



Association of British Insurers

ABI Guiding Principles
for
HIV and Life Insurance
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1. Background

In 1994 the ABI published the first Statement of Best Practice for Insurance and HIV ('the Statement'). It was revised in 1997, 2004 and, most recently, in 2008; in tandem with the advent of available Life Insurance cover to those with HIV in 2009. The Statement was designed to help insurers offering long-term insurance cover such as Life Insurance adopt good practice.

In 2015, the Statement was reviewed by a group of insurers and reinsurers from across the ABI's membership. It was unanimously agreed that HIV is now treated by insurers like any other pre-existing medical condition. It was therefore decided that a new document should stand in place of the Statement, primarily to reflect more recent attitudes to HIV across the industry, and to give confidence to customers with HIV that the industry is acting in accordance with the principles contained herein. The discussions led to the creation of this document, the 'ABI Guiding Principles for HIV and Life Insurance' ('the Guiding Principles').

As with any medical condition, HIV is a relevant consideration for insurers and they need to know about it. These Guiding Principles make clear that insurers will only ask questions which are relevant to underwriting risk and will not use information when it is inadvertently revealed by an applicant. Insurers are free to ask questions about the risk of HIV infection for a specific applicant, but will do so in line with these Guiding Principles.

A separate consumer guide has been created – 'HIV and Life Insurance' - to inform those with HIV that Life Insurance cover may be available to them and usually remains valid when in place prior to a diagnosis of HIV.

With thanks to the following organisations for their helpful contributions in the drafting of both these Guiding Principles and the consumer guide:

- Terence Higgins Trust www.tht.org.uk
- HIV Scotland www.hivscotland.com
- NAM Aidsmap www.aidsmap.com
- National Aids Trust www.nat.org.uk
- Unusual Risks Mortgage & Insurance Services www.unusualrisks.co.uk

2. Introduction

What is the purpose of these principles?

- 2.1 The Guiding Principles are for insurance industry professionals dealing with applications for insurance where HIV may be a factor.
- 2.2 For those individuals looking to take out a Life Insurance policy, the consumer guide, published alongside these Guiding Principles, provides information about HIV and Life Insurance and how to find insurers who provide cover for those who are HIV positive.
- 2.3 The Guiding Principles are not intended to address any legal, regulatory or other responsibilities of those complying with the Guiding Principles. They will need to consider these aspects in addition to the Guiding Principles.

Who should read the principles?

- 2.4 These Guiding Principles are intended primarily for insurance underwriters. Some aspects will also be relevant to others working in insurance companies, and staff should be made aware of it, including Chief Medical Officers, sales personnel and those working in customer services or complaints departments.

What status do the principles have?

- 2.5 These Guiding Principles apply from a start date of 28 July 2016 and will continue for a period of 2 years at which point they will be reviewed.

The Guiding Principles are voluntary, set out industry good practice and have been developed by the ABI in consultation with its members and relevant stakeholders.

3. Key principles

- 3.1 The key principles that underpin these guiding principles are:

- Principle 1 – Underwriting approach
- Principle 2 – Collection of information
- Principle 3 – Use of information
- Principle 4 – Company policy on HIV and underwriting
- Principle 5 - Confidentiality of sensitive data

Principle 1 – Underwriting approach

- 3.2 Insurers assess insurance applications fairly and according to the degree of risk that the applicant brings to the insurance pool. Insurers consider each application for insurance on a case-by-case basis, based solely on the best available relevant evidence.

Principle 2 – Collection of information

- 3.3 Insurers do not request information that is unnecessary or irrelevant to the risk being insured, such as speculative questions that rely on inference and assumption on the part of the underwriter.
- 3.4 Insurers should have a clear policy on asking an applicant (or the 'life assured' if the application is on behalf of another) to take an HIV test and make this available on request to applicants. As with requests for all other medical tests, requests for HIV tests should be compliant with these Guiding Principles, have a clear reason which is evidence based and can be reasonably explained to the applicant. An insurer will not insist that an applicant undergoes testing.
- 3.5 Insurers should explain whether the applicant is required to take a test and the process for taking a test. The insurer should notify the applicant about the availability of counselling associated with the test and if the test result is positive they contact the doctor who the applicant nominated prior to the test taking place.

Principle 3 – Use of information

- 3.6 Insurers are free to ask questions they feel are relevant and, as with all medical conditions, in reaching a decision on a particular application, the underwriter will take account of relevant information. A decision to offer Life Insurance cover will be based on statistical and actuarial principles.

Principle 4 – Company policy on HIV and underwriting

- 3.7 Each member company of the ABI should have a clear policy on how it deals with applications where HIV status and other medical conditions may be a factor. The ABI recommends that member companies regularly review their internal policies in relation to HIV based on all available evidence at the time of a review.

Principle 5 – Confidentiality of sensitive data

- 3.8 Insurers may request routine HIV tests (e.g. those required for the level of cover applied for) via an adviser in the same way as for other routine requirements.
- 3.9 Insurers will make it clear to applicants who it is they will share their information with and request appropriate consent from the applicant before they share it. Results of an HIV test will only be shared with a third party where explicit consent has been obtained from the applicant.
- 3.10 Insurers are not required to routinely advise applicants of a negative HIV test result but, in the same way as other test results, will send a copy of the test result to the applicant on request.

4. Complaints

- 4.1 Every insurer will have a complaints procedure that it follows when it receives a complaint from a customer. Following this procedure, if a customer feels they are still being treated unfairly, they can have their case referred to the Financial

Ombudsman Service. More details on the FOS can be found at www.financial-ombudsman.org.uk

5. Contact

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