

Recovery Support Benefit FAQs

Providing additional financial support for insured members after they return to work following a long term claim.



What is Recovery Support Benefit?

Returning to work after extended sickness or injury can be tough both emotionally and financially.

It's hard enough getting back into a work routine, let alone managing your finances when you may not get paid for a while after your claim has ended.

For this reason, we provide a discretionary Recovery Support Benefit for insured members which provides a cash lump sum after they return to work following a long term claim.

This way, you can continue to focus on your recovery, return to work motivated or feel less worried about the cash flow needed to pay the bills until you next get paid.

Definitions

To help you understand Recovery Support Benefit we have highlighted some words we use in this document in **orange**. The definitions of these words are shown below.

Discretionary benefit

The benefit is discretionary which means it can be changed or withdrawn by the Society at any time.

Important Notes

- There is no cash value for this benefit.
- This amount is payable per member regardless of how many Income Protection policies that are held with us.
- No benefit will be paid if the member's policy premiums are in arrears.
- Recovery Support Benefit may have an impact on means tested State benefits.
- Recovery Support Benefit has a tax free status, however, the Society reserves the right to amend this status if tax legislation changes in the future.
- Cover may be less than the member's needs and is intended to help with paying the bills in the interim between a claim ending and the receipt of earned income upon returning to work.
- Recovery Support Benefit is not an alternative to buying other relevant insurance.
- The member must notify the Society of any changes to their personal circumstances. See your Income Protection policy's Terms and Conditions for more information.
- Recovery Support Benefit was added on 24th May 2018 and we will only pay this benefit if you qualify for this benefit on or after this date.

What are the key features?

Who is eligible to receive Recovery Support Benefit?

Recovery Support Benefit is available to all new and existing insured Income Protection members of British Friendly Society.

When do you qualify to receive this benefit?

You will qualify to receive this benefit if all of the following conditions are met:

- You received your Income Protection benefit for a continuous period of 26 weeks or more
- Your claim ends at least 4 weeks or more before the end of your benefit payment term or policy termination date
- We have stopped paying all your benefits (i.e. Income Protection benefit or Back to Work support payments)
- You have returned to work full time for a continuous period of 4 weeks

Is there an additional premium for Recovery Support Benefit?

No. Recovery Support Benefit is a **discretionary benefit** which British Friendly Society currently offers to all insured Income Protection members at no additional cost.

How much benefit is payable?

The amount payable will be a lump sum equal to 4 times the member's last weekly benefit payment (per member). The benefit will be paid 4 weeks after the last Income Protection benefit, or Back to Work support payments are paid.

Can this benefit be claimed more than once?

Yes. However, we will only pay Recovery Support Benefit for the subsequent claim if it occurs more than 26 weeks after we paid the last benefit for the previous claim.

Making a claim

How do I make a claim?

Call us or write to us by e-mail or post after you've returned to work full time for a period of 4 weeks following a claim of 26 weeks or more. Our Claims Team will then assess whether we can pay you Recovery Support Benefit on a discretionary basis.

What information is required to claim?

Our Claims Team may request information from you to confirm that you have been back at work full time for a continuous period of 4 weeks.

When will a claim not be paid?

We will not pay benefit if the member is unable to provide any reasonable evidence we ask for in order to consider the claim.

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It feels good to be covered

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