

# AVIVA Private Medical Cover

## Neurodevelopmental Pathway Frequently Asked Questions (FAQs)

The following FAQs are provided in addition to the information within the Bronze, Silver and Gold Private Medical Guidebooks available under 'Learn about our benefits' > 'Private Medical Cover' > 'further information' > 'help and documents' on the Benefits Hub. Please read them carefully before progressing with the cover or starting a Neurodevelopmental claim.

### NatWest Private Medical Policy Rules

#### 1. Who is eligible for Private Medical Cover?

All colleagues, regardless of level, in GB, NI, Jersey, Guernsey & Isle of Man can elect Private Medical Cover with Aviva. It's available to elect as a new joiner, or in September during the Annual Election Window.

#### 2. Are there any qualification requirements before I can make a neurodevelopmental claim?

No. Once cover starts, effective 1st October 2024, you'll be able to start your claim. There's no policy excess or GP referral required. The neurodevelopmental support is available on Bronze, Silver & Gold levels of cover.

#### 3. Do I need to stay in the Aviva Private Medical Cover policy for a defined period, or can I come out once I've had a diagnosis?

There is a 2 year 'lock-in' on the policy. This means that you've got Private Medical Cover for a minimum of 2 years after taking out cover e.g., cover starts 1st October 2024, the earliest you'll be able to stop cover will be during September 2026 and would be effective 1st October 2026.

### Assessment Criteria

#### 4. Who can be considered for an assessment for Autism, Attention Deficit Hyperactivity Disorder (ADHD) & Tourette's Syndrome?

Anyone over the age of 7 who is on Aviva Private Medical Cover at either Bronze, Silver, or Gold level. Dependants must be added to your policy for them to be covered. This can be done in your new joiner window or during the Annual Election Window each September.

#### 5. What is the minimum age that someone can be assessed through Aviva Private Medical Cover?

The minimum age is 7, due to the potentially, more complex needs in younger children. NHS diagnosis would be required for those under the age of 7.

## 6. Can I be assessed for Dyslexia, Dyscalculia or Dyspraxia under Aviva Private Medical Cover?

No. These specific neurodivergences are not currently covered under the Aviva policy.

## The Assessment Process

### 7. What's the assessment process?

You'll be provided links to online screening forms. The form you receive will include a question set targeted to you/your dependant's potential diagnosis. These are standardised, research-based questionnaires. The form will also include questions relating to your mental health. Once these have been completed, you'll be contacted by a case coordinator to discuss the outcome and next steps.

If your pre-screening is positive (indicating, that a full assessment is clinically appropriate) then you'll be offered an assessment. A case coordinator will match you to an appropriate consultant for the assessment and keep you updated throughout. Then a clinician, or their support team will contact you to begin the assessment process.

There will usually be additional forms to be completed before the assessment can take place. See question 12 below for more information.

### 8. What if a full assessment isn't recommended?

Onebright (Aviva's Neurodevelopmental partner) will discuss the issues you're facing and may recommend accessing the Mental Health Pathway for support with anxiety, low mood etc., or signpost you to support organisations. Your case co-ordinator can arrange the mental health claim on your behalf, the first stage will be a telephone assessment with a mental health professional.

### 9. Are the assessments face to face or virtual?

Onebright take a tailored approach based on you as an individual. Factors such as your age, type of assessment required, history and wider mental health needs will be considered when discussing the best option for you.

Most of the ADHD assessments are virtual, removing the need to be in a particular location, therefore broadening access to a wider range of clinics to perform the assessment. Autism observations for individuals under 18 years old are usually done in-person.

Any travel required for you to attend the assessments face to face will be at your own expense. This is not covered by the Aviva policy, or the bank.

### 10. How long does it take to get an appointment?

This may vary, but assessment is likely to be around 6 – 8 weeks from contacting Aviva, assuming all pre assessment information is gathered and completed within the clinic timescales.

### 11. Who will undertake the assessment?

The assessment will be psychiatrist or pediatrician led but depending upon the clinic and age, a multi-disciplinary assessment (for Autism) may be facilitated e.g. may include other clinicians such as speech & language therapist and/or a psychologist.

### 12. What information will be needed to complete the assessment?

You'll be asked to provide developmental, social and medical history via an online questionnaire sent by the clinic.

For children, the parent/carer will be asked to provide this information before the assessment takes place. Input from school is also likely to be required but the clinic you're assigned can help with this. Depending upon the age of the child, they may also be asked to complete a questionnaire.

For adults, someone who knew you well during childhood will also be asked to complete the pre-assessment questionnaires to gather a wide range of input to help with the assessment. If this information cannot be provided, it may be that the assessment is inconclusive, and the clinic will speak to you about what further information may be helpful (e.g. school reports).

If you cannot complete an online questionnaire, other methods of completion can be facilitated.

### **13. Is support available to help complete the assessment forms?**

Yes. Speak with your case co-ordinator if you'd like help with this. They'll support & guide you through the form and answer any questions you have.

### **14. Can I be assessed for more than one condition at the same time.**

Yes, if those conditions are Autism, ADHD, or Tourette's. The clinicians will perform a broad neurodevelopmental assessment, capturing all three of these neurodivergences currently covered by the Aviva policy. The assessments will often be split into different appointments.

### **15. What if a mental health condition is identified as the sole challenge during assessment?**

If a mental health condition such as Obsessive Compulsive Disorder (OCD) or Post Traumatic Stress Disorder (PTSD) is identified, then care would be transferred to the dedicated Mental Health Pathway. There would be no charge for this transfer in care.

### **16. Can I use information I gathered for an NHS assessment as part of my developmental history?**

Yes. School and developmental history information previously sourced can be reused.

### **17. Can I finish the assessment process with Aviva if I've already started it via the NHS?**

Aviva are unable to 'pick up' an assessment part-way through, an example would be if you've had the first stage of the Autism assessment but not the second.

### **18. If I'm on the NHS waiting list, but no assessment has started, can I use this neurodevelopmental pathway instead?**

Yes.

### **19. Should I tell my NHS GP I'm having a private assessment?**

This is up to you. It may be helpful to discuss with your own NHS GP upfront as depending upon the assessments you're having and any associated diagnosis, medication may be prescribed. Your NHS GP will be asked to take on long term prescribing under what's called 'shared care' but they can decline such requests meaning you may be required to pay for medication privately yourself.

## **What happens after the assessment?**

There's no pressure to start any of the recommendations straight away, you can take time to process your diagnosis and proceed with the support available when you're ready to do so.

It's likely you'll be offered adapted CBT (Cognitive Behavioural Therapy). This form of therapy creatively adapts and modifies tools and techniques to meet the needs and strengths of each individual.

## 20. What support is available following my diagnosis of Autism, ADHD, or Tourette's?

The clinician will explain your diagnosis and any recommendations they've made to support you both in and out of the workplace. You'll be offered adapted CBT (Cognitive Behavioural Therapy) with a clinician matched to your needs.

If you're diagnosed with ADHD, you may also be given the option to consider medication. A gap of 6 weeks is recommended in clinical guidelines following a diagnosis to provide time to carefully consider whether medication is the right option for you.

At work, take a look at the '[changing your work environment](#)' pages on Insite to help make your work environment more comfortable and easier for you to do your job. You'll find them under Human Resources > Working here > Life Balance.

## 21. What support is available if CBT (Cognitive Behavioural Therapy) isn't suitable for me or my dependant?

Adapted CBT creatively adapts and adjusts CBT to meet the needs and strengths of the individual. The clinicians are specially trained to modify the tools and techniques and will take time at the beginning of therapy to deeply understand the difficulties experienced, key thoughts and behaviours to target, goals, passions, and values, to maximise engagement.

## 22. How many sessions of CBT would I be allowed?

The number of sessions offered are based on the outcome of the assessment and patient need.

## 23. Will my diagnosis be recognised if I move from England to Scotland?

Yes, it should. The assessment process follows NICE Guidelines and recognition of the approach is UK wide. The detailed report will explain the diagnosis approach taken.

## 24. Can I appeal the outcome of my assessment?

No. The assessment follows the NICE best practice guidelines and there should be no need to re-assess.

## 25. What happens if I want to access ADHD medication?

The clinic who diagnosed you will also be responsible for managing your medication. Different people require different prescriptions, so they'll see you initially over a 2–6-month period until the medication is stabilised and will keep your GP updated in this period. The NHS will not issue your prescription within this period, therefore, you'll need to pay associated costs with accessing private medication through the clinic. This includes the cost of medication and potential costs from private pharmacies. Make sure you understand the cost associated with this upfront as it's not covered on the policy and cannot be paid by the bank.

At the end of this stabilisation period, your psychiatrist will formally ask your GP to enter into a 'shared care arrangement' whereby your GP agrees to complete the ongoing prescribing. For the next 2 years, you can see the psychiatrist every 6 months for reviews. It's important that your GP also makes a referral for transfer of care into local NHS ADHD services where an NHS psychiatrist will complete reviews on an ongoing basis.

## 26. What happens if I cannot get a shared care arrangement with an NHS GP?

Not all NHS GPs are comfortable with prescribing ADHD medication and may decline the shared-care request. This decision sits fully with your GP and NatWest, Aviva or Onebright are not able to control or influence the outcome. You can consider finding an alternate GP and Onebright can help support you with this.

If shared-care is not an option with any NHS GP, your GP will still be asked to facilitate a request for transfer of care into local NHS ADHD services. Waiting lists and processes for local services are variable across the country and some health boards may choose to re-assess.

While accessing medication privately, you'll be responsible for funding the prescriptions and routine prescribing appointments which can be facilitated through Onebright's specialist prescribers. It's your responsibility to make sure you understand the associated costs before commencing any medication. If you cannot pay for the medication privately and shared care cannot be supported, you may need to come off the medication.

## 27. What happens when the 2-year support for ADHD medication comes to an end?

Due to the 'shared-care arrangement' and transfer of care request, your GP will ideally continue to prescribe, and your medication would be regularly reviewed by an NHS ADHD specialist service. Further appointments with the psychiatrist are not covered through your Aviva policy.

Anxiety is commonly associated with Autism. If medication is recommended for this, a mental health claim will be arranged for you, and you can see a psychiatrist to explore which medication is most appropriate. The psychiatrist would provide a copy of your report to yourself and your GP, with a request that your GP provides the prescription.

## 28. What if I already have a diagnosis?

The neurodevelopmental pathway is available for initial diagnosis and short-term support rather than long-term ongoing treatment if you've already had a diagnosis.

If you haven't already accessed adapted CBT following your diagnosis on this policy, you can make a claim to be referred for this therapeutic support.

Medication reviews for an existing ADHD diagnosis are not covered by the policy. You should speak with your assessing psychiatrist and GP regarding your medication.

If you're diagnosed with a neurodiverse condition and experience symptoms of a mental health condition (e.g., anxiety, depression) you can use the Mental Health Pathway for support.