AVIVA

Fair+Square Club Target Market Statement

This document has been prepared by Aviva Health UK to provide an overview of our Fair+Square Club product. It is intended to help distributors understand the target market for this product, at new business and at point of renewal. In addition, distributors should consider whether any changes in circumstances may result in some features of the product no longer being suitable (for example distribution channel, features/covers, communication method and payment method). Some customers for whom the product is suitable may not be eligible for cover due to Aviva Health UK Limited's risk acceptance and eligibility criteria.

Aviva Health UK Limited is the Product Manufacturer for this product and may source elements of cover from third parties. Full details are contained within the policy documentation and on the Health adviser website.

Who is Fair+Square Club designed for?

Fair+Square Club is designed for Small, Medium Enterprises (SMEs) with 3-49 employees. Policies are intended to provide cover for company employees, directors and other designated members of an actively trading business, based in the UK, Channel Islands or Isle of Man.

This product is closed to new business, however, we do allow movement from our other SME Legacy products. Businesses can also add employees and their dependants to their policy.

Fair+Square Club is a product for business owners who want to provide access to healthcare services for their employees and their dependants, including referrals to consultants, admission to hospital and treatment at a convenient time and location. The product supports businesses to manage absence costs and provides an employee benefit to attract and retain employees.

Fair+Square Club offers members the choice to either receive in-patient or day-patient treatment in the NHS and receive a cash benefit or to receive this treatment within a private clinic or hospital. The product could remain suitable for businesses who want to provide this flexibility to their employees. All out-patient treatment including diagnostics and consultations will be covered in full in a private setting.

Private Medical Insurance is a premium product, providing an alternative to the healthcare services offered by the NHS. Therefore, it could remain suitable for businesses looking to offer a private experience and health benefits to their workforce and dependants.

To help manage costs, Fair+Square Club is a flexible product with the ability to offer subsections of the workforce different levels of cover.

What features should you be aware of when considering this product?

- Fair+Square Club could remain suitable for SMEs whose members have the legal right to reside, and be physically living, in the UK, Channel Islands or Isle of Man for the duration of the policy year other than trips abroad totalling no more than three months during the policy year.
- The product is designed to pay for the treatment of short-term (acute) conditions that occur after the member joins the policy.
- The product does not cover the treatment of ongoing or long-term medical conditions. These conditions are often referred to as chronic conditions.
- This product utilises the Fair+Square hospital list for all private treatment.
- This product provides private out-patient and diagnostic cover as standard, and if eligible in-patient
 or day-patient treatment is required, members have two options; continue using private facilities
 or use the NHS and receive a cash payment.
- Companies should consider whether this product is suitable for their business as members choosing the NHS route to receive a cash benefit may not receive treatment as quickly as they might in a private setting.
- Companies should also be aware that any cash payment for NHS treatment will be paid to the main member rather than the employer.
- Fair+Square Club is a community rated product; premium increases are based across the performance
 of the whole Fair +Square book of business and not on the performance of each individual company
 scheme. Premiums are also charged according to age bands, postal district and the underwriting chosen.
- Fair+Square Club is not suitable for sole traders or companies who wish to select cover for one or two key individuals only. In this case you may wish to consider Healthier Solutions or Solutions as a more suitable product for the customer.
- This product is also not suitable for larger businesses who wish to insure more than 49 members of staff. In this case you may wish to consider Solutions or Optimum as a more suitable product for the customer.
- There are different underwriting options available and your client should consider which option is best for their workforce and size of business.
- Up to 3 sub-categories can be formed with 3+ employees whereby different levels of cover can be designed for each category e.g. leadership, mid-managers and other employees.
- We recognise that some businesses have additional needs when buying or understanding our products. Aviva is committed to helping meet these needs. Please contact Aviva for guidance or support.

How can Fair+Square Club be purchased?

Fair+Square Club is a closed product so is not open to new business. However, existing policyholders can add new employees and dependants to their policy. We will also allow movement from our other SME Legacy products. To add members or to move to Fair+Square Club from another Aviva Legacy SME product, businesses should speak to their insurance broker or contact Aviva directly.

Product cover option	Cover options available	What is covered?	Who could the option be suitable for?
Core Cover	The comprehensive cover that all Fair+Square Club products start with. Businesses can choose to downgrade their cover from this, depending on their needs and budget.	Comprehensive out-patient cover, consultations and diagnostic tests in a private hospital. Core cover also includes cancer treatment, palliative care and extensive cover for aftercare, including consultations with a dietician, as well as money towards prostheses and a wig. Core cover also covers GP referred out-patient treatment by a physiotherapist, chiropractor or osteopath up to a maximum of 10 sessions in combined total per condition, each member. Core cover also provides out-patient mental health cover up to a total of £750 each member, every policy year. If a member requires eligible in-patient or day-patient treatment, Fair+Square Club provides the option to receive this treatment in the NHS and receive a cash benefit, option A, or to continue to receive private treatment in a private setting, option B. Option A If the member selects option A at the point of claim for planned eligible treatment (not including the first seven nights after an accident or emergency admission), they can receive the following benefits: For each insured member aged 16 or over: £500 for the first night £250 for day-patient treatment Subject to an overall combined NHS cash benefit of £10,000 each member, every policy year.	This option could remain suitable for businesses that want peace of mind that they and their workforce have comprehensive cover for diagnostic tests and treatment of an acute medical condition once under the care of a specialist. They also have extensive cover for the diagnosis, treatment and aftercare for cancer. This option could remain suitable for businesses that want to provide the choice to their employees and their families to use the NHS for in-patient or day-patient treatment should it be required or to receive a cash payment. The business should be happy that this flexibility may mean that employees may wait for longer for this treatment under the NHS. This option could also remain suitable for businesses that want the choice of accessing a number of therapies without the need for a specialist referral. The GP can refer members for treatment. This is usually for more minor ailments and injuries. This product only provides out-patient mental health cover, so the business should be comfortable that members will need to fund the cost of in-patient or day-patient mental health treatment themselves or have this treatment on the NHS. The business should be happy that cover for pre-existing conditions is dependent on the underwriting type that applies to each member.

Product cover option	Cover options available	What is covered?	Who could the option be suitable for?
Core Cover (Continued)		 £250 for the first night £125 for each subsequent night £125 for day-patient treatment Subject to an overall combined NHS cash benefit of £5,000 each member, every policy year. If this option is selected at point of claim all out-patient treatment related to this claim within the next six months will not be covered. Option B If the member selects option B at the point of claim for planned eligible treatment, they can receive full cover for hospital charges, specialist fees and diagnostic tests. Option B also provides additional benefits including parent accommodation and private ambulance. 	
Enhanced cover - T Mental Health Treatment	One option is only availated one option offering cover for all elements outlined	This benefit is only available to those businesses who chose to enhance their cover to include out-patient, in-patient and day-patient mental health cover when this benefit was originally offered. It is no longer an option and cannot be re-added if a business has opted to remove it. This option provides cover for mental health treatment as an out-patient, in-patient or day-patient up to a total of £10,000 each member, every policy year on referral from a GP to a psychiatric specialist or psychiatric therapist. If this option is selected it replaces the out-patient psychiatric cover stated in core cover.	This option could remain suitable for businesses who want to enhance the core cover by providing increased mental health cover if they or their employees are admitted to hospital for a mental health condition or referred by a GP for treatment by a psychiatric therapist or specialist. This cover comes at an additional cost. It can be removed if it no longer meets the business needs. Once it has been removed, it cannot be re-added. This option could remain suitable for businesses that have seen absenteeism from employees due to mental health issues. This option is not suitable for members who have pre-existing chronic mental health conditions.

Product cover option	Cover options available	What is covered?	Who could the option be suitable for?			
Ways to reduce premiums – These options reduce the level of cover on the policy but also reduce the premium to help support different budgets.						
Member Excess Options	£200 or £500	Excess options are available which apply to each member, every policy year. The excess is an amount that each member pays towards the cost of their eligible treatment, every policy year. The first eligible costs incurred each policy year will be paid for by the member, up to the chosen excess level. The remaining eligible costs will then be covered by the policy, regardless of the number of claims made.	This option could remain suitable for businesses who are happy for their members to pay the first part of the cost of the treatment themselves. In return, the business benefits from a reduction in their premium. Businesses with this option know how much their members will need to contribute towards their treatment. They should be happy they have chosen an excess amount that their workforce is comfortable they could fund should they need to claim.			
Hospital lists – This	product only provides	the Fair+Square hospital list.				
Fair+Square Hospital List	Only hospital list available to all members	This is the standard hospital list associated with Fair+Square Club. This list provides access to the private and NHS hospitals most frequently used by people with private medical insurance. Members can still utilise the NHS and receive the NHS cash benefit for in-patient or day-patient treatment as outlined in core cover.	Businesses with this list have peace of mind that they have coverage of most of the private hospitals across the country. Members will to be able to choose from several hospitals in their region for treatment. However, remote areas of the country may have less choice as coverage is less extensive. This list does not provide access to all the private hospitals in central London. Therefore, this product is not suitable for members who want to use the central London hospitals that aren't on this list. The full list of hospitals is viewable here . Members can also choose to utilise the NHS and receive a cash payment for in-patient or day-patient treatment.			

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