

The complaint

Mr V has complained that British Friendly Society Limited ('British Friendly') unfairly settled his claim.

What happened

Mr V has an income protection insurance policy with British Friendly.

He made a claim when he was absent from work for around four months between August and November. British Friendly paid benefit until September based on the information available.

Mr V complained as he didn't think British Friendly had acted fairly. Unhappy, he referred his complaint to the Financial Ombudsman Service.

Our investigator looked into the complaint but didn't think British Friendly had done anything wrong.

Mr V disagreed and so the case has been passed to me for a decision.

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.

Having done so, I don't think this complaint should be upheld. I'll explain why.

- The background is well known to both parties so I won't repeat everything here. Instead, I will focus on what I consider to be key to my decision.
- The relevant rules and industry guidelines say an insurer should handle claims promptly and fairly. And shouldn't unreasonably reject a claim.
- The policy terms confirm pre-existing medical conditions are excluded unless Mr V has been trouble-free for 2 years. The policy defines incapacity as follows: *"This means that you are totally unable to carry out your occupation due to your own physical or mental illness or injury resulting in a complete or partial loss of income."*
- When Mr V made the claim, British Friendly tried to call him but Mr V says his condition prevented him from answering and British Friendly should have sent him a claim form as set out in its terms and conditions.
- Having reviewed the correspondence, I haven't seen any evidence to show that Mr V specifically told British Friendly he would not speak about the claim on the phone at all. Mr V did say in an email that he was trying to keep away from his phone but there was no clear instruction for British Friendly not to contact him by phone. So I don't think British Friendly did anything wrong by trying to speak to Mr V on the telephone.

And it did send him a claim form after its failed attempt to contact him by phone. So I don't think it acted outside its terms and conditions.

- British Friendly requested Mr V's medical notes from his GP but was told that they had been sent to his new GP. Mr V confirmed he hadn't registered with a new GP. British Friendly say they presumed Mr V's records had gone to the central booking and it would be very difficult to obtain his records.
- Had British Friendly been able to obtain these records, it would have assessed whether Mr V had a pre-existing medical condition but in the absence of these records, it arranged for Mr V to speak to a nurse to discuss his illness. Mr V did not want to do this and confirmed he had returned to work in November. So British Friendly reviewed the claim based on the limited information it had.
- British Friendly decided to accept the claim based on the private GP consultations. The GP note from September shows that Mr V could return to work if he wanted to and didn't need to take the full month off. He didn't actually return until November but British Friendly explained the evidence didn't support incapacity until November.
- Mr V was requesting sick notes from his GP based on his self-reporting. Based on the policy terms and conditions and definition of incapacity, I don't think British Friendly's decision was unreasonable. As the GP said Mr V may be fit to return to work in September, he was no longer considered incapacitated, even if he had a sick note.
- British Friendly also provided a clear explanation to Mr V that it may request his medical records for any future claims based on the possibility of a pre-existing medical condition. I think this is reasonable.
- Overall, I am satisfied British Friendly dealt with Mr V's claim fairly and reasonably. So I won't be asking it to pay anything further.

My final decision

For the reasons set out above, I don't uphold this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr V to accept or reject my decision before 11 March 2024.

Shamaila Hussain
Ombudsman