

Individual protection claims report 2023

How Aviva went above and beyond



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Our claims report provides a record of our 2022 claims data and insight, along with some of our customer stories from the last few years. You'll find brief summaries about our individual protection products and their additional benefits **on page 29 of this report**. 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 the Aviva DigiCare+ app. Available with 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 117,000 individual protection customers and eligible family members have registered for the Aviva DigiCare+ app. In 2022, registered users benefited from the app's tools and services including:

15,328
annual **health checks**

1,570
nutrition consultations

1,979
mental health consultations

You can find out more about Aviva DigiCare+ **on page 29 of this report**. Our **Aviva DigiCare+ guide** shows how the app works, the tools and services available and how to register.

Introduction



Fran Bruce
Managing Director -
Protection

“ Going above and beyond to help people when it matters most

Paying claims is at the heart of what we do every day. In 2022, we paid over £1.07bn across 50,595 claims, giving vital financial support to customers and their families. We've consistently settled more than 98% of claims over the last three years, paying over £1bn each year to a total of 155,889 claims.

But this financial support only tells part of the story. It's also about expertise, service and commitment... the efforts of teams who go above and beyond to make a difference to people when they need us most. In 2022, we have:

- Improved our critical illness cover by extending cover for cancer as well as other conditions such as dementia and mental health. These improvements will help even more customers and help us pay claims more quickly.
- Increased the amount we pay out under additional benefits within our upgraded adult critical illness cover, raising the upper limit from £25,000 to £30,000. This will put more money in the pockets of our customers at the most challenging times.
- Continued our partnership with Macmillan Cancer Support to help us better support our customers who are living with cancer. The partnership has helped us to speed up the claims process for some customers, and allowed us to signpost a wide range of advice and services from Macmillan. It means we can be there when it matters most.
- Sent hundreds of thoughtful gifts to children and their families going through critical illnesses, hoping to brighten their days.

The added services we provide go a long way towards making that difference for our customers. The Aviva DigiCare+ app – which now has over 117,000 registrations – offers protection from day one. With a range of health and wellbeing services and tools, Aviva DigiCare+ helps to prevent, detect, and manage common health and wellbeing problems.

The work we've done was recognised with the Cover Excellence award 2022 for outstanding contribution to protection and health. More than this, we've helped our customers when they needed us most. ”

Headline data

In 2022, Aviva helped individual protection customers and their families:



The scale of the payments we consistently make evidences the crucial financial support we provide for tens of thousands of UK households. This is even more important during times of broader cost of living challenges.

We're equally focused on going above and beyond our customers' expectations of their policies and their cover. More and more customers are registering with and using the Aviva DigiCare+ health and wellbeing app. And our relentless focus is on putting customers and their families at the heart of our claims service.



Jacqueline Kerwood
Claims Philosophy
Manager

“We paid more than £1bn in individual protection claims for the third consecutive year in 2022, settling over 98% of claims each year. Most importantly, we've paid over 155,000 claims, helping customers and their families through some of the most challenging times.”

Headline data

2022 at a glance

	Life insurance <small>(including terminal illness)</small>	Critical illness <small>(including children's benefit and total permanent disability)</small>	Income protection	TOTAL <small>(Including 1,221 Fracture Cover, hospital, trauma, carer and therapy benefit claims)</small>
Number of claims paid	41,002	4,689	3,683	50,595
Amount paid out	£683m <small>£683,638,564</small>	£334m <small>£334,070,894</small>	£50m <small>£50,636,470</small>	£1.07bn <small>£1,071,062,405</small>

Our consistent track record*

Since the start of 2018...

we've settled
97.8%
of individual protection
claims received

paying out
208,509
claims...

...and
£5.1bn
to our customers and
their families

*Aggregate claims data for 2018 to 2020 includes Fracture Cover. Data from 2021 includes Fracture Cover and additional benefits claims (Fracture Cover, hospital, trauma, carer and therapy benefit claims). From 2020 Aviva Life Insurance claims data includes Over 50s and Whole of Life claims not included in 2018-2019.



Daren Boys
Protection Distribution
Director

“ Protection products are the cornerstone of any financial plan, and Aviva’s reputation in the market is centred around our consistent track record for paying claims.

By sharing our claims data in this report, we aim to give you complete confidence that Aviva is truly focused on being there when customers need us most.”

Our partnership with Macmillan Cancer Support

Better together

We are incredibly proud of our partnership with Macmillan Cancer Support and the difference this has made for our customers when they need it most.

Thanks to Macmillan's Clinical Nurse Specialists, the partnership continues to help customers benefit from a smoother, faster claims process. Often, Macmillan's specialists can verify a diagnosis without waiting for medical reports. This means that, in some cases, waits can be reduced from up to 60 days down to as little as 24 hours – so customers and their families can get the vital financial security they need quickly.

But this isn't all. The expertise of our dedicated Macmillan Champions also helps us to go above and beyond financial support for our customers. Through our partnership, Macmillan is supporting our Champions to better understand and help our customers living with cancer. So, if they get in touch to make a claim, we can show them how to access a wide range of advice and services from Macmillan – helping them get the support they need.

“I am very proud of our Aviva Macmillan Champions – they are the people within our claims teams who speak every day to customers who are living with cancer. They are a caring and passionate group who, with the support of Macmillan, play such an important part in helping customers.”

Fiona Greenwood - Aviva Technical Claims Consultant
Winner of COVER Magazine's Women in Protection and Health Awards 2022, Woman of the Year – Claims

“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 Senior Claims Assessor



Louise,
Macmillan Clinical Nurse Specialist

MACMILLAN
CANCER SUPPORT

Proudly supported by


AVIVA

Income protection

Our income protection cover helps customers cope financially if, due to illness or injury, they're unable to work and suffer a loss of earnings. In 2022, we paid 3,683 claims, paying out £50.6m to our customers.

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



In 2022...



Percentage of all income protection claims paid:

94.3%*



Amount paid out:

£50.6m



Number of claims paid:

3,683



Average duration of claim:

6yrs 3m**

*To align to the reporting method used by the rest of the industry, Aviva's published claims paid rate for individual income protection claims is for all claims paid in 2022. In previous years Aviva has reported data for new claims assessed in the year.

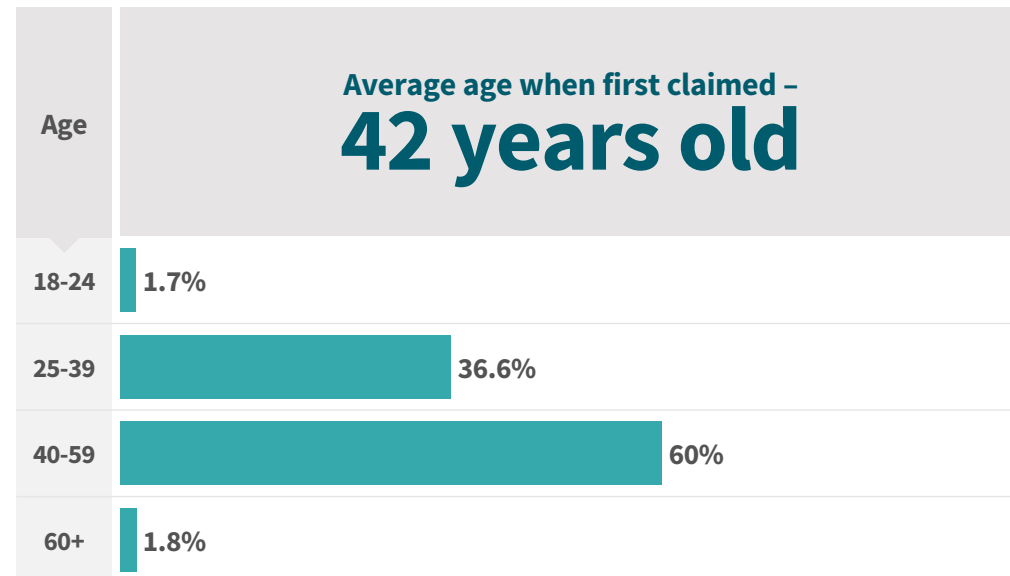
**Excludes claims received for 12 month and 2 year limited benefit income protection policies.

Income protection

One of our longest-running income protection claims paid throughout 2022 ran for more than 35 years. It started only a short time after the customer took out the policy and while they were still in their 20s. The customer claimed for mental health and to date has received more than £415,000 through monthly benefit.

Remember that the length of claim and amount paid is dependent on the type of cover, policy term and monthly benefit amount selected. It also depends on how long the customer's illness or injury prevents them from working.

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.



All paid income protection claims are included. 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, our Income Protection+ also includes hospital benefit, trauma benefit and back to work benefit.

These benefits can:

- help cover costs incurred due to hospitalisation or serious trauma, or
- pay some benefit to help support a return to work either with reduced hours or duties or into a different role.

In 2022, we paid out:

	Amount paid	Number of claims paid
Hospital benefit	£158,600	109
Trauma benefit	£16,713	2
Back to work benefit	£7,040,508	535

You can find out more about how these benefits work in the [Income Protection+ policy summary](#).

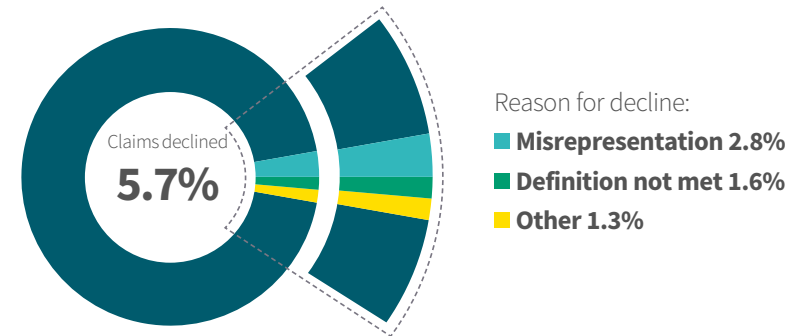
Income protection

The most common reasons for all customers in claim in 2022*:



Claims not paid*:

Fewer than six in every 100 claims in 2022 were declined.
Here's why:



Find out more about [why we can't pay out and the three main reasons for decline](#).

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

Income protection

To give you a flavour of the claims we pay, here are a few examples of new income protection claims accepted in 2022:

Images are for illustrative purposes only.



Occupation:	Publican	Dentist	Doctor	Office refurbisher
Condition:	Cancer	Broken collar bone	Endometriosis	Neck pain
Monthly benefit*:	£1,250	£4,250	£1,800	£750
Claim started:	2022	2022	2022	2022
Policy end date:	2061	2050	2053	2024
Income protection cover	Full term benefit	Full term benefit	Two year limited payment term	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.

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](#)

Income protection

Our income protection early intervention and rehabilitation support

Our income protection cover goes beyond a financial payout. Our claims team is trained to 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 can help speed up your recovery through our rehabilitation support services.

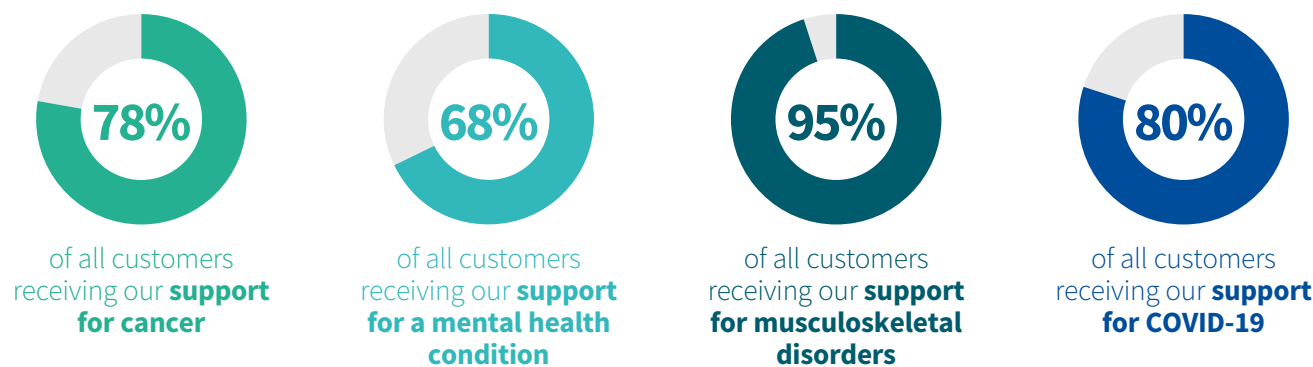
In 2022 at Aviva:

330 new
rehabilitation cases

82% of income protection customers
receiving early intervention support
**returned to their usual role
and working hours**

Income protection

The percentage of all customers who went back to work after receiving rehabilitation support*:



*These figures are based on customers who returned to their normal role and hours or a different role and/or reduced hours.

Reasons for rehabilitation support:



All rehabilitation support figures are based on Aviva’s available 2022 rehabilitation data, rehabilitation intervention commencement date and case being active at some stage in the calendar year.



Income protection and cancer

Working in partnership with Macmillan Cancer Support and carefully selected expert health partners

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 for income protection, we can offer rehabilitation and back to work support wherever this is right for the individual customer.

Working with expert health partners and making use of Macmillan’s advice on returning to work, 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 by our claims team to best meet our customers’ individual needs.

78% of our income protection customers
**successfully returned to work
after getting our cancer support***

*Figures based on Aviva’s available 2022 rehabilitation data on customers who returned to their normal role and hours or a different role and/or reduced hours.

**MACMILLAN
CANCER SUPPORT**

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Critical illness

including total permanent disability and children's benefit

Throughout 2022, we've worked hard to support our customers, paying 4,689 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](#).

In 2022...



Percentage of all critical illness claims paid:

93.5%



Amount paid out:

£334m



Number of claims paid:

4,689



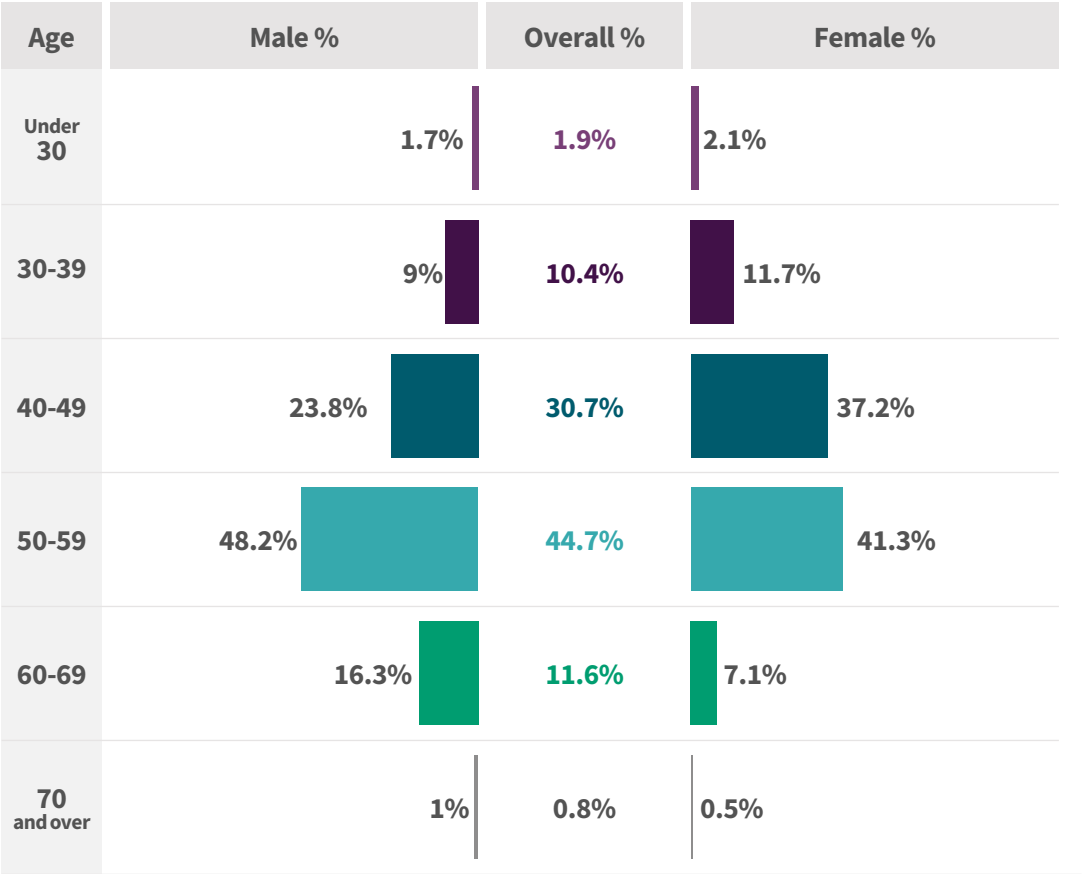
Average payout:

£71,246

Critical illness including total permanent disability

The table below shows the claims we paid in 2022 by age and gender.

Critical illness claims by age and gender*:



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

Critical illness hospital benefit claims

Hospital benefit is included with upgraded critical illness benefit cover. It 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 2022, we paid out:

Amount paid out	Number of claims paid
£51,900	44

Critical illness including total permanent disability

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

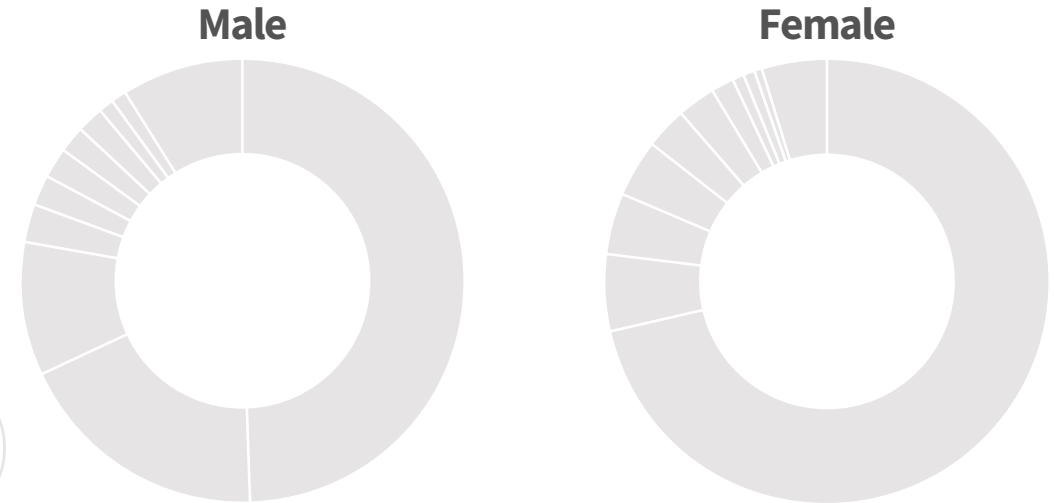


*Data is for paid claims only and based on reported illness type. Children's benefit data includes funeral benefit claims. Percentages may not add up to 100% due to rounding.

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 2022.

But there are differences between genders...

Most common reason for claim by gender (excluding children's benefit)*:



*Chart excludes claims where gender is not recorded. Percentages may not add up to 100% due to rounding.

Critical illness

Critical illness and cancer

Most common cancer claims by gender*:



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

Critical illness less advanced cancer claims

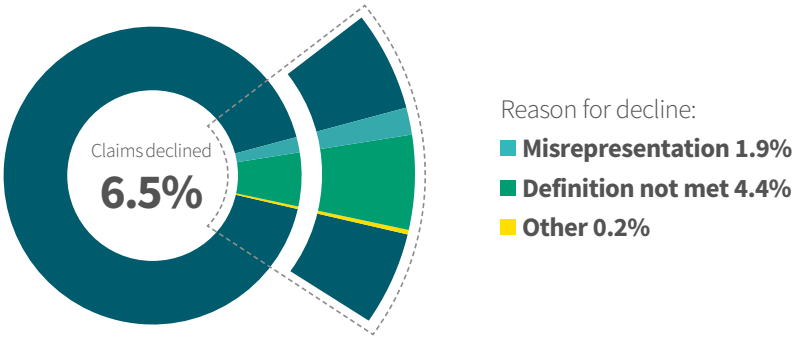
Our critical illness insurance covers a number of less advanced cancers depending on which level of cover is selected.

In 2022, we paid out:

Amount paid out	Number of claims paid
£702,411	45

Claims not paid (including children’s benefit and total permanent disability):

Sadly there are times when we can’t accept claims. In 2022, **fewer than seven in every 100** critical illness, children’s benefit and total permanent disability claims received were declined. Here’s why:



Find out more about [why we can’t pay out and the three main reasons for decline.](#)

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 2022, we paid £5.2 million in children's benefit claims, helping 264 families with a lump sum payment along with the care and support our claims teams provide.



In 2022...



Percentage of all children's benefit claims paid:

93.6%



Amount paid out:

£5.2m



Number of claims paid:

264



Average payout:

£19,873

Children's benefit

In the past five years, we've paid out over £25m in children's benefit to support families when the unthinkable happens.

Year	Total benefit paid
2022	£5,246,413
2021	£4,717,303
2020	£5,503,368
2019	£5,155,364
2018	£5,003,838

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. Children's hospital benefit is available on Critical Illness+ and on Life Insurance+ with critical Illness.

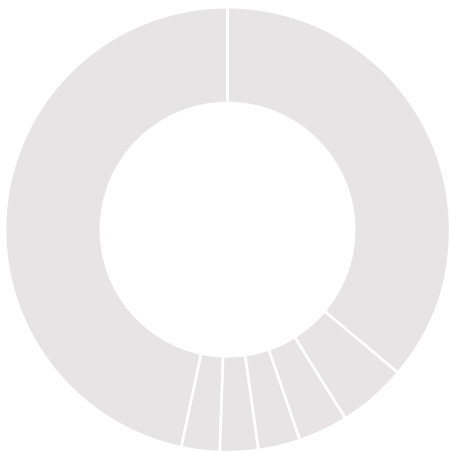
In 2022, we paid out:

Amount paid out	Number of claims paid
£294,599	192

Children’s benefit

Again in 2022, 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):



*Children’s funeral benefit claims account for 25.2% and have been included in ‘All other’ category.

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 2022, we sent 440 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
Protection Claims Assessor

Life insurance

including terminal illness benefit*

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 41,002 life insurance and terminal illness benefit claims.

Find out more about our current [individual protection products and how they work](#).



In 2022...



Percentage of all life insurance and terminal illness claims paid:

99.4%



Amount paid out:

£683.6m



Number of claims paid:

41,002



Average payout:

£16,673

*Terminal illness benefit pays out the life insurance amount on diagnosis of a terminal illness which meets our definition.

Life insurance including terminal illness benefit

This table shows the most common reasons for claim by age band in 2022.

Most common reason to claim by age band¹:

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

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, for eligible protection products, we've put in place a number of bereavement services and we signpost carefully chosen third parties. The support is not just financial, but also includes practical assistance and emotional care including:

- **Bereavement counselling**
- **Griefftalk**, the charity Grief Encounter's free helpline providing support for anyone impacted by the death of someone close
- **Estate administration**
- **Fast-tracked funeral payments**
- **Bereavement guide**

You can find out more about our bereavement services in the [Aviva DigiCare+ guide](#).

1 Chart excludes Over 50s plan claims and claims where cause of death not reported in enough detail.
2 Chart data based on paid claims and excludes claims where the cause of death or gender was not reported in enough detail. Percentages may not add up to 100% due to rounding.

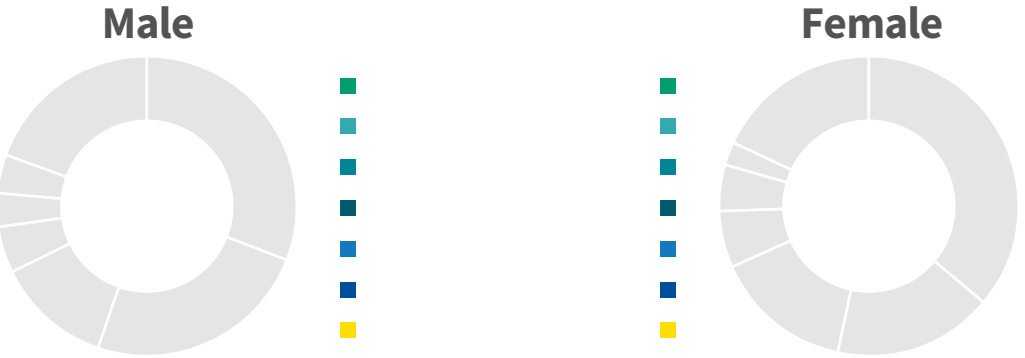
Most common reason for claim²:

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



The most common reasons for claim are similar between genders:

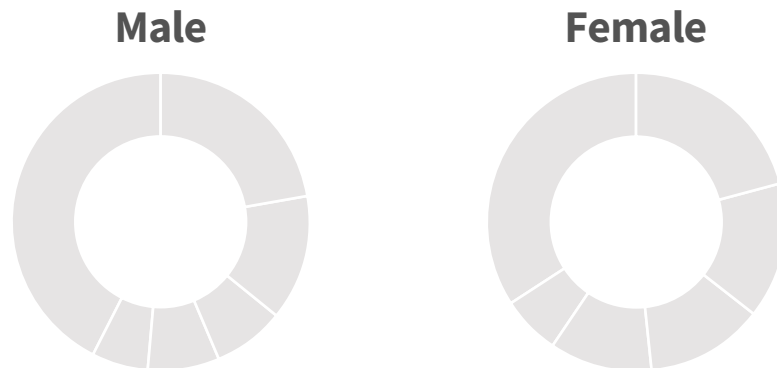
Most common claims by gender²:



Life insurance including terminal illness benefit

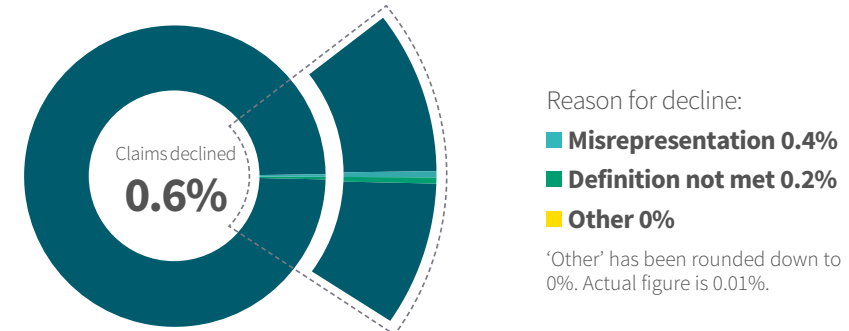
Cancer was the number one reason for claim in 2022. The charts below show the breakdown by type of cancer.

Most common cancer claims by gender*:



Claims not paid:

In 2022, fewer than **one in every 100** claims for life insurance and terminal illness were declined. Here's why:



Find out more about [why we can't pay out and the three main reasons for decline](#).

*Chart data based on paid claims, and excludes claims where the cause of death or gender was not reported in enough detail.

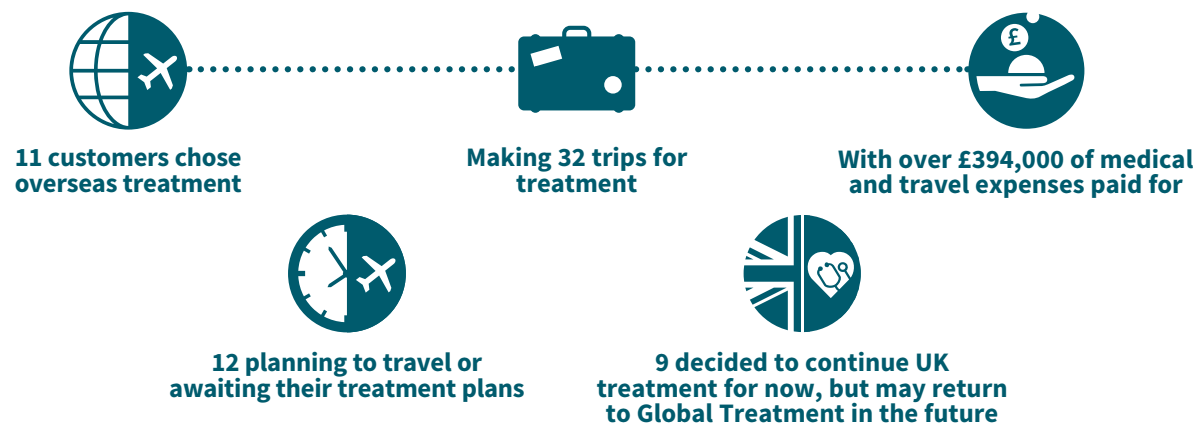
Additional optional benefit: Global Treatment

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 with access to treatment for six named conditions or treatments including cancer*.

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 renews every three years and premiums may change at each renewal.

Global Treatment is available with eligible protection products and is provided in conjunction with Further. Claims can span the duration of treatment and recovery. If the event leads to a claim which ends the policy, cover is limited to three years from the date of diagnosis.

In 2022, 28 new claims were approved and 18 people went on to investigate treatment options. Here's a summary of the numbers of active and ongoing claims from 2022, including those already in claim before 2022:

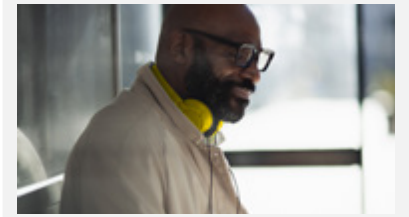


We'll give you an update on Jenna's story soon.

*Find out more about [Global Treatment, what it covers and limits](#).

Here are a few examples of Global Treatment claims we have paid out in 2022:

Images are for illustrative purposes only.



Age:	50 year old	49 year old	60 year old	41 year old
Condition:	Cancer	Cancer	Heart surgery	Cancer
Number of trips abroad:	17 trips to Spain*	Two trips to Spain	One trip to the United States	Three trips to Spain
Costs covered:	More than £160,000 spent on treatment, travel and accommodation	More than £46,000 spent on treatment, travel and accommodation	More than £135,000 spent on treatment, travel and accommodation	More than £16,000 spent on treatment, travel and accommodation
Time spent abroad:	Over 160 days	Over 20 days	Over 50 days	Under 10 days

*The trips abroad and cost occurred in 2021 & 2022

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.

Find out more about [Fracture Cover](#).

In 2022...



Percentage of all Fracture
Cover claims paid:

89.7%



Total
amount paid:

£2.1m



Number of
claims paid:

866

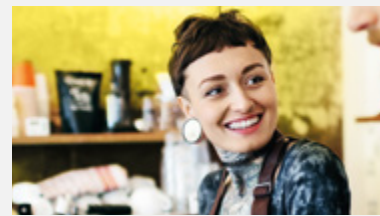
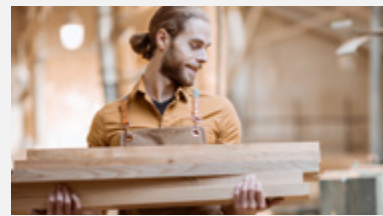


Average
payout:

£2,523

Here are a few examples of Fracture Cover claims we've paid in 2022, where the customers also had Aviva income protection cover.

Images are for illustrative purposes only.



Occupation:	Joiner	Tattoo artist	Data inputter	Doctor
Fracture:	Fractured foot	Fractured ribs	Fractured ankle	Fractured ankle
Fracture Cover pay out:	£2,000	£1,500	£2,500	£2,500
Benefit paid:	£1,500 income protection benefit paid for three months, following four week deferred period. One month's Back to Work benefit also paid.	No income protection claim needed, able to return to work before end of four week deferred period.	No income protection claim needed, able to return to work before end of four week deferred period.	No income protection claim needed, able to return to work before end of 52 week deferred period.

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](#). Some of our older products may work differently, so please speak to your adviser for more information.

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 our older 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.](#)

Fracture Cover

With Fracture Cover you can benefit from a lump sum payment if you suffer one of 18 specified fractures during a policy year. 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.](#)

Aviva DigiCare+

The Aviva DigiCare+ app offers a range of complementary health and wellbeing benefits provided by carefully selected partners. Provided 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 consultations | ✓ Digital GP (available for an additional cost) |
| ✓ Bupa Anytime HealthLine | ✓ Estate administration |
| ✓ Mental health support | ✓ Gym, health and wellbeing discounts |
| ✓ Second medical opinion | |
| ✓ Bereavement support | |

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 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



Robert Morrison

Chief Underwriting Officer,
Health and Protection

“ Over the last three years, we’ve paid over £3.2 bn across 155,889 claims. Behind every claim is a customer – or a member of their family – and it’s our customers who are at the heart of everything we do.

I’m incredibly proud of how Aviva and expert third parties have worked together to do what’s best for our customers. That includes offering early intervention and rehabilitation support for our income protection customers. 82% of customers receiving this support returned to their usual role and working hours within 2022, showing that a claim is more than simply a financial payout.

We’re focused on providing the best protection we can against the worst that could happen. We believe that starts with detecting issues and intervening early. That’s why, with the Aviva DigiCare+ app, we aim to help customers live a healthier life by helping them prevent, detect and manage health and wellbeing problems.

So, you can be sure we’ll not only support our customers’ financial needs with our protection products, but we’ll also give them practical and emotional support to help them lead their best lives. ”



Paying claims is at the heart of what we do.

Helping our customers and their families get through tough times, so they can look forward to a brighter future.

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