

## **The complaint**

Mrs B is unhappy that AXA PPP Healthcare Limited trading as AXA Health declined a claim she made on her private medical insurance policy.

## **What happened**

The details of this complaint are well known to both parties, so I won't repeat them again here. Instead, I'll focus on giving my reasons for my 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 relevant rules and industry guidelines say that AXA have a responsibility to handle claims promptly and fairly. And they shouldn't decline a claim unreasonably.

The policy terms and conditions say:

"The plan does not cover treating dental problems or any routine dental care including treatment of cysts in the jaw that are tooth related or are of a dental nature. This also means we will not pay any fees for dental specialists, such as orthodontists, periodontists, endodontists or prosthodontists. We will cover the following types of oral surgery when you are referred for treatment by a dentist:

- reinserting your own teeth after an injury
- removing impacted teeth, buried teeth and complicated buried roots
- removal of cysts of the jaw (sometimes called enucleation)".

I'm not upholding Mrs B's complaint because:

- I don't think AXA mislead Mrs B during their initial conversations with her about her dental issues. I think they gave her guidance based on their understanding of the situation, which was prior to the more detailed medical evidence being received.
- AXA agreed to cover treatment for Mrs B but I think they made it sufficiently clear that they would cover an initial consultation, diagnostic tests, the removal of the lower right second premolar roots and a follow up appointment. They didn't authorise the removal of the tooth and went on to explain the removal of non-impacted teeth or non-retained roots then this couldn't be covered by the healthcare plan. I don't think this was ambiguous as Mrs B has suggested.
- The medical evidence that's available doesn't demonstrate that Mrs B's tooth was impacted, was buried or had complicated buried roots. The medical evidence suggests its removal was recommended because of infection in the tooth. So, on a

strict application of the policy terms and conditions there is no cover for the tooth extraction.

- The removal of the tooth may well have been necessary but that doesn't mean it's covered by the policy. In the circumstances of this complaint the reason for the removal of the tooth falls outside the scope of cover. Mrs B's policy is a private medical insurance policy. It's not a specific dental insurance policy and it's common for private medical insurance policies of this nature to offer limited cover for dental surgery.
- The removal of the tooth was recommended prior to the lesion being discovered. It also has a separate billing code to the treatment of the lesion as it's a separate procedure. Whilst there may have been a connection between the infections, I don't think that means they have to be considered as one procedure in the way Mrs B has suggested.
- In any event, although the policy does cover the removal of cysts, I don't think that means that AXA also had to cover the cost of extracting the tooth in order to access or remove the cyst. The policy terms make clear that cover for extraction of teeth is limited to specific circumstances. I'm not persuaded it's fair and reasonable in the circumstances of this case for AXA to pay for something that's simply not covered by the policy.

### **My final decision**

I'm not upholding this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs B to accept or reject my decision before 24 March 2025.

Anna Wilshaw  
**Ombudsman**