

Sick Pay

MEMBER GUIDE

What is Sick Pay?

Our group income protection insurance product, Sick Pay, is designed to provide an income for you in the event of a long-term absence from work due to illness or injury, which prevents you from working in your usual or a reasonable alternative occupation.

This guide is intended to provide high level factual information about the Sick Pay cover available as part of your employer's benefits provision and not the suitability of the cover for any particular employee. For full information please refer to the sick pay technical guide or policy terms and conditions or go to our website.

How does it work?

Sick Pay pays a percentage of your pre-absence salary and is payable if you are unable to continue working due to illness or injury. This benefit comes into effect after an initial period of sickness absence (known as the deferred period). During the deferred period you may receive occupational sick pay. Following the deferred period, payment of benefit will be subject to you meeting the requirements of our claim process. Please note that simply being signed off as unable to work by your GP will not necessarily mean you qualify for benefit under this Sick Pay cover.

The benefit is paid to your employer who will process it through their payroll system so that the deductions for tax, National Insurance contributions etc. are made. If you receive other income as a result of your illness or injury (e.g. from an individual income protection insurance product) it may result in us paying less to your employer. The income you receive from your employer will not normally impact any sickness benefit payment you qualify for from the government but you should get proper advice specific to your circumstances from the government's Disability Service Centre.

As well as the financial benefit, we'll also provide you with a dedicated rehabilitation specialist who will help you with your return to work. They will propose treatments and therapies to assist your recovery and liaise with you, your employer and GP throughout the process. Absences will be reported to us by your employer within five weeks of the absence commencing; this is important so that we can help you as soon as possible.

What additional services are available?

At any time, whether you are absent from work or not, you will be able to access our workplace support service, Support Matters. This can be accessed via a dedicated website, 24/7 telephone helpline, text, live chat and email. Your employer will provide you with access details. The service provides information and support for you on personal, family, financial and employment issues. A programme of face to face or telephone counselling is at the heart of the service.

When does the cover start?

Your employer will inform you whether you are eligible for cover. Once you meet the eligibility conditions, you are covered for Sick Pay provided that you are actively at work on that day (i.e. not absent due to illness, injury or incapacity). If you are absent on the day cover begins, you will not be included within the insurance policy until you return to work. You will not normally be asked to provide medical information before cover commences. If your level of benefit is very high, you do not meet the eligibility conditions or you do not join the scheme when you are first able to do so, we'll ask you to complete an online questionnaire about your health and lifestyle.

Based on your responses, and sometimes on additional evidence or medical tests we might require, we'll decide if cover can be provided and, if so, on what terms.

Your employer will have arranged the basis of the benefit, including the amount paid each month if your absence qualifies as a valid claim.

What is not covered?

Where you require a licence (other than a standard UK driving licence) to carry out your work, the loss of that licence will not, alone, be sufficient to make a valid claim. Also, if you have completed an online health and lifestyle questionnaire, we may have told you that we will apply specific exclusions to your cover as a result.

How long will benefits be paid?

Your employer will have decided on the payment period covered under this policy. Your employer will inform you of this (it could be for a limited period, e.g. five years, or until State Pension age). We will make payments under the terms of the policy until you are able to return to work, or you reach the end of the payment period. Once claim payments have begun, we will undertake regular reviews with you to check that you continue to satisfy the definition of incapacity. If you no longer meet this definition or you or your employer fail to participate in an agreed rehabilitation programme, we will stop payments under the policy.

How long does the cover last?

You will have cover for as long as you remain a member of the scheme. If you are absent due to maternity, paternity or adoption leave, cover will continue while you remain eligible for membership of the scheme.

Sick Pay cover ceases on the day you leave employment.

Making a claim

Your employer is responsible for making a claim against this policy. However, you will be asked to provide medical details in support of the claim and to participate in any assessment or rehabilitation as directed by us. A claim will be paid where you satisfy our definition of incapacity and that incapacity extends beyond the end of the deferred period. Claims will be paid to your employer and you will receive an income via your employer's payroll. Receipt of this benefit may impact your entitlement to some state benefits.

Taxation

As the payment to you is administered through your employer's payroll, the usual tax deductions will apply.

Questions and complaints

If you have any queries, please contact your employer in the first instance. If you wish to raise any query with us, or make a complaint, please contact our Group complaints team at:

AIG Life Limited
The AIG Building
58 Fenchurch Street
London
EC3M 4AB

by email to groupcomplaints@aiglife.co.uk

or by calling 0330 303 9974 (calls may be recorded for training and monitoring purposes).

If you are still dissatisfied following a formal response to your complaint, you can approach the Financial Ombudsman Service at:

Financial Ombudsman Service Ltd
Exchange Tower
London
E14 9SR

Tel 0800 023 4567



www.aiglife.co.uk