

## **The complaint**

Mr S complains about the decision by BUPA Insurance Limited ('Bupa') to turn down his private medical insurance claim.

## **What happened**

Mr S holds private medical insurance cover with Bupa through his employer. He was experiencing anxiety and so had an assessment with a mental wellbeing practitioner. She said that Mr S reported longstanding difficulties with concentration and anxiety, and had queried whether his difficulties were symptomatic of a diagnosis of anxiety or attention deficit hyperactivity disorder (ADHD). It was noted that he was aware the policy didn't cover diagnosis or treatment of ADHD. She recommended that Mr S have a full psychiatric assessment for further exploration of his mental health symptoms.

Mr S had an assessment with Dr S (consultant psychiatrist). Dr S said his screening tests for ADHD and depression were both indicative of symptoms for both these disorders. Dr S thought Mr S would benefit from a thorough assessment to consider the differential diagnoses of generalised anxiety disorder with lack of concentration, or adult ADHD with secondary anxiety.

Bupa refused to cover the cost of a neurodiversity assessment, as it said this wasn't covered under Mr S's policy. Mr S paid for the assessment himself. He brought a complaint to this Service about Bupa's refusal to cover the cost of the assessment.

Our investigator didn't recommend the complaint be upheld. He thought Bupa had turned down the claim in line with the policy terms.

Mr S didn't accept our investigator's findings, and so the matter 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.

The policy excludes behavioural conditions, and gives ADHD as an example. An exception to the exclusion applies which says:

*'If your benefits include benefit 5.1.4 assessments for neurodiverse conditions, we pay for out-patient assessments for a neurodiverse condition...'*

Under benefit section 5.1.4, it explains that Bupa will cover assessments for neurodiverse conditions, but only if the membership certificate shows the insured member is covered for this benefit.

I've checked Mr S's membership certificate, and his employer chose not to include cover for neurodiversity assessments. So the exception to the exclusion doesn't apply.

I'm therefore satisfied that claims relating to ADHD aren't covered under Mr S's policy, and that his policy doesn't include the additional cover for neurodiversity assessments. Mr S was made aware of this before he went ahead with the assessment.

I understand the behavioural condition exclusion I've referred to above used to have another exception. This allowed cover for diagnostic tests to rule out ADHD when a mental health condition was suspected. However, this was removed in January 2024.

Bupa set out changes to the policy from January 2024 in a document called '*Important Information. Here's how your Bupa health insurance is changing.*' Bupa says this was included with the renewal pack of April 2024. This document explained that Bupa had removed this exception, but confirmed that mental health cover still included support for mental health symptoms arising from behavioural conditions.

Dr S wanted Mr S to have the ADHD assessment in order to establish whether he had an anxiety disorder or ADHD with anxiety symptoms. So, whilst the assessment would have been covered under the policy before January 2024, that was no longer the case when Mr S made his claim.

I recognise my decision will disappoint Mr S, but I find that Bupa turned down his claim in line with the policy terms.

### **My final decision**

My final decision is that I don't uphold this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr S to accept or reject my decision before 16 December 2024.

Chantelle Hurn-Ryan  
**Ombudsman**