

BacktoBetter frequently asked questions

For companies with 250 employees or more

As a member of your company's healthcare scheme you'll be able to benefit from using the BacktoBetter service should you experience pain in your back, neck, muscles or joints, also known as musculoskeletal (MSK) pain.

Making a claim - no need to see your GP first.

1. Why have my company chosen to include BacktoBetter on my scheme?

The BacktoBetter service uses evidence-based treatment pathways to ensure you receive the right treatment at the right time. By choosing BacktoBetter, your company wants to ensure you have rapid access to expert advice and appropriate clinical treatment.

You'll receive a consultation between you and a physiotherapist from our third party clinical supplier. This can be done either via telephone, video call or through Phio, our MSK assessment app.

2. What are the benefits?

As an employee, you - and your family members aged 12 and over covered by the scheme - will have quick access to assessment and advice, helping you get the right treatment at the right time.

As part of the service, you'll receive a consultation between you and a physiotherapist from our third party clinical supplier. This can be done either via telephone, through Phio, our MSK assessment app or via video call. Video calls can be particularly helpful as you can discuss your condition face-to-face, helping your physiotherapist conduct a more comprehensive assessment.

During the assessment the physiotherapist will provide advice to help you manage your symptoms and pain. The physiotherapist will then determine your next steps.

If you need face-to-face physiotherapy treatment, you'll be referred to an appropriate clinic close to your work or your home. Even if you don't need a course of treatment after your assessment, a third party clinical case manager will ensure that you've got all the tools necessary to manage your recovery, including a detailed exercise and advice programme.

You'll receive regular follow-up calls from a case manager to ensure that your recovery remains on track and that you've got the support you need.

3. Who do I contact if I have pain or discomfort in my back, neck, muscles or joints?

Step 1 - Make a call

To access BacktoBetter, call the customer service helpline number which can be found in your member documentation. All calls to and from Aviva may be monitored and/or recorded.

Step 2 - Tell us what's happened

If your claim is eligible, we'll either:

- provide you with a link to our clinical provider's online portal where you can book your own appointment at a convenient time for you, or complete a digital assessment, or
- arrange for a case manager from one of our third party clinical providers to contact you.

This initial assessment will not only determine the most appropriate clinical pathway for your symptoms, but also screen for any conditions that may require further investigation.

Step 3 - Get your personal treatment plan

The third party clinical case manager will assess your symptoms and recommend the most appropriate, evidence-based, treatment pathway. If your symptoms can be treated through self-management, you'll be provided with an exercise and advice programme, which could help prevent similar symptoms from returning in the future.

If clinically appropriate, you'll be referred to a physiotherapist approved by the clinical provider for treatment, and/or to a specialist for further treatment or diagnostic tests as necessary.

Your physiotherapist will provide progress updates during your course of treatment, so the clinical providers can determine if you're likely to require additional sessions, onward referral to a specialist, or if you can be discharged from follow-up.

Step 4 - Let us pay the bills

At the end of your claim, we'll settle all eligible bills directly with the third party clinical provider, so you don't need to worry. If you have an excess or out-patient limit on your scheme, they won't apply to any self-management exercises advised by the clinical case manager, or to any physiotherapy treatment provided through BacktoBetter. However, all other treatment arranged through BacktoBetter will be subject to any excess and out-patient benefit limit, if applicable.

4. What is a clinical assessment?

This is an in-depth assessment of your symptoms and medical history by a third party clinical case manager to determine the most appropriate treatment pathway for you. Completed through self-assessment via our suppliers online portal or over the telephone, the clinical

assessment will include questions about the nature and duration of your symptoms, the impact they are having on your daily activities, and the presence of any symptoms which require emergency treatment.

5. What if I am already receiving treatment outside of the BacktoBetter service?

You'll need to discuss your individual circumstances with the Aviva claims team. It's important that before starting treatment you contact Aviva to ensure this is eligible under your scheme terms and conditions.

6. How long does a physiotherapy appointment last?

The length of your appointment depends on the type of assessment. Generally, appointment times are as follows:

- clinical assessment, digitally or via telephone – up to 30 minutes
- initial face-to-face assessment – 45 minutes
- physiotherapy treatment session – 30 minutes.

7. What happens if my clinical assessment recommends I self-manage, but my symptoms are not resolving?

Throughout your self-management programme, you'll receive regular follow-up calls to ensure that your recovery remains on track and that you've got the support you need. If you're not making sufficient progress with a self-management programme, a third party clinical case manager will consider whether onward referral for physiotherapy treatment is appropriate.

8. What happens if my condition is not resolved through self-management or face-to-face physiotherapy?

A third party case manager will contact you if an onward referral is appropriate. They'll guide you through the rest of your treatment pathway, ensuring you understand every step and what the rationale is behind decisions being made regarding your care. If appropriate, they'll refer you to a specialist for further investigations and/or treatment.

9. Why can't I go to a face-to-face appointment straight away?

17 percent of all BacktoBetter digital cases can be resolved through self management*, meaning that hands on physiotherapy treatments are not always clinically appropriate or necessary.

Clinical assessments, provided digitally or via the telephone, are in place to identify these cases and ensure you're treated correctly to help with a speedy recovery.

10. What if I've seen my GP?

If you've seen your GP and they have recommended a specific treatment, please call Aviva to discuss this referral. If you have been referred for physiotherapy, you will be transferred to our third party clinical provider to arrange an appointment. If you are referred to a specialist, Aviva can provide you with a choice of specialists and hospitals.

Diagnostic tests are also covered under BacktoBetter.

11. What happens if I'd prefer to be seen by a chiropractor or an osteopath?

Manual therapy techniques used by chiropractors and osteopaths such as manipulations and mobilisations are also offered by the physiotherapists registered with our third party clinical providers.

However, if a clinical case manager agrees that you should be referred to an osteopath or chiropractor, Aviva will manage this stage of your claim. Benefit will be limited to up to 10 sessions per scheme year and your excess and out-patient limit (if selected) may apply.

12. What happens if I am referred to a specialist?

Whether you're referred following your clinical assessment, or from your treating physiotherapist, a third party clinical case manager will provide you with an open referral. You will then need to contact Aviva who will provide you with a choice of specialists and hospitals.

13. Will I have to pay an excess towards my treatment and will it affect my out-patient limit?

If your claim is successfully managed through BacktoBetter with telephone support or a course of physiotherapy alone, you won't need to pay the excess on your claim, nor will it impact your out-patient limit (if applicable).

However, if you are referred to a specialist for diagnostic tests or treatment, your excess and out-patient limit will be affected. Your clinical case manager will provide more details on how this works.

14. Why do I need to use a physiotherapist approved by the third party clinical provider?

Our third party clinical providers carry out robust governance processes when a physiotherapy practice is approved. Each clinic is required to complete a quality audit focusing on clinical safety and service standards. By working with quality assured physiotherapists, you'll receive treatment and support from providers who meet our standards in delivering care for you. Additionally, we receive information about the treatment outcomes from the physiotherapists following your face-to-face sessions. This reporting enables the third party clinical case manager to escalate your treatment pathway in a timely manner, for example, by identifying whether you require onward referral to a specialist for further investigation.

15. Who do I contact if I have a complaint, query or want to give feedback about the service I have received?


Any queries or feedback relating to the BacktoBetter service should be directed to the customer service helpline at Aviva which can be found in your member documentation.

Need this in a different format?

Please get in touch if you would prefer this brochure (**GEN5171**) in large print, braille, or as audio.

Lines are open **Monday to Friday from 8.00am - 6.30pm**. Calls may be recorded and/or monitored.

How to contact us

 **0800 158 3348**

 **contactus@aviva.com**

 **aviva.co.uk**

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