

The complaint

Mr C, X and Mr C have complained about the service they received from Inter Partner Assistance SA ('IPA') while they were abroad.

All reference to IPA includes any agents acting on its behalf.

For ease, I will refer to Mr C throughout my decision.

What happened

Mr C and his family travelled abroad and unfortunately, two of his children needed to attend hospital for medical attention. He called IPA and was told that his policy couldn't be located.

He then produced his global health card and the hospital treated his children without the need for a claim to be made.

Mr C complained to IPA about its lack of assistance and also asked for a premium refund as he didn't think the policy was necessary as the family had global health cards.

IPA accepted that it didn't provide a reasonable level of service when Mr C called for which it apologised and paid £100 compensation.

Unhappy, Mr C referred his complaint to the Financial Ombudsman Service.

Our investigator looked into the complaint and found that the compensation amount offered was reasonable.

Mr C disagreed and asked for an Ombudsman's decision.

And so the case has been passed to me.

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 and has been set out in some detail by our investigator. So I won't repeat everything here but will instead focus on what I consider to be key to my decision.
- When Mr C called IPA, it should have provided him with appropriate information and guidance.
- Mr C called IPA to enquire about making a claim when his children needed to attend hospital but IPA was unable to locate his policy and didn't provide him with any assistance. Mr C says he then overheard someone talking about a global health card

and when he produced his, his children were seen and treated for free. So he didn't need to make a claim for treatment costs.

- But he is unhappy with the phone call he had made to IPA as he wasn't able to get any information or guidance and also says that he didn't need the travel insurance policy he had bought as his costs were going to be covered with the global health card.
- The travel insurance policy Mr C bought provided cover for a wide range of circumstances including cancellation, delay, disruption, lost baggage as well as medical expenses and repatriation. It wasn't simply a policy to cover the costs of medical treatment. So I don't think a refund is due as the insurer was on risk for any valid claim for the duration of the policy term.
- In relation to the calls Mr C made, IPA has accepted that it should have provided Mr C with a better service but overall, no loss was caused to him as a result of those phone calls. Mr C didn't need to make a claim so any advice or guidance he would have received would have put him in the same position – that his medical costs were covered using the global health card. However, IPA paid £100 compensation for the distress and inconvenience caused which I think is adequate for the failure to provide assistance and information when Mr C called. He was able to use his global health card to get the treatment needed and so the effects of the call with IPA were minimal and not long lasting. So I won't be asking IPA to do 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 C, X and Mr C to accept or reject my decision before 8 March 2024.

Shamaila Hussain **Ombudsman**