

The complaint

Mr K complains about the way Great Lakes Insurance SE dealt with a claim on his pet insurance policy.

Where I refer to Great Lakes, this includes its agents and claims handlers acting on its behalf.

What happened

In December 2022, when Mr K's pet dog had a problem with lameness, his vet carried out some investigations to see what was causing the problem. This included a fine needle aspiration (FNA) on a lump on his dog's leg. In January 2023 the vet referred his dog to another vet for a second opinion.

Mr K made a claim on his policy in January 2023 for the initial investigations, followed by a number of further claims as further vet's fees were incurred. Sadly, in February he was advised his dog had a terminal condition that couldn't be treated.

Great Lakes accepted the claims and made payments, but in March 2023 told Mr K it would need to deal with the claim for the FNA as a separate claim. This was because the vet had noted that the lump was not related to the lameness, so it couldn't be paid as part of the same claim. Great Lakes also said it was still waiting for some information from the vets. On 20 March Great Lakes wrote to say it had paid the claim but not the fee for the FNA.

Mr K's vet wrote to Great Lakes explaining that it carried out the FNA to see if the lump was related to the lameness and so, as it was part of the same investigation, thought it would be fair to pay it as part of the same claim.

Mr K complained that Great Lakes took 12 weeks to deal with the claim and rejected part of it despite the vet saying this was part of the same claim. He was also unhappy at the way he had been treated by some staff when he called to discuss the claims.

Our investigator said it was fair for Great Lakes to deal with the claim for the FNA as a separate claim, given what was recorded in the vet's notes. But after considering further comments from Mr K he said there had been unnecessary delay and Mr K had been caused some distress and inconvenience. He asked Great Lakes to pay compensation of £250.

Great Lakes accepted there had been some delays but said it wasn't responsible for all of this, as some delay was due to it waiting for information. It offered to pay £125. Mr K didn't accept the offer and said £250 was more reasonable.

As no agreement has been reached the complaint has been passed to me to determine.

What I've decided – and why

I've considered all the available evidence and arguments to decide what's fair and

reasonable in the circumstances of this complaint.

The relevant industry rules and guidance say insurers must deal with claims promptly and fairly; provide reasonable guidance to help a policyholder make a claim and appropriate information on its progress; and not unreasonably reject a claim. They should settle claims promptly once settlement terms are agreed.

The claims Mr K made were covered by his policy and that's not in dispute. The complaint is essentially about how long it took Great Lakes to handle the claims and the way it dealt with Mr K.

Great Lakes didn't refuse to deal with the costs claimed for the FNA procedure. It simply said that would need to be dealt with as a separate claim. I know Mr K questioned why that was necessary since it would end up paying the same amount. But the vet's notes made at the time clearly said the lump was "*definitely not related to the lameness*". If it wasn't part of the same issue then it was appropriate to deal with it separately. So I agree it was reasonable for Great Lakes to do that.

But I also agree the claims could have been dealt with more quickly. Great Lakes has pointed out that some of the delay was due to it waiting for information from the vets, which is true. And once it had all the information it needed, it did pay the claims. But there were also occasions where it told Mr K it was waiting for information which the vets had told him they'd already provided. He has also explained how difficult that time was for him, facing the sad loss of his pet, and that he had some difficult calls with Great Lakes' claims handlers. I've listened to a recording of a call he made following his complaint where he explained all of this.

He had recently lost two other pets and now had to face the fact this pet had a terminal condition. The delays, extra chasing for information and the way some calls were handled added greatly to his distress. In the circumstances I think a payment of £250 is fair.

My final decision

I uphold the complaint and direct Great Lakes Insurance SE to pay compensation of £250 to Mr K for the distress and inconvenience caused to him.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr K to accept or reject my decision before 16 October 2023.

Peter Whiteley
Ombudsman