

The complaint

Mr H has complained that BUPA Insurance Limited ('BUPA') incorrectly declined a claim which led to loss of earnings.

What happened

Mr H has a private medical insurance policy, underwritten by BUPA.

Mr H made a claim and told BUPA he needed to undergo some monitoring using equipment but that this wasn't available through his GP for 7 days. He thought it may be available sooner privately and asked for preauthorisation. But BUPA declined and said it wasn't covered. However, a couple of weeks later, it contacted Mr H to tell him it had made a mistake and that he was covered.

Mr H complained as he said he had lost earnings as a result of BUPA's mistake. BUPA said it didn't cover loss of earnings but offered to pay Mr H £150 compensation.

Our investigator looked into the complaint but didn't think BUPA was responsible for Mr H's loss of earnings.

Mr H 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 think BUPA's offer of £150 compensation is reasonable. I'll explain why.

- The relevant rules and industry guidelines say an insurer should handle claims promptly and fairly. And shouldn't unreasonably reject a claim.
- BUPA accepted that it incorrectly rejected his claim when Mr H called for preauthorisation on 8 February 2024. He told BUPA he had a flight on 13 February 2024 and wanted to complete the procedure before then. BUPA incorrectly told him the claim wasn't covered so Mr H went ahead on the NHS. He missed his flight which resulted in a loss of earnings.
- BUPA realised it had made a mistake and emailed Mr H on 23 February to confirm that the procedure was covered and asked if Mr H still required this or if he had paid privately.
- Mr H made a complaint. BUPA responded to accept its error and offered £150 compensation.
- Mr H says he was unable to work as a result of waiting for the equipment on the NHS. Had BUPA correctly approved the claim in the first place, he would have received his equipment sooner and would have been able to make his flight on 13 February 2024.
- I've carefully considered whether Mr H's loss of earnings was a direct result of BUPA's error and I'm not satisfied that it was.

- As set out by the investigator, Mr H called on 8 February 2024 to request preauthorisation. He didn't have an appointment booked and so I'm not satisfied that he would have been able to see someone sooner than he did on the NHS.
- Due to the short time available between the call on 8 February 2024 and Mr H's flight on 13 February 2024, on balance, I don't think Mr H would have been able to book an appointment and see someone privately in time for his flight.
- Mr H has said that he has been able to see doctors and consultants at weekends, but this doesn't guarantee that he definitely would have been seen. So I can't say BUPA is directly responsible for Mr H's loss of earnings. Mr H may always have had to miss his work for that period even if BUPA had correctly authorised the claim to begin with.
- BUPA offered Mr H £150 compensation for the distress and inconvenience caused to him as a result of its error. As the impact wasn't long lasting, I think £150 compensation is appropriate.

My final decision

For the reasons set out above, I think BUPA's offer of £150 compensation is reasonable and so I direct BUPA Insurance Limited to pay Mr H £150 compensation if it hasn't already done so.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr H to accept or reject my decision before 23 January 2025.

Shamaila Hussain
Ombudsman