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Mr Jon Dye Chair Association of British Insurers One America Square 17 Crosswall Street London EC3N 2LB

Sent via email

10 June 2020

Dear Mr Dye,

We are aware of instances of doctors' applications for income protection and life assurance policies being deferred on the basis of a positive antigen test for COVID-19. In some cases, there has been a suggestion that the member cannot re-apply for a period of 3 months. This is causing significant anxiety to our members at a time of already unprecedented pressure. We are grateful for your commitment to support the NHS and would appreciate it if you could clarify the position that insurers should take when assessing healthcare workers and those who may have had previous infection with COVID-19.

Firstly, we understand that insurers have been reluctant to offer policies to those with recent COVID infection due to the fact that they want to ensure the applicant has fully recovered before providing cover. However, seeking an early confirmatory (antigen) test is essential for healthcare workers to ensure early detection and minimise the risk of transmission to patients and healthcare workers. We do not feel that a positive antigen test should disadvantage a healthcare worker when applying for an insurance policy compared to someone that has had symptoms suggestive of COVID-19 but not undergone a confirmatory test. We would be grateful if you could confirm whether that is consistent with your stance on this issue. It is vital that the approach insurers take in this regard does not discourage people from taking an appropriately indicated test in keeping with government policy to test and trace.

Secondly, screening questionnaires typically ask whether the applicant has previously had a positive test for COVID-19. However, in most cases this does not distinguish between an antigen swab test, (that detects current or very recent infection) and an antibody blood test that simply looks for evidence of previous infection. Whilst we understand that insurers may be reluctant to offer income protection and life assurance policies to those with symptoms who have a positive antigen test until after recovery, we do not see any rationale to refuse or defer someone's application for a policy if they have fully recovered and have a positive antibody test. As per government policy, antibody testing is now being routinely offered and if as is hoped this may indicate a level of immunity, this would provide vital information in terms of how we maintain clinical services. Healthcare workers should not be discouraged from having

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an antibody test and, again, we would be grateful for clarity that insurers are not deferring policies based on a positive antibody test in an otherwise healthy, asymptomatic individual.

Thirdly, we have been informed that some insurers are asking about contact with people who are "COVID positive" but that the responses to these questions are being ignored by online underwriting tools for healthcare workers, who by the nature of their work will come into contact with patients who have COVID. Is this a consistent approach that is being taken by insurers? If it is not this would unfairly discriminate against healthcare workers who already take precautions in wearing PPE.

Fourthly, we understand that if an individual has their application deferred as a result of a recent COVID-19 infection, that this deferral will not adversely impact future applications. We would be grateful if you could provide clarification on this point.

These are important issues affecting healthcare workers and potentially other key workers in public facing roles. We firmly believe that these individuals should not be discriminated against. We would be grateful for your support on this issue and would welcome the opportunity to discuss these issues in more detail with you.

Yours sincerely

hand

Dr Chaand Nagpaul CBE BMA council chair