



**Support following a  
cancer diagnosis**



We understand that receiving a cancer diagnosis could be life-changing and you may experience a whole host of emotions. Our specialist cancer services provide help and support for you and your loved ones throughout your cancer journey and beyond.

Our cancer support now goes way beyond the traditional claims process, doing the best we can to help make a time of uncertainty that bit easier.



## Our Dedicated Cancer Claims Team

If you need to start a cancer claim, simply call the customer service helpline which is located in your member documentation and you'll be referred through to our dedicated Cancer Claims team. They're people like you, with families and loved ones. They've been specially chosen for their understanding, patience, and empathy.

With training from our in-house clinical team who are experienced in providing cancer care and treatment, they recognise that everybody's cancer journey is unique. They'll take the time to understand your personal circumstances and guide you to the most appropriate specialist and support.

## Talking Through Cancer

Our Talking Through Cancer service is on hand to offer expert mental health support for you and your loved ones throughout your cancer journey.

With a thorough knowledge of the different experiences people go through when living with cancer, the team of third party specialist cancer therapists will help you work through the emotional ups-and-downs, offering compassionate support and practical techniques along the way. They will help you feel more in control of the situation by listening and gaining a thorough understanding of your needs – offering you the right support, when you need it.

Whether you want help coming to terms with your diagnosis, tips to understand next steps, or simply want someone to talk to, the specialist therapists won't just support you through your diagnosis and beyond, they'll be there for those closest to you as well. Up to four of your loved ones can access support and with specialist services for children from the age of five, they'll help provide the reassurance and emotional strength to live life as best you can, together.

This service is available if you have an eligible cancer claim.

**If you've been diagnosed with cancer and need some mental health support, follow these two simple steps to make a Talking Through Cancer claim:**

### 1 – Call the customer service helpline or your Aviva Cancer Claims adviser

There's no need for a GP referral before making a claim. Simply call our customer service helpline which is located in your member documentation. Alternatively, if you already have an authorised cancer claim, you can call the Cancer Claims team. If you've already seen your GP, you must still follow the Talking Through Cancer pathway to access the therapy covered by your policy.

Before you call, please check that you have:

- your policy number, which is shown in your member documentation, and the name of your company.  
This will help us to confirm your identity
- details of your symptoms and when they started.

One of our Cancer Claims advisers will assess your claim and, if eligible, transfer you to our third party clinical provider where a Case Manager will arrange an assessment for you. Or if you prefer, we can arrange a suitable time to call you back. You'll also have the option to choose up to four loved ones to access the service, even if they're not included on your cover. Our advisers will be happy to go through the cover your policy provides in more detail and explain how this works.

### 2 – Telephone clinical assessment

The third party therapist will agree what's the most appropriate support for you from a range of therapy options designed specifically to support people with cancer, their family and loved ones. These options may include:

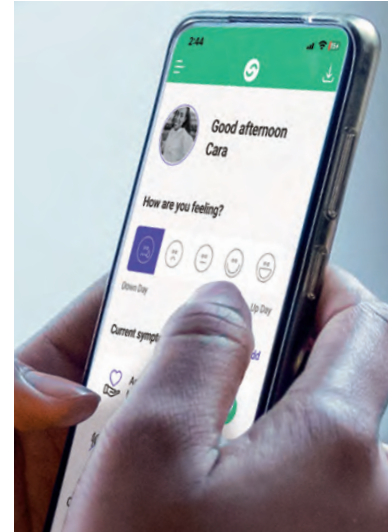
- ✔ Online cognitive behavioural therapy (CBT)
- ✔ Remote counselling or talking therapy (telephone or video)
- ✔ Face-to-face counselling or therapy
- ✔ Family therapy

All treatment is led by specialist cancer therapists working in conjunction with our third party clinical provider. At the end of the programme, you'll be provided with a plan to help you in the longer term.

## Careology\*

Designed to complement advice and support from your treating cancer team, the Careology app can help you feel a little more in control at a time when life can feel overwhelming. You can:

- ✔ Record symptoms and side effects to easily keep track of how you're feeling, and see when to contact your care team.
- ✔ Jot down questions, organise your thoughts and keep notes of how you're feeling each day with the digital journal.
- ✔ Create a medication schedule and set reminders to help you take your medication accurately and on time.
- ✔ Share your health status with your friends and family so they can see how you are and support you wherever they may be.
- ✔ View a complete record of your symptoms, side effects, medications, notes and appointments, making it quick and easy to recall and share all aspects of what happened and when.



If you have been diagnosed with cancer and would like to access the Careology app, simply call our customer service helpline which can be found in your member documentation. Alternatively, if you already have an authorised cancer claim, you can call the Cancer Claims team. They will provide you with all the information you need to get started.

This service is available if you have an eligible cancer claim.

## Cancer Care Guide\*

Developed in partnership with Macmillan Cancer Support, our guide makes it simple for you and your loved ones to find information to help make life that bit easier following a diagnosis.

Covering topics such as healthy eating and knowing your employment rights, it can help you understand what support is available, easing financial concerns and helping you prepare for treatment.

When you call us, our Cancer Claims team will arrange to send this out to you. In addition, if you'd like more practical support or to talk to one of Macmillan's specialist cancer nurses, you can call through to them on **0808 239 6341** or chat online with them at their website, [macmillan.org.uk](http://macmillan.org.uk).

\*These services are non-contractual and could be changed or withdrawn at any time.

## Cancer Care with Get Active\*

Our Get Active wellbeing offers include savings on products and services that could help make a small difference if you or someone close to you is living with cancer. So, whether you're looking to improve your current health and wellbeing, show someone your support, or you just want to feel more like yourself, there's a choice of specially arranged products and services to help.

To find out more about what is available, please visit [www.getactive.aviva.co.uk](http://www.getactive.aviva.co.uk) and enter the access code **HCGLRG** when prompted.

## Need this in a different format?

Please get in touch with Aviva if you would prefer this brochure (**GEN7619**), in large print, braille or as audio.

 **0800 092 4590**

 **contactus@aviva.com**

 **aviva.co.uk**

Lines are open Monday to Friday from 8.00am – 6.30pm.

Calls may be recorded and/or monitored.

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# Your cancer cover – Level 3



**Please keep this document in a safe place and read it in conjunction with your cover guide as it replaces some of the information in there. The cover guide does not contain the full terms and conditions that apply to the product. These are contained in the policy wording, a copy of which is available from your group administrator. If you have questions about your cover, please contact us.**

## Where am I covered for treatment?

We pay for treatment carried out at a hospital/facility that's covered under your policy. Please refer to your policy documents for details.

We also cover treatment at home if your specialist agrees this is possible and it can be supported by a homecare provider recognised by us.

## Out-patient limit

If your policy includes an out-patient limit, please refer to your policy documents to see how this applies to out-patient cancer treatment.

## What's covered

- Hospital charges for surgery and medical admissions at a network facility, a hospital covered by your policy or an NHS hospital recognised by us
- Specialists' fees (*subject to Aviva's fee guidelines for specialists, if applicable*)
- NHS cancer cash benefit for cancer treatment - we'll pay:
  - £100 per day for in-patient or day-patient treatment and for out-patient radiotherapy, chemotherapy, blood transfusions or surgical procedures
  - £100 for each day you receive intravenous (IV) chemotherapy at home
  - £100 for each week whilst you are taking oral chemotherapy drugs at home.

We'll pay the NHS cancer cash benefit if treatment would have been covered as a private patient. There's no limit to the amount you can claim but you won't be able to claim more than £100 in any one day.

NHS cancer cash benefit isn't available if you claim for the cost of an NHS amenity bed for the same treatment.

## Six week rule

If you have the six-week option, we don't pay for treatment as an in-patient or day-patient (including accident or emergency admissions) if it's available on the NHS within six weeks from the date your specialist recommends it. If you're diagnosed with cancer, this may mean that your treatment will be available on the NHS and therefore, we won't pay for most of the treatment that you need.

If you have the six-week option and you have treatment as an out-patient, we don't apply the six-week rule to that treatment.

However, if you need to be admitted for emergency treatment, for example a blood transfusion, we won't pay for that treatment.

The six-week option applies to the NHS cancer cash benefit.

We may need to contact your GP or specialist for details of your treatment before we can pay your claim.

We may also ask for a discharge summary from the hospital

- Post surgery services – includes specialist services immediately following surgery such as consultations with a dietician or stoma nurse, and insertion and replacement of a tube for artificial feeding
- Radiotherapy and chemotherapy. *If your policy has limited out-patient benefit, we'll still cover consultations and diagnostics tests in full whilst you are having radiotherapy or chemotherapy*
- Hormone therapy if you need it to shrink a tumour or where it's only available under specialist use and only within the licensing indications in the UK. We won't pay for hormones to prevent recurrence of disease, unless they're only available under specialist use and only within the licensing indications in the UK
- Targeted therapies being used to achieve a cure
- Targeted therapies, treatments and drugs used to maintain and control disease

## What's covered continued

- Bone strengthening drugs (such as bisphosphonates)
- Treatment prescribed by your specialist for side effects while you're receiving chemotherapy or radiotherapy
- Genetic testing if it is requested by a specialist to aid diagnosis or to help determine the type of treatment required
- Molecular profiling when being used to determine the most appropriate treatment
- Talking Through Cancer service. If you're diagnosed with cancer and are receiving treatment that's eligible under the policy our third party provider will arrange the most appropriate out-patient therapy for your needs. Included is a benefit for a support circle; you can choose up to four people to support you during your cancer journey. These people don't need to be insured on the policy but must be resident in the UK. Please refer to the policy wording for full details
- Up to £100 towards a wig if you suffer hair loss caused by cancer treatment. We'll pay £100 in total whilst you're a member of the policy, not every policy year
- Up to £100 towards a mastectomy bra if you need one because of cancer treatment. We'll pay £100 in total whilst you're a member of the policy, not every policy year
- Up to £5,000 towards the cost of the first external prosthesis following surgery for cancer
- Stem cell and bone marrow transplants. This includes collection, storage and implantation
- Monitoring after your treatment for cancer has finished. We don't pay for monitoring after treatment for non-melanoma skin cancer.  
*If your policy includes an out-patient limit, please refer to your policy documents to see how this applies to out-patient cancer treatment*
- Ongoing needs, such as regular replacement of tubes or drains, for up to five years after your treatment for cancer has finished.  
*If your policy includes an out-patient limit, please refer to your policy documents to see how this applies to out-patient cancer treatment*
- Preventative surgery, only if you've already had treatment for cancer that we've paid for. For example, we'll pay for a mastectomy to a healthy breast if you've been diagnosed with cancer in the other breast. (We won't pay for surgery where you have no symptoms of cancer, for example where you have a strong family history of cancer)
- End of life care:
  - we'll pay for end of life care in a hospital if this is medically necessary
  - hospice donation of £100 per night, up to £10,000 if you're admitted to a hospice
  - donation of £50 per day to a registered charity if you're visited at home by one of their nurses, up to the £10,000 limit.

## Amendment to Cover Guide

### What's not covered

The bullet point for 'Long term and chronic conditions' is **amended** to:

- Long term and chronic conditions. This exclusion doesn't apply to treatment for cancer

The bullet point for 'Routine medical examinations, including eye tests, health screens etc' is **amended** to:

- Routine medical examinations including eye tests and health screens etc. (If we've paid for you to have treatment for cancer, this exclusion won't apply with regard to cancer)

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