

Protection Claims Report 2024

With you today, for a better tomorrow!

€129_M

paid to over 2,800 customers



Aviva Life & Pensions Ireland – Protection Claims Report 2024

Welcome to our Annual Claims Report for 2024. This report provides a comprehensive overview of our claims performance, offering insights into the most common causes of claims, the demographics of our claimants, and the impact of our support on their lives.

In 2024, we paid out a total of €129 million in claims, marking a 6.5% increase from the previous year. This significant growth underscores our dedication to providing financial security and peace of mind to our policyholders.

We have seen notable increases in the number of claimants and the amounts paid, particularly in life protection claims, which rose by 20% compared to 2023. We continue to prioritise timely and fair claims processing, with an impressive 98% of life

protection claims and 92% of income protection claims being paid. Our commitment to rehabilitation and support is evident, with €260,000 spent on helping income protection customers get back on their feet.

Our transparent approach to sharing claims data ensures that you can see the tangible value of our protection products, reflecting our unwavering commitment to supporting our customers in their time of need.

2024 Irish claims at a glance



We paid out over
€129m



To more than
2,800
claimants



That's equal to
€353k
every day



We spent
€260k
on rehabilitation for
claimants

Headline Figures

	Life Insurance	Specified Illness	Income Protection
Percentage paid out	98%	82%	92%
Amount paid out	€63.9 million	€11.1 million	€54 million
No. of customers	489	150	2200

Income Protection Claims Statistics

Our income protection cover provides our customers with 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 2024, approximately 2,200 claimants were paid on income protection policies, with a total of €54 million paid out. 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 2024, 53% of male income protection claims and 61% of female income protection claims came from those under 50. Men were on average age 49 when they needed to claim, and women were on average age 47.

92%

Percentage Paid

2,200

Number of claims paid*

€54m

Amount paid out*

7.5 Years

Average duration of claim

**approximately - to existing and new claimants*

“7.5 years is the average length of time that people are out of work for on an income protection claim.”

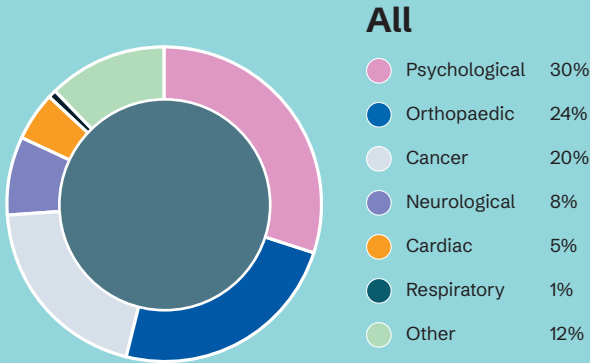
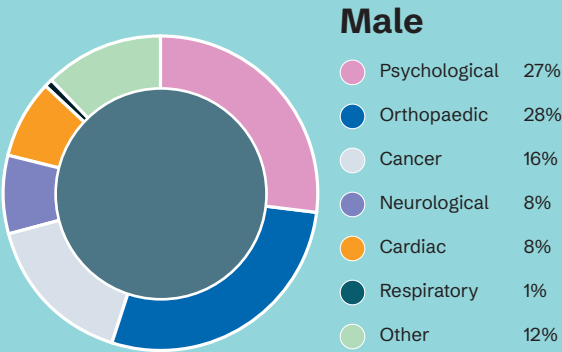
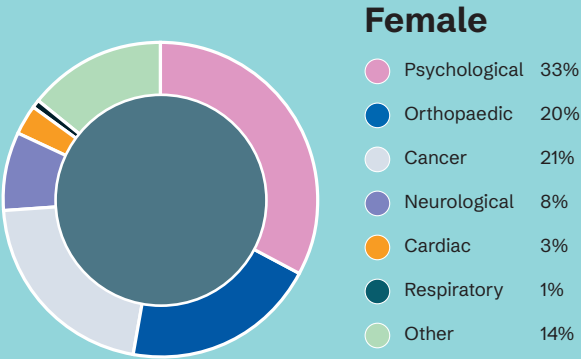
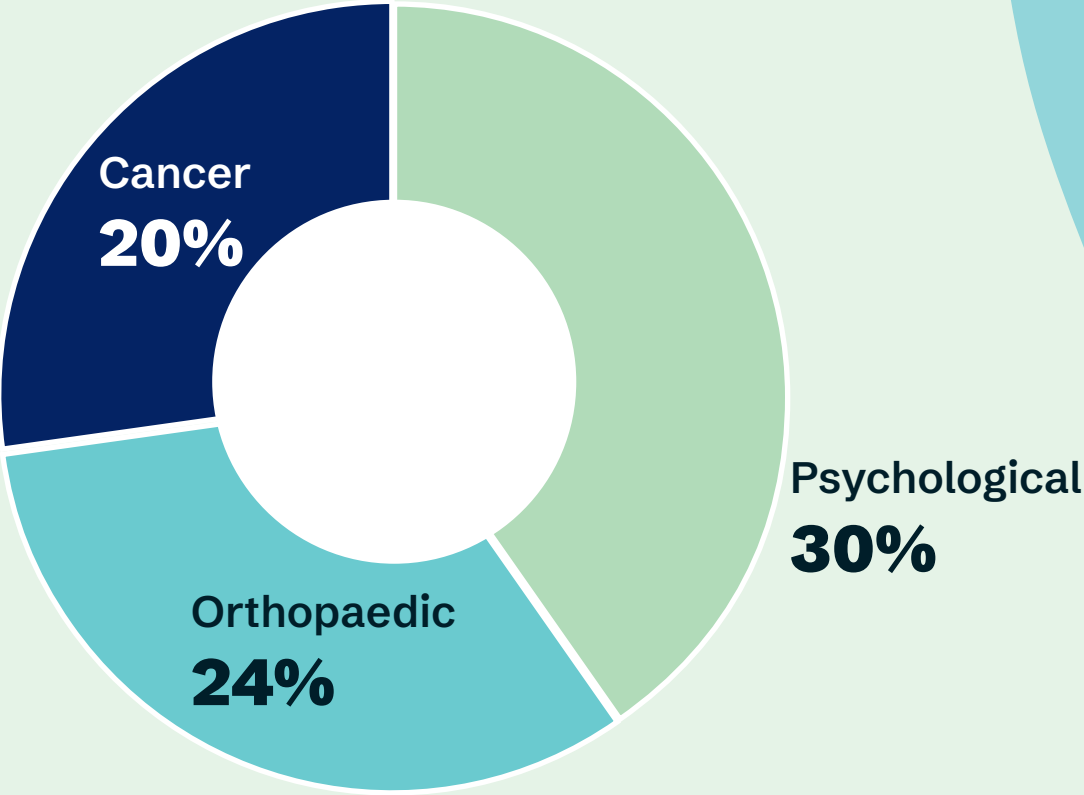
Psychological illness continues to be the most common cause of new claims in 2024, more prevalent in Females than Males, followed by Orthopaedic and Cancer claims at number 2 and 3, with Orthopaedic claims more common in Males than Females. The longest claim we have in payment is ongoing for 33 years. The earliest time from policy to claim was just two weeks. ”

Colum Flanagan, Risk Claims Manager



Medical Reasons for **Income Protection Claims** Submitted 2024

Top 3 reasons for claims



Claims Submitted 2024



56%

Female



44%

Male

	Male	Female
Average age at time of claim	49	47
Under Age 50 at time of claim	53%	61%

Youngest Claimant Paid	Male	Female
Age	24	22

Earliest Claimant Paid	Male	Female
Time from Policy to claim	40 weeks	2 weeks

Examples of current claims in payment



Accountant

Date of Claim	2024
Age of Claimant	50
Time to Expiry	14 years
Medical Condition	Chronic Fatigue
Benefit Received to date	€50,000



Project Manager

Date of Claim	2022
Age of Claimant	42
Time to Expiry	20 years
Medical Condition	Depression
Benefit Received to date	€60,000



Hairdresser

Date of Claim	2022
Age of Claimant	55
Time to Expiry	2 years
Medical Condition	Back problems
Benefit Received to date	€40,000



Chef

Date of Claim	2021
Age of Claimant	53
Time to Expiry	8 years
Medical Condition	Cancer
Benefit Received to date	€45,000

260k*

spent on
rehabilitation
for claimants

When our claimants have needed help to get back on their feet, we've been there to provide support services tailored to their needs. In 2024, we spent €260,000 on rehabilitation costs alone. We work with a number of partners to provide the right kind of support when it's needed most.

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)



Life Claims Statistics

Many of us worry about how our loved ones would cope if we were no longer around. Life insurance is a crucial component of financial planning, offering peace of mind and financial security to you and your loved ones. It provides a financial safety net, covering essential expenses, replacing lost income, and ensuring that your family is taken care of in the event of your untimely death.

Last year, we paid €63.9 million to 489 customers and their families through life insurance and terminal illness benefits, taking care of their loved ones financially. Cancer was the number one reason for life claims in 2024, followed by cardiovascular and respiratory illnesses. By including life insurance in your financial plan, you can protect your family's future and provide them with the support they need during difficult times.



50%
of life
claims are
cancer
related

Life Claims Statistics 2024

Top three Reasons for Claims

Cancer - 50%

Cardiac & Respiratory - 16%

Stroke & Neurological - 9%

98%

of life protection claims
were paid

€63.9m

paid out to life protection
claimants

489

number of claims paid

€1.4m

largest claim paid

Specified Illness Claims Statistics

Throughout 2024, we've worked hard to support approximately 150 customers with specified illness claims. Having specified illness cover in place provides a safety net to help you focus on your health instead of your finances.

64%
of specified illness
claims are for men



In 2024, males accounted for 64% of all Serious Illness (SI) claims, a significant increase from 50% in 2023. Consequently, females accounted for 36% of SI claims in 2024, down from 50% in 2023.

Cancer remains the predominant cause of SI claims, representing 64% of all claims in 2024. This highlights the ongoing impact of cancer on policyholders and the importance of coverage for such illnesses.

For female claimants, cancer is even more significant, accounting for 85% of all SI claims. However, there has been a reduction in breast cancer claims, from 52% in 2023 to 32% in 2024. This could indicate improvements in breast cancer prevention, early detection, or treatment outcomes.

These insights underscore the critical role of protection policies in providing financial support during serious illnesses, particularly cancer.

Specified Illness covers 52 illnesses on a full payment basis. This means that if you suffer one of these illnesses and satisfy the definition while on cover, we will pay the full amount for which you are covered. We cover 45 illnesses on a partial-payment basis and pay the highest partial payment amount in the market.

Our payments are in addition to any full specified illness payment that may be made on the policy. We don't reduce the sum assured by the partial payment made.

82%

of Specified Illness claims
were paid

€11.1m

paid out to Specified Illness
claimants

150

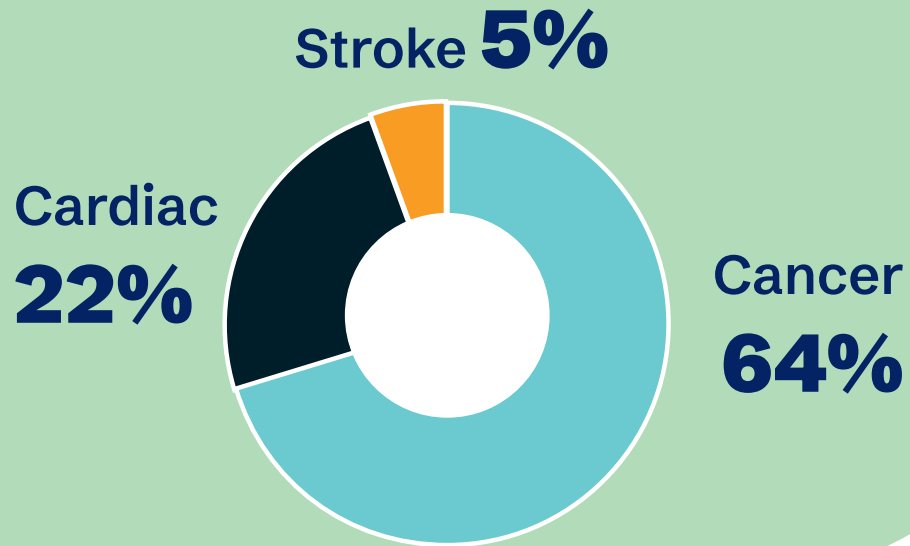
claims paid

€414,000

the largest claim paid

Figures above do 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.

All specified illness claims paid



Male
64%

Female
36%

Medical Reasons for Specified Illness claims

Female Claims Paid

Top three reasons for claims

Breast Cancer	32%
Cancer (excluding Breast Cancer)	53%
Cardiac & Stroke	9%

Youngest female claimant paid	38
Earliest claim paid	17 months

The average
age at
diagnosis



52

Male Claims Paid

Top three reasons for claims

Cancer	54%
Cardiac	30%
Stroke	6%

Youngest male claimant paid	34
Earliest claim paid	23 months

The average
age at
diagnosis



55

Celebrating Two Years of Aviva Care

Protection from Aviva comes with so much more than financial protection. Aviva Protection comes with access to Aviva Care at no extra cost. Four health and wellbeing benefits that include: Digital GP, Family Care Mental Health support, Best Doctors Second Medical Opinion and Bereavement Counselling.

In the two years since we launched Aviva Care:

- Thousands of customers have had the care they needed at the end of a phone.
- 56% of our members have experienced a positive change in their treatment plans
- 1 in 6 have experienced a change in diagnosis
- Truly a family benefit with 1 in 5 GP/Best Doctors cases for children
- 95% of users are satisfied with our service

**source: Teladoc Health January 2025.
1 Available on all policies taken out since January 2023.*



Get more from your protection policy.

Download the Aviva Care app from the App Store or Google Play Store or visit aviva.ie/avivacare.

GET IT ON
 Google Play

 Download on the
App Store

With many GP surgeries under pressure, it's not always easy to get an appointment at your local doctor's surgery. With Aviva Care which is included in your policy at no extra charge, you have access to our expert Digital GPs.

- ▶ Provides quick access to an experienced GP without having to wait for a face-to-face appointment.
- ▶ It's easy to use from the comfort of your own home
- ▶ You can use it at home or on holiday
- ▶ You can get prescriptions sent to your local pharmacy

Patient feedback

The clinician was extremely professional and she was so kind, understanding and supportive. I feel 100 times better than I did before. I don't think I would have improved so much without this help, the clinician was fantastic!

I explained my symptoms to the doctor & found her questions were direct & she fully understood how I was feeling.

Score 10 out of 10
*Ease of service,
Friendliness of doctor.*





Best Doctors

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



- 12% Neurology
- 12% Orthopaedics
- 11% Oncology
- 6% Gastroenterology
- 4% Rheumatology
- 4% Cardiology
- 3% Ophthalmology
- 3% Hematology
- 3% Hematology
- 3% Obstetrics and Gynecology

If you or a member of your immediate family such as your child, your spouse/partner or parent was ill or diagnosed with an illness, you can get expert guidance on their medical diagnosis or treatment plan at no extra cost to you with your Best Doctors Second Medical Opinion benefit.

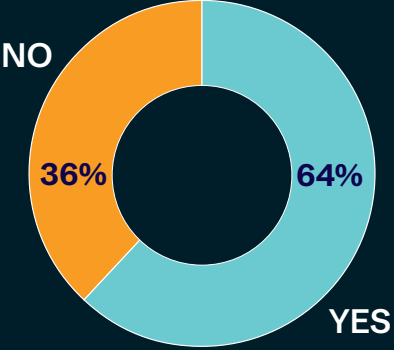
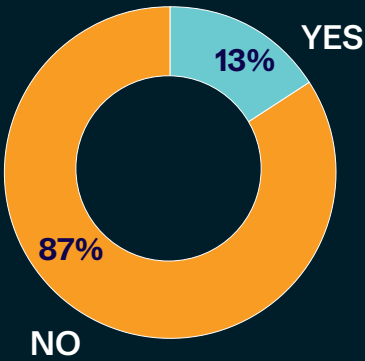
You get access to a panel of 50,000 world renowned experts ready to advise on a medical treatment or diagnosis.

The world's top physicians in over 450 specialities who will support your Irish treating doctor by giving a second medical opinion so that you can double check a diagnosis, investigate alternatives, and get additional treatment.

The service comes at no extra cost with your Aviva protection plan through our Aviva Care benefit.

It's available to you, your children up to age 18 (or 23 if in full-time education) your spouse or partner, PLUS your parents and your spouse's or partner's parents.

As a result of using Best Doctors, 13% of customers had a change of diagnosis, 64% had a change of treatment.



Excludes cases for which change in diagnosis / treatment is "n.a."
Source: Teladoc Health, March 2025.

Family Care

Managing your mental health is just as important as your physical health. Family Care gives you access to a wide variety of specialised forms of therapy, including counselling and Cognitive Behavioural Therapy.

“I got more from the 5 sessions with my Teladoc Health psychologist than I did after years of weekly therapy through another organisation.”



All of these services come at no extra charge with Aviva Protection.

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.**



AVIVA

For claims experience you can trust. It takes Aviva.

**For more information
contact your Financial Broker
or visit aviva.ie**

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Aviva Life & Pensions Ireland does not guarantee the on-going availability of any or all of the Aviva Care Ireland services to its policyholders and may, at its sole discretion, withdraw access to the service at a month's notice. If we withdraw it, we'll write to notify policyholders at least 30 days in advance of its removal.

Teladoc Health (who provide the Aviva Care services) is not a regulated financial service.

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