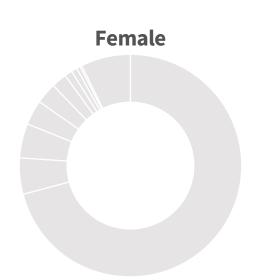


*Charts exclude claims where gender and/or age are not recorded and percentages may not add up to 100% due to rounding.

Critical illness including total permanent disability

Most common reason for claim by gender*:







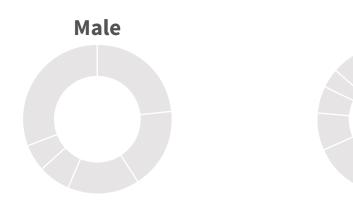


Critical illness including total permanent disability

Cancer accounts for 59.2% of critical illness claims in 2021 - more than any other condition.

Female

Most common cancer claims by gender*:



Critical illness less advanced cancer claims

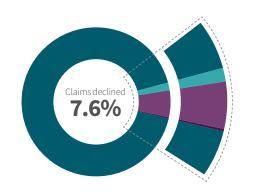
Our critical illness insurance covers a number of less advanced cancers depending on which level of cover is selected.

In 2021 we paid:

Amount paid out	Number of claims paid
£507,970	26

* Chart excludes less advanced cancer claims, claims where site of cancer and/or gender unknown and percentages may not add up to 100% due to rounding.

Claims not paid (including Children's benefit and total permanent disability)
Sadly there are times when we can't accept claims. In 2021
8 in every 100 critical illness, children's benefit and total permanent disability claims received were declined. Here's why:



Reason for decline: **1.8% Misrepresentation 5.5% Definition not met 0.4% Other** Percentages do not add up to 7.6% due to rounding

Find out more about why we can't pay out and the three main reasons for decline **here**.

When Wesley, 37, took out a critical illness policy alongside his mortgage, he never thought he'd need it. Until, one sunny spring afternoon, he suffered a heart attack... **Watch Wesley's story** >

Children's benefit

Your child becoming seriously ill is unthinkable. That's why Children's benefit is included as standard with Aviva's current critical illness policies. Children's benefit can't prevent a serious illness but it could take away some of the financial worries.

In 2021 we paid £4.7 million in Children's benefit claims. Helping 244 families with a lump sum payment along with the care and support our claims teams provide.



Find out more about our current individual protection products and how they work **here**.

Children's benefit

In the past five years we've paid out over £24m in Children's benefit to support families when the unthinkable happens.

Year	Total benefit paid
2021	£4,717,303
2020	£5,503,368
2019	£5,155,364
2018	£5,003,838
2017	£3,808,926

Table data includes Children's benefit and Funeral benefit claims but excludes Children's hospital benefit claims.

Children's hospital benefit claims

Children's benefit includes Children's hospital benefit which pays up to £3,000 if a policyholder's child is in hospital, paying £100 a night from the 8th night onwards up to a total of 30 nights during the policy term. This can help cover costs or lost income incurred during a stay in hospital.

In 2021 we paid out:

Amount paid out	Number of claims paid
£188,700	131

Paul and Dawn took out critical illness cover to provide some financial security if the worst happened to either of them. They never considered it would be their 4-year-old daughter Lydia who would fall ill. <u>Read Lydia's full story here</u> Once again this year we saw that cancer is the most common cause of Children's benefit claims, accounting for around a third of all claims paid.

Most common reason for claim (excluding Children's hospital benefit):



Most common cancer claims (excluding Funeral benefit):





Project Teddy – a personal touch

Teddy's aim is simple - it's all about going the extra mile for our customers dealing with a child's critical illness.

From implementing a fast-track children's cancer claim process whenever we can, to sending gifts to families to brighten their day in a small way.

Project Teddy allows us to help customers get through some of the most difficult times in their lives, with a real personal touch.

In 2021, we sent 149 Project Teddy gifts to families going through a claim. These gifts are chosen to suit each individual child and family.

When Project Teddy launched it completely resonated with me. We all really feel for the child and their family when assessing Children's benefit claims - you just can't imagine what they're all going through. It's a priority for us to do what we can to handle these claims really quickly and a conversation with the parent(s) lets us find out more about their child and the wider family and what their interests are. This helps us pick out gifts to be delivered to the child and often their siblings and parents, along with a note to say we know they are going through a really tough time so wanted to give them a little gift to brighten their day.

"We are really sorry to hear you have been unwell and understand that you are being super brave undergoing all your treatment. We also hear that you enjoy gaming on your PlayStation so thought you might like a PlayStation voucher. We've also enclosed a little something for your brother and sister for you to give them plus something for your parents to enjoy when they get a quiet moment! If you could pass on these gifts to them I'd really appreciate it. Thanks for your help and I wish you the best of luck with your treatment - Gavin at AVIVA Claims."

We've had some lovely feedback from customers regarding this who seem to really appreciate the extra step we take on their claim at a really tough time for them.

Gavin Aviva claims assessor

Life insurance

including terminal illness benefit

The COVID-19 pandemic has made all of us more aware of our mortality. Many of us worry about how our loved ones would cope if we were no longer around. Last year we helped thousands of customers and their families paying 43,954 life insurance and terminal illness benefit claims.



Find out more about our current individual protection products and how they work **here**.

Life insurance including terminal illness benefit¹

We pay out claims for customers of all ages.

This table shows the most common reasons for claim by age band in 2021. Cancer is the most common reason for claim across all age bands over 30.

Most common reason to claim by age band²:

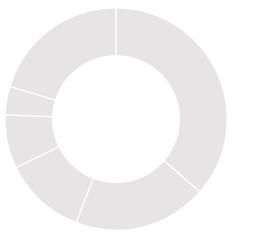
Age	1st	2nd	3rd	
Under 30	Cardiovascular	Accident and cancer		
30-39	Cancer	Suicide	Accident and cardiovascular	
40-49	Cancer	Cardiovascular	COVID-19	
50-59	Cancer	Cardiovascular	COVID-19	
60-69	Cancer	Cardiovascular	COVID-19	
70 and over	Cancer	Cardiovascular	Respiratory illness	



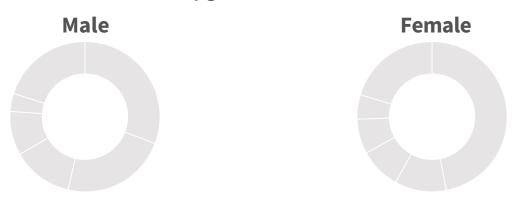
Terminal illness benefit pays out the life insurance amount on diagnosis of a terminal illness.
 Chart excludes Over 50s plan claims and claims where cause of death not reported in enough detail.
 Chart data based on paid claims and excludes claims where the cause of death or gender was not reported in enough detail.

Most common reason for claim³:

When it comes to the most common reasons for claim the top two are cancer and cardiovascular.



But there are differences between genders... **Most common claims by gender³:**



Life insurance including terminal illness benefit¹

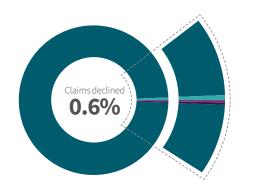
Cancer was the number one reason for claim in 2021. The charts below show the breakdown by type of cancer.

Most common cancer claims by gender²:



Claims not paid

In 2021, fewer than **1 in every 100** claims for life insurance and terminal illness were declined. Here's why:



Reason for decline: 0.3% Misrepresentation 0.3% Definition not met 0.02% Other

Percentages do not add up to 0.6% due to rounding.

Find out more about why we can't pay out and the three main reasons for decline **here**.

A helping hand through the most trying times

If the worst were to happen, we know you'd want to make sure those left behind have all the support they need. So we've put in place a number of bereavement services to support not just financially, but in terms of practical assistance and emotional care including:

- Bereavement counselling
- Grief Talk from Grief Encounter, support for any children and their families impacted by the death of a loved one
- Estate administration
- Fast-tracked funeral payments
- Bereavement guide
- You can find out more about our Bereavement services in the Aviva DigiCare+ guide.

1 Terminal illness benefit pays out the life insurance amount on diagnosis of a terminal illness.

2 Chart data based on paid claims and excludes Over 50s plan claims and claims where the cause of death or gender was not reported in enough detail.

Additional optional benefit: Global Treatment

If you or one of your children were to become seriously ill, you'd want the treatment with the best possible outcome – wherever it is in the world. That's what Global Treatment aims to give you.

Having access to medical experts and the latest treatment available globally could make a difference to the outcome. For an additional £3 per month, Global Treatment gives you the option to pursue recommended treatments without having to worry about arranging and paying for treatment, travel and accommodation.

Global Treatment is provided in conjunction with Further and claims can span the duration of treatment and recovery.

In 2021, 30 claims were approved, 25 claims progressed:



Jenna was 28 when she was diagnosed with breast cancer. When her doctors couldn't decide which path to take next she turned to Aviva. **Discover Jenna's story**



Find out more about Global Treatment here.

Additional optional benefit: Fracture Cover

Breaking a bone can result in weeks off work. For an additional £4 per month, Fracture Cover could provide a lump sum of up to £6,000 to help tide you over while you recover.

In 2021, hundreds of customers benefited from having the cover in place:



Find out more about Fracture Cover **here**.

Here are a few examples of Fracture Cover claims we've paid in 2021 where the customers also had Aviva income protection cover.

Delivery Driver	Dental Hygienist	Window fitter	Engineer
Broken hand	Broken arm	Fractured ribs	Fractured fibula
Accident at work	Fall at home	Fall in bath	Football injury
£1500 Fracture Cover payout	£3500 Fracture Cover payout	£1500 Fracture Cover payout	£4000 Fracture Cover payout
No income protection claim needed, able to return to work before end of 13 week waiting period.	Income protection claim paid for 19 days after 4 week waiting period, then able to return to work.	No income protection claim needed, able to return to work before end of 13 week waiting period.	No income protection claim needed, able to return to work before end of 26 week waiting period.



When Paul broke his ankle playing 5-a-side football with friends, his fracture cover was there to help. <u>Read the full story</u>

Aviva's shield of protection



Critical illness

Critical illness cover pays out if, during the policy term, you're diagnosed with one of our list of critical illnesses, and you survive for at least 10 days. Depending on the definition of the critical illness, we may pay:

- On diagnosis only,
- when the condition has progressed to a specified severity or
- when named treatments or surgeries are performed.

Critical illness cover does not pay out on death.

Critical illness can be taken out alongside life cover or on a standalone basis.

Children's benefit

Critical illness also includes valuable cover for your children between the ages of 30 days and 18 (21 if in full time education) as standard.

Income protection

Income protection cover pays out if during the policy term, you're unable to work due to illness or injury and suffer a loss of earnings as a result. With income protection you can choose from a range of deferred periods, including dual deferred options, that may align with your sick pay at work.

Life insurance

Life insurance could help protect you and your family financially by paying out a cash lump sum if you were to die during the policy term. Once we pay a full payment claim, the policy will end.

The policy can be written on a life insurance only basis or can include critical illness cover where the policy will end if there is a life or critical illness claim paid.

You can find full details of what Aviva's current products cover, their limits and how they work in our product guide.

Things to consider:

- If you stop paying your premiums, or cancel any Aviva protection policy, you'll no longer be covered and you won't get any money back.
- We'll only make a payment if a successful claim is made
- These policies do not have a cash-in value at any time

For details on how existing or heritage protection policies work, ask your adviser.

Additional optional benefits: **Global Treatment**

Global Treatment provided in conjunction with Further, gives you access to overseas medical specialists and to treatments around the world for certain serious conditions. It can be added to eligible protection policies for an extra £3 a month and covers you for up to £1 million per year to a maximum of £2 million during the policy term. Find out more **here**.

Fracture Cover

With Fracture Cover you can benefit from a lump sum payment if you suffer one of 18 specified fractures during a 12 month period. For an additional £4 a month, it can be added to eligible protection policies and covers you for up to one claim every year. Find out more here

Aviva DigiCare+

The Aviva DigiCare+ smartphone app offers a range of complementary health and wellbeing benefits provided by carefully selected partners. Powered by Square Health the app is available to you when you take out an eligible Aviva personal protection policy.

What's included with Aviva DigiCare+?

- ✓ Annual health check with GP follow up
- ✓ Physiotherapy (only available) with income protection policies)

- ✓ Nutrition support
- ✓ Bupa Anytime HealthLine
- ✓ Mental health support
- ✓ Second medical opinion
- ✓ Bereavement support

- ✓ Digital GP (available for an additional cost)
- Estate administration
- ✓ Health & wellbeing discounts/ offers

Aviva DigiCare+ is a non-contractual benefit which Aviva can change or withdraw at any time. Find out more about how these services work and the limitations in our Aviva DigiCare+ guide. Terms and conditions and privacy policy apply and can be found within the app.

Claims not paid

In some cases we can't pay out on a claim. There are three main reasons for claims not being paid.

Misrepresentation:

This is when full and accurate information typically relating to health and lifestyle, family history, occupation, residency and financial situation, hasn't been provided when applying for the cover.

Definition not met:

This is when the claim is for an illness that either isn't named in the cover, or hasn't reached a severe enough point to meet the policy criteria.

Other:

Sometimes our policies have conditions that the claim doesn't meet. For example, a life insurance policy has to be in force for 12 months before we can accept a death claim for suicide or intentional self-inflicted injury.

If you have any questions, please contact your financial adviser.



Close

66

Throughout 2021, COVID-19 has continued to impact our daily personal and working lives. Against a backdrop of ongoing pressure on the NHS and cost of living increases, we've seen mental health income protection claims prominent alongside rising Long COVID claims. Aviva have supported 109 individual income protection customers impacted by COVID-19 paying over £376,000. In addition, we've provided specialist rehabilitation support to income protection customers with 91%* of those customers receiving support returning to work last year.

Sadly, life insurance claims due to COVID-19 have also continued with 1,992 claims totalling £68.6m paid out – making COVID-19 the third most common reason for a life insurance claim last year. The pandemic has also led to delays in diagnosis and treatment of health conditions. As a result, we expect that the impact of this will come through over the coming years, with future claims presenting at more advanced stage.

Our 2022 claims report confirms that the need for protection insurance has never been more important and that none of us could have imagined what society has experienced over the last 2 years. People always say it'll never happen to them, but the reality is illness and death can impact anyone at any time. During those difficult times we put our customers and their families at the heart of everything we do and that makes me incredibly proud.



Robert Morrison Chief Underwriting Officer, Health & Protection

*All rehabilitation support figures are based on Aviva's available 2021 rehabilitation data, rehabilitation intervention commencement date and case being active at some stage in the calendar year.

Paying claims is the heart of what we do. Helping our customers get through the tough times, so they can look forward to a brighter future.

It takes Aviva.

Aviva Life & Pensions UK Limited. Registered in England No. 3253947. Registered Office: Aviva, Wellington Row, York, YO90 1WR. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Member of the Association of British Insurers. Firm Reference Number 185896. The Aviva DigiCare+ app and the services provided are not insurance products and are not authorised or regulated by the Financial Conduct Authority or the Prudential Regulation Authority.

aviva.co.uk

