



What if....

I suffer a serious illness and can no longer work?

Have you thought about how you would cope financially if you suffered a serious illness which meant you were unable to work?

If this happened, you could be faced with prolonged periods off work for treatment and recovery which could have a huge impact on your income. This could put your home and lifestyle at risk if you can't keep up with your mortgage and other payments.

Aviva's Personal Income Protection and Specified Illness Cover are different types of cover, but both may be able to help you and your family during a financially difficult time.

Below we outline the differences and similarities in the two different types of cover offered by Aviva, so you can consider if they could help you and your family cope financially should the unexpected happen to you. Further details and eligibility criteria can be found in the policy summary and definitions guide, available from you Financial Broker.

These types of policies should be considered as part of your overall financial planning. Your Financial Broker will be able to help you decide which, if any, of these policies are right for you.

	Specified Illness	Personal Income Protection
What does it do?	Our Specified Illness policy pays out if you are diagnosed with, or undergo surgery for, a critical illness that meets our policy definition and then survive for at least 14 days. We only cover the critical illnesses we define in our policy and no others.	Provides regular income if due to illness or injury if you can no longer work, resulting in a loss of earnings.
How can it help me?	Can help you to shoulder the burden of financial instability a sudden illness can bring. With help towards paying for home alterations, medical treatments or your mortgage.	Helps you keep up with your on-going financial commitments such as your mortgage or rent, and can help maintain your family's lifestyle.
Who does it cover?	You can choose to cover one or two people, and it will also cover your children up to age 21.	It pays a proportion of your income each month for a fixed period of time. And, the inclusion of our carer benefit provides a benefit if your child, spouse or civil partner needs full time care.
What does it cover?	There are 47 conditions where we'll pay out the full sum assured and 19 conditions where we'll pay out €20,000 or half the sum assured, whichever is greater. For full details of all conditions covered please see our Specified Illness definitions guide.	It will pay out a monthly benefit if an illness or injury means you are unable to do your own occupation.
Are there any risks to consider?	We only cover the critical illnesses we define in our policy and no others. It doesn't pay out if you die and the policy has no cash in value at any time.	Our Income Protection cover has no cash in value at anytime, and if you stop paying your premiums, we'll stop providing cover – and we won't pay any money back to you. You will only receive a payment if a successful claim is made.

	Specified Illness	Personal Income Protection
What do most people claim for?	The three most common reasons for claims are; cancer, heart attack and stroke. [†]	The most common reasons for claims are mental health and musculoskeletal problems. [†]
When can I claim?	You should contact us as soon as possible if you think that you or your child may be eligible to claim.	You should contact us as soon as possible if you're unable to work due to illness or injury. We may be able to help you sooner than you think.
How is the benefit paid?	You'll receive a one-off lump sum.	You'll receive a monthly benefit after your chosen waiting period of 4,8,13,26, or 52 weeks. This will be paid until you return to work, your cover period ends or, if you have selected a limited benefit, until the limited benefit ends.
How long does the cover last?	After a claim is made for one of the full payment conditions, your policy will end.	Your cover continues until the policy end date you've chosen, no matter how many times you claim.
Are there any optional benefits available?	<p>Available subject to additional premiums:</p> <ul style="list-style-type: none"> Overseas Treatment Plan, a unique optional additional benefit. <p>Benefits included as standard:</p> <ul style="list-style-type: none"> Best Doctors® Second Medical Opinion Service, exclusively available to all Aviva Protection customers, from the first day of cover at no additional charge. <p>Plus you'll have access to a range of benefits automatically included within the cover, including children's benefit and accelerated surgery benefit. Further details can be found in the Flexible Protection customer brochure.</p>	<p>Available subject to additional premiums:</p> <ul style="list-style-type: none"> Overseas Treatment Plan, a unique optional additional benefit. Increasing cover. <p>Benefits included as standard:</p> <ul style="list-style-type: none"> Waiver of premium. Best Doctors Second Medical Opinion Service, exclusively available to all new Aviva Protection customers, from the first day of cover at no additional charge. <p>Plus you'll have access to a range of benefits automatically included within the cover, including rehabilitation benefit and personal accident cover. Further details can be found in the Personal Income Protection customer brochure.</p>

[†]Source: Aviva Individual Protection claims statistics 2017.

Your Financial Broker is there to help you decide the Protection options which are best for you and your family. They will provide you with the relevant customer guides, and you can find more information on our website www.aviva.ie.



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