

## The complaint

Mr H complains about the way AXA Insurance UK Plc (AXA) handled a claim he made under his motor insurance policy.

## What happened

The circumstances of this complaint are well known to both parties and so I've summarised events. In September 2022 Mr H was unfortunately involved in an accident involving another vehicle. Mr H contacted his insurance broker and provided it with details of the accident. It appears at this stage, Mr H's claim was passed to an accident management company to deal with.

AXA were made aware of the accident and so wrote to Mr H asking for details of the accident and asking him to complete an accident report form. On 15 September 2022 Mr H sent AXA an email making it aware he had reported the claim to his broker and wanting to know who was dealing with the incident. He sent a further email asking for a response, but AXA didn't respond.

In May 2023 AXA raised a payment toward the third-party claim costs. Mr H contacted AXA again in June 2023 and December 2023 asking for his previous correspondence be acknowledged and looking to raise a complaint. AXA responded to say Mr H would need to call it, and it had raised all necessary payments to the third-party. Mr H was unhappy with this as he believed the accident wasn't his fault, and he hadn't received any response to his previous correspondence.

On 24 April 2024 AXA issued Mr H with a final response to his complaint. It said it acknowledged Mr H had sent multiple emails which hadn't been responded to. It said it hadn't received any information from Mr H's broker and the third-party claim had been dealt with, but acknowledged its claim department failed to make contact with Mr H. It acknowledged there had been a lack of communication and it hadn't managed Mr H's expectations appropriately and so it would pay a total of £775 compensation. It said it would also arrange for its claim team to carry out a full review of the claim and contact him with an update. Mr H referred his complaint to this Service.

Our investigator looked into things. She said the evidence suggested Mr H's claim was originally being dealt with by an accident management company. She said she understood why AXA assumed it wasn't dealing with Mr H's claim given he had told it he had reported the incident to his broker, and it received correspondence to report the accident as notification only. She thought the compensation AXA had offered was reasonable to acknowledge the distress and inconvenience caused.

Mr H asked for his complaint to be considered by an ombudsman. He said when he reported the claim he did so using the details provided with his policy and wasn't told at any point he wasn't dealing with AXA. He said had AXA responded to him in September 2022 he would have used it to deal with his claim.

As Mr H has asked for an ombudsman to consider his complaint, it's been passed to me to

decide.

## 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.

I want to acknowledge I've summarised Mr H's complaint in less detail than he's presented it. I've not commented on every point he has raised. Instead, I've focussed on what I consider to be the key points I need to think about. I mean no discourtesy by this, but it simply reflects the informal nature of this Service. I assure Mr H and AXA I've read and considered everything that's been provided.

I also want to make clear what I've considered as part of this decision. I've considered the actions of AXA up to its final response of 24 April 2024. Mr H has raised issues he has experienced with AXA since this date, but Mr H would need to raise this as a separate complaint with AXA in the first instance.

The relevant rules and industry guidelines explain AXA should handle claims promptly and fairly. AXA have acknowledged it hasn't considered Mr H's claim as it should have done. It has said it failed to respond to Mr H's correspondence, didn't communicate effectively and failed to set Mr H's expectations. It has paid a total of £775 compensation and so I've considered whether this is reasonable to acknowledge the impact to Mr H.

AXA failed to respond to Mr H following his emails in September 2022. Even if AXA believed it wasn't dealing with the claim for Mr H, it should have responded to Mr H to clarify this. Similarly, it should have responded to the emails he sent in 2023. It's failure to do so has caused Mr H unnecessary inconvenience as he had to spend time chasing a response.

AXA settled the third-party claim costs in May 2023, but I don't think it has done so appropriately. The correspondence Mr H sent to AXA in September 2023 made it clear he didn't believe he was at fault for the accident, had footage of the incident and an independent witness. I can't see AXA explored any of this prior to settling the third-party's claim costs. AXA has now agreed to look at Mr H's claim again, which I understand is ongoing. I think this is reasonable in the circumstances. However, it would have been particularly distressing for Mr H to learn AXA had settled the third-party claim costs without having discussed this with him.

I think Mr H has been caused considerable distress and inconvenience due to AXA's errors and I think this has happened over a considerable length of time. However, when taking everything into consideration I think the total compensation of £775 AXA have paid Mr H is reasonable to acknowledge this. I think compensation of this amount is reasonable when a business's errors have caused considerable distress and inconvenience over an extended period of time, which I think is the case here. So, I don't require AXA to increase the compensation it has paid to Mr H.

Mr H has said he would like AXA to be directed to deal with his claim, including carrying out appropriate investigations into liability. However, AXA have already agreed to do this and I'm aware investigations into Mr H's claim are ongoing. As mentioned, it has an ongoing responsibility to deal with Mr H's claim promptly and fairly. If Mr H is unhappy with the way AXA have handled his claim following AXA's final response of 24 April 2024, he is able to raise this as a separate complaint.

Mr H has said he was unaware his claim was being passed to an accident management company. However, I haven't seen evidence he has raised this complaint with the business

responsible for doing so. And so, if Mr H is unhappy with this, he would need to raise this as a separate complaint to the business responsible in the first instance.

## My final decision

For the reasons I've outlined above, I don't uphold Mr H's complaint about AXA Insurance UK Plc.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr H to accept or reject my decision before 1 August 2025.

Andrew Clarke **Ombudsman**