


Why, what and how



Employer guide
to Group Critical Illness



“ Choosing Group Critical Illness cover for your business can give your employees the reassurance that they and their loved ones will not be left without financial support if they are diagnosed with a critical illness. It can also add value to your business as part of a modern employee benefits package. ”

JULIAN NURSE
GROUP PROTECTION PROPOSITIONS MANAGER, AVIVA

Why **Group Critical Illness** matters to your business

Protect your most important assets

As an employer, you don't need us to tell you that your employees are your most valuable assets. Because of that, offering them financial protection from a range of critical illnesses makes good business sense. And extending that cover to their families shows that you're not just thinking of your bottom line.

With everyone having such busy lives, thinking about, or arranging financial protection can often come low down on people's priority list. Our research¹ shows almost 8 in 10 UK parents with dependent children have no financial plan in place to deal with lost income due to ill health.

That's where Aviva Group Critical Illness can make all the difference. It pays a lump sum to your employee if they are diagnosed with a critical illness or have to undergo a surgical operation as defined in the policy. This money could take some of the added pressures off your employee, so they can focus on getting well.

Invest in their wellbeing

Being diagnosed with a critical illness or having to undergo an operation affects people's lives massively. And on top of the emotional and physical challenges, your employees may also have to deal with financial worries.

State benefits may be available to your employees when things go wrong, but these might not be as favourable or as comprehensive as they imagine. For example, there isn't a state benefit that pays a substantial lump sum if an employee is diagnosed with a critical illness.

That's where Aviva Group Critical Illness comes in. To employees, it represents an investment in their health and wellbeing. And as well as showing you care about your employees, it also helps your business stand out from the crowd when it comes to recruiting and retaining staff.

¹ Aviva 'Protecting Our Families Report' March 2017. Report examined families with dependent children aged under 18 or those over 18 with dependent children.

What it provides

Our Group Critical Illness cover provides employees with financial support if they are diagnosed with a critical illness or have to undergo a surgical operation as defined in the policy. It offers a choice of different levels of cover to suit your business's needs and budget. For example, you can choose to offer standard cover or opt for our extended cover, which provides financial protection for even more critical illnesses.



We'll pay a lump sum of up to five times an employee's salary (up to a maximum of £500,000, whichever is lower) if they are diagnosed with a critical illness or undergo an operation that meets our policy definition. They must survive for at least 14 days.



No medical underwriting needed, although the product is subject to a pre-existing and associated conditions exclusion.



Optional cover for partners – a financial protection option for your employee's husband, wife or civil partner, up to £250,000.



Children's cover – as well as the conditions covered under the policy, we'll cover your employees' children for five child-specific conditions and two critical medical crises. Child cover benefit pays 25% of the value of an employee's benefit up to a maximum of £20,000.



Cancer drugs fund – the option to include access to a cancer drugs fund of up to £100,000 if an employee is diagnosed with a cancer and their local NHS commissioning body won't cover the cost of the drug(s) recommended by their specialist on financial grounds.

What's also included

Our Group Critical Illness cover gives access to a range of added value services – all for no additional charge. As part of this, all scheme members have access to **Best Doctors®** second medical opinion, **RedArc Nurse Personal Advice Service** and a **24 hour Stress Helpline**.

Best Doctors for a second medical opinion

Best Doctors provides an expert second medical opinion if your employee or a member of their immediate family faces a serious illness. They can use the service at any time, not only when they make a claim. It also provides medical information and advice, connecting members to medical expertise from international specialists.

Best Doctors is available to all employees covered by a Group Critical Illness policy. It also covers their spouse/partner and any dependant children (including legally adopted children and stepchildren up to age 18, or age 21 if in full time education).

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What's also included continued

Personal Nurse Advice Service for ongoing support

RedArc offers a long-term Personal Nurse Advice Service that provides your employees with telephone based practical advice and emotional support following a critical illness diagnosis.

RedArc nurses will take the time to help employees understand their diagnosis, talk to them about what they're going through, listen to any worries and answer any questions they may have. It provides one-on-one ongoing support with the same Personal Nurse Adviser for as long as required.

Stress helpline – 24/7 counsellor care

Provided by Care first, the 24/7 Stress Helpline gives your employees direct access to accredited counsellors. The aim is to help callers regain control when they feel overwhelmed. The counsellors offer practical ways to cope and aim to empower your employees at difficult times.

Best Doctors second medical opinion, **RedArc Nurse Advisory Service**, and **Stress Helpline** are non-contractual benefits that we can withdraw at any time without notice. For full information about these services, please read our **Added Value Services Critical illness cover brochure**, available at: www.aviva.co.uk/business/health/group-critical-illness/

How it works for employers

Our Group Critical Illness product offers a huge choice of cover levels to suit different needs and budgets. Here's a summary of how it works.

Choose what's right for you

We provide cover for schemes with five people or more. You decide:

- who can join,
- the type of cover and level of benefit you want to provide, and
- if you'd also like to cover your employees' spouses or partners.

Applying is easy

In order for us to provide you with a quotation, simply give us details of the employees you want to cover; their gender, date of birth, salaries, occupation and work postcode. If you've had a similar scheme with another provider, we'll need details of the scheme and claims history.

We've made it easy for you to apply for Group Critical Illness. Once you have your quotation, all you need to do is fill in the forms as accurately as possible. We'll do the rest to get your plan up and running quickly. If you need any help, please contact your financial adviser.

After that, you simply need to keep paying your premiums and make sure you tell us straight away if you need to make any changes to the cover. And once we've set up your plan, you and your employees will have all the benefits the plan brings with it, with peace of mind amongst them.

Questions and answers

Here are the answers to the most common questions we're asked about Group Critical Illness cover:

How do I decide who to cover?

Firstly, decide the minimum age you want your employees to be to join the scheme, taking into account potential age discrimination issues. Then, decide if you want a fixed probationary period your employees must serve before joining and when they can join, for example monthly or annually.

Must all employees have the same level of benefit?

No. You have a great deal of flexibility and can choose different levels of benefits for different employees, such as directors, managers and staff. Alternatively, you can offer the same level of benefits to all.

What about employees based overseas?

As long as your company is UK registered, we can consider employees who have a contract with your company and are resident overseas.

Can you transfer a scheme from another provider?

Providing there has been no break in cover – we usually allow 'No Worse Terms' to apply. This applies to the critical illnesses and operations that are common between providers.


What medical evidence do we need?

We don't need any medical information from your employees to set up the policy. If you go on to make a claim, we will investigate whether the illness existed before the policy started, then assess the claim against the policy conditions.

When will you pay out a benefit payment?

We'll pay a lump sum to an eligible employee if they:

- are diagnosed with one of the specified illnesses or
- undergo one of the specified operations during the policy term, and
- survive for 14 days after the date of diagnosis or operation.



What happens when someone new joins?

You can add new employees to the plan. All we ask is that you give us details of the new joiner on the plan's anniversary date and confirm their entry date to the plan.

What happens if I need to make a claim?

You must tell us within three months (or as soon as reasonably practicable) if an employee is diagnosed with a critical illness or has undergone an operation covered by the policy. We'll ask for consent to contact the employee's doctors to get the medical evidence we need to assess the claim.

Do my premiums stay the same each year?

If the factors we use to calculate the premium don't change, we normally guarantee the premium rate for two years from the start of the policy.

Will you pay more than one claim under the policy?

Each covered employee can make more than one claim, providing each claim is for a different and unrelated condition. Some employees may be able to claim more than once for cancer providing the terms of the second and subsequent cancer cover are met. We don't offer multiple claims on the cover for husbands, wives, civil partners and children.

How we offer more value

Our award-winning Group Critical Illness cover offers you the opportunity to stand out from your competitors. Here are more ways it gives you more value for your money:

Retention and hiring

Offering Group Critical Illness cover as part of an employee's benefit package helps you show your commitment to your workforce. It can also help make you an attractive employer to potential recruits.

Value for money

Group Critical Illness cover usually costs less than an employee would pay when choosing to buy it privately.

Tax

The lump sum benefits are currently free of tax. The Group Critical Illness cover premiums are usually treated as a business expense and can be offset against Corporation Tax. For your employees, the premium you pay is usually treated as a benefit in kind.

All references to taxation are based on our understanding of current law and tax practices, which could change in the future.

Flexibility

You can combine Group Critical Illness with our other policies, such as Group Income Protection, Group Life or Group Spouse/ Partner cover. In this way, you can build an employee benefits package that really stands out.



What it covers

We use the Association of British Insurers (ABI) definitions for all critical illnesses. In some cases, our definition is broader than the definition set by the ABI. Please bear in mind that we are unable to cover employees suffering from a pre-existing condition.

STANDARD CONDITIONS	
Alzheimer's disease	resulting in permanent symptoms
Cancer	excluding less advanced cases
Cancer	second and subsequent
Cardiac Arrest	
Coronary artery by-pass grafts	
Creutzfeldt-Jakob disease	resulting in permanent symptoms
Dementia	resulting in permanent symptoms
Heart attack	of specified severity
Kidney failure	requiring dialysis
Major organ transplant	
Motor neurone disease	resulting in permanent symptoms
Multiple sclerosis	with persisting symptoms
Parkinson's disease	resulting in permanent symptoms
Progressive supranuclear palsy	resulting in permanent symptoms
Stroke	resulting in permanent symptoms

Continued overleaf

What it covers continued

EXTENDED CONDITIONS

Aorta graft surgery	
Aplastic anaemia	with permanent bone marrow failure
Bacterial meningitis	resulting in permanent symptoms
Benign brain tumour	resulting in permanent symptoms or removed via craniotomy
Benign spinal cord tumour	
Blindness	permanent and irreversible
Cardiomyopathy	of specified severity
Coma	resulting in permanent symptoms
Coronary angioplasty	to two or more coronary arteries
Deafness	permanent and irreversible
Encephalitis	resulting in permanent symptoms
Heart valve replacement or repair	
HIV infection	caught in the UK from a blood transfusion, a physical assault or at work in an eligible occupation
Liver failure	of advanced stage
Loss of hand or foot	permanent physical severance
Loss of independent existence	permanent and irreversible
Loss of speech	permanent and irreversible
Open heart surgery	with surgery to divide the breastbone
Paralysis of limbs	total and irreversible
Primary pulmonary arterial hypertension	
Pulmonary artery graft surgery	
Respiratory failure	of advanced stage
Rheumatoid arthritis	chronic and severe
Systemic lupus erythematosus	with severe complications
Terminal illness	
Third degree burns	covering 20% of the body's surface area or 30% loss of surface area to the face
Traumatic head injury	resulting in permanent symptoms

Continued overleaf

CHILDREN'S COVER (included in addition to the standard or extended conditions covered under the policy)

Cerebral palsy	
Cystic fibrosis	
Hydrocephalus	
Muscular dystrophy	
Spina bifida	
Children's intensive care benefit	requiring mechanical ventilation for 7 days
Loss of independent existence	

ADDITIONAL OPTIONS

Total permanent disability	unable to do a suited occupation ever again or unable to do their own occupation ever again*
Cancer drugs fund	

*We reserve the right not to include Total Permanent Disability cover, or to offer the cover on a different basis for certain occupations.

This is a summary of the conditions covered by this policy. You can find full terms and conditions, which also includes details of what is not covered and any exclusions, in our Technical Guide and Policy Wording. Both documents are available at: aviva.co.uk/business/health/group-critical-illness/

Find out **more**

To find out more, contact your financial adviser or visit:
aviva.co.uk/business/health/group-critical-illness



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