



Physio Essentials

For large corporate paid schemes
with 250+ insured employees

This brochure has been created for employers.
It isn't intended for policy members.



Contents

Looking after your employees' health	3
How Physio Essentials works	4
What's covered	5
What isn't covered	6
How to make a claim	7
Further information	9
What's next?	11

Looking after your employees' health

According to the Health and Safety Executive, an estimated 8.9 million working days were lost to work related musculoskeletal disorders in 2019/20, with an average of 18 days lost for each case*. These cases can often require the intervention of a GP and either physiotherapy, osteopathic or chiropractic treatment.

It's fair to say one session of treatment isn't very expensive, but many people will require a course of treatment to ensure they're fully recovered - this is when the costs can soon add up. Whilst NHS provision is available, this can often involve long waiting times to get an appointment.

Full private medical insurance (PMI) provides an alternative to the NHS, but this can prove an expensive option. Physio Essentials supports, guides and helps restore your employees' body movement after an injury or illness, and aims to get them back on their feet again as soon as possible.

This simple guide provides an overview of the Physio Essentials cover available to your employees.

*Work related musculoskeletal disorders in Great Britain (WRMSDs), 2020. Health & Safety Executive.

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How Physio Essentials works

Step 1

If an employee becomes ill or gets injured, and requires support to restore muscle and joint movement, they'll need to call the customer service helpline number. An email will then be sent to the employee which will provide a link allowing them to book a telephone appointment online with a qualified physiotherapist.

Step 2

They'll be contacted by a qualified physiotherapist to discuss their symptoms and assess the severity of the condition. Physio Essentials cover provides up to 5 clinical assessment calls each policy year.

Step 3

Depending on the outcome of the assessment, and the employee's clinical need, a physiotherapist will offer either:

- virtual physiotherapy - an online personalised programme of exercises for the employee to complete, supported by videos as well as emails, with further information and guidance to help ease symptoms. The employee also receives follow up calls to check on their progress.
- face-to-face physiotherapy - the employee will be given access to a network of physiotherapists to book a treatment session in their local area for a physiotherapist to assess their symptoms face-to-face. If further face-to-face physiotherapy is appropriate, they'll recommend the appropriate number of sessions to help resolve the symptoms.

If the physiotherapist doesn't believe the condition can be managed by physiotherapy, the employee will be provided with an electronic report and assessment to take to their GP who may then arrange for them to see a specialist.

Your Physio Essentials cover also provides:

- access to an exclusive online portal, providing information to encourage and support good back, neck, muscle and joint health.

What's covered

The table below gives a summary of the benefits available for this policy. The terms and conditions provide the full details of Physio Essentials.

Benefit	Notes
Telephone clinical assessment for pain in the back, neck, muscles or joints (musculoskeletal conditions), provided by fully qualified physiotherapists	Up to 5 telephone clinical assessment sessions each member, every policy year
Virtual physiotherapy for pain in the back, neck, muscles or joints (musculoskeletal conditions), including phone support	If recommended by the physiotherapist during the course of the telephone clinical assessment
Face-to-face physiotherapy for pain in the back, neck, muscles or joints (musculoskeletal conditions)	If recommended by the physiotherapist during the course of the telephone clinical assessment
Online information to support good musculoskeletal health	Unlimited access. Delivered by the physiotherapy providers

The goals of physiotherapy treatment are to achieve a good level of improvement in an employee's symptoms and try to return them to everyday activities, as they were before the injury or the onset of their symptoms.

This may not mean 100% recovery, and the best outcome may only be achieved after a period of self-management using the advice and exercises provided by their physiotherapist. The aim of the policy is to enable them to reach a level of recovery at which they can be comfortable and confident to carry on with their self-management programme.

What isn't covered

Domiciliary physiotherapy

Physio Essentials doesn't cover face-to-face treatment by a physiotherapist in an employee's home.

Exercise equipment and appliances

Physio Essentials doesn't cover equipment or appliances recommended by a physiotherapist, for example - orthotics, TENS machines or exercise equipment.

Treatment by a specialist

Physio Essentials doesn't cover referrals to or treatment by a specialist, for example, if a physiotherapist makes a referral following completion of a course of physiotherapy.



How to make a claim

Your employee's claim starts with a simple phone call

We'll need to know:

- the area of the body affected
- the date when they first experienced symptoms.

We'll review the claim and, if the employee hasn't used all of their telephone clinical assessments for the policy year, we'll confirm by email and provide them with access to the online booking portal to arrange their assessment.

A telephone clinical assessment (TCA) is a consultation with a fully qualified physiotherapist from the physiotherapy provider. This can also be arranged as a video call, where the employee can discuss their condition face-to-face, which could help the physiotherapist assess their condition. They'll review any musculoskeletal problem and recommend the most appropriate course of treatment, which could include virtual or face-to-face physiotherapy, or referral to a specialist.

Each TCA call can only cover one condition or set of symptoms. If the employee needs to discuss musculoskeletal symptoms affecting different parts of their body, for example the knee and the elbow, they'll need to book a separate TCA for each condition or set of symptoms.

If employee cover includes cover for their spouse, the employee should be made aware that any claims made by their spouse will be visible to the employee on their renewal information each year.

- **Virtual physiotherapy**

The physiotherapist will create a personalised programme for the employee to follow. It'll include specific exercises, with clear videos demonstrating what's required to help support and manage the condition as part of a tailored home exercise programme. This is available via the physiotherapy provider's online portal. They'll also arrange follow up calls to check on progress. Employees can also download a free app, on their smart phone or tablet, to use if they're away from home. It's also handy as it can send reminders to employees to complete their exercises.

- **Face-to-face physiotherapy**

If, in the course of the TCA, the physiotherapist considers that it's clinically appropriate for your employee to have face-to-face physiotherapy they'll arrange for them to see a physiotherapist from a network local to them. They'll then have a face-to-face assessment with that physiotherapist who'll determine what's required to treat their condition.

If the physiotherapist feels that specialist referral would be the best option, they'll provide the member with an electronic copy of their assessment which the member can take to their GP.



Further Information

Law

The law of England and Wales will apply to this contract unless:

- the policyholder and we agree otherwise, or
- at the date of the contract, the policyholder is a resident of (or, in the case of a business, the registered office or principal place of business is situated in) Scotland or Northern Ireland, in which case (in the absence of agreement to the contrary) the law of that country will apply.

If we decide to waive any term or condition of this policy, we may still rely on that term or condition at a later time.

We'll always write and speak to you in English.

If you've any cause for complaint

Our aim is to provide a first class standard of service to our customers and to do everything we can to ensure you're satisfied. However, if you ever feel we've fallen short of this standard and you've cause to make a complaint, please let us know. Our contact details are:

Aviva Health UK Ltd
Complaints Department
PO Box 540
Eastleigh
SO50 0ET

Telephone: **0800 051 7501**

Email: **hcqs@aviva.com**

Calls may be monitored and/or recorded.

We've every reason to believe that you'll be totally satisfied with your Aviva policy and with our service. It's very rare that matters can't be resolved amicably. However, if you're still unhappy with the outcome after we've investigated it for you, and you feel that there's additional information that should be considered, you should let us have that information as soon as possible so that we can review it. If you disagree with our response, or if we haven't replied within eight weeks, you may be able to take your case to the Financial Ombudsman Service to investigate. Their contact details are:

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone: **0300 123 9123**
or **0800 023 4567**

Email:
complaint.info@financial-ombudsman.org.uk

Website:
financial-ombudsman.org.uk

Please note that the Financial Ombudsman Service will only consider your complaint if you've given us the opportunity to resolve the matter first. Making a complaint to the Ombudsman won't affect your legal rights.

The Financial Services Compensation Scheme (FSCS)

We're covered by the FSCS. You may be entitled to compensation from the scheme if we can't meet our obligations. This depends on the type of business and the circumstances of the claim. Further information is available from:

Website: [fscs.org.uk](https://www.fscs.org.uk)

Our regulators

We're regulated by the Financial Conduct Authority:

The Financial Conduct Authority
12 Endeavour Square
London
E20 1JN

The Financial Conduct Authority is an independent watchdog that regulates financial services.

Aviva Health UK Limited, Chilworth House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire, S053 3RY. Authorised and regulated by the Financial Conduct Authority. Firm Reference Number 308139.

Our permitted business is advising on, arranging and administering general insurance and pure protection contracts. You can check this on the Financial Services Register by visiting the Financial Conduct Authority's website [fca.org.uk/register](https://www.fca.org.uk/register)

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Aviva offers a range of products. You may have your own insurance Intermediary who'll provide you with information about their permitted business and the range of products they offer.

You only need to pay the premium; you don't otherwise have to pay us for our services to you.



What's next?

It's time to find out just how Physio Essentials could help you provide your employees with a low cost healthcare option.

For more information, you could visit our website or email us. But we'd like you to call our healthcare sales consultants or speak to your usual financial adviser, so we can start shaping a policy to suit your needs.

Contact us

Sales support

0800 0014 272

hcnd@aviva.com

You can also contact us through your normal intermediary financial adviser.



aviva.co.uk/health

If you're deaf or hard of hearing and have a textphone, you may call us free of charge via BT Ttypetalk on **0800 959 598**. Calls may be monitored and/or recorded for our joint protection.

**This brochure is also available in braille,
large print and audio format.**

If required, please contact us on

0800 051 7501 to request a version

in a format more suitable for you.

Calls may be monitored and/or recorded.

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