

The complaint

Mr and Mrs N complain about the service they received from Astrenska Insurance Limited when Mrs N needed medical assistance abroad.

What happened

Mrs N was on holiday when she found a lump which needed to be investigated. Mrs N says her condition worsened during the time she was abroad to the point that she needed surgery.

Astrenska agreed to cover the initial investigations into the lump. However, they didn't agree to cover the surgery as they considered Mrs N could return to the UK for treatment. Mrs N said she was in a lot of pain and would have been unable to do so. Mrs N complained to Astrenska about their decision to decline cover and the service she received.

Astrenska acknowledged that Mrs N hadn't received good service at times, particularly during a phone call which Mrs N had complained about. They offered a total of £100 compensation but maintained their decision not to cover surgery was reasonable. Mrs N complained to the Financial Ombudsman Service.

Our investigator looked into what happened. He thought Astrenska should increase the compensation to a total of £250. But he thought Astrenska had acted reasonably when saying that they wouldn't cover the surgery.

Astrenska accepted the investigator's recommendation. Mrs N didn't agree and asked an ombudsman to review her complaint. In summary she highlighted the level of pain she was in and that the condition was getting worse daily. She said she felt confused and unsupported throughout the process. She highlighted that she was already on the maximum dose of painkillers and had kept the insurer updated as requested. She felt the case should be considered from the patient's point of view. So, the complaint was referred 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.

The relevant rules and industry guidelines say that Astrenska has a responsibility to handle claims promptly and fairly. And they shouldn't decline a claim unreasonably.

The policy terms and conditions say:

Emergency Cover. This policy is not private medical insurance; we cover treatment which cannot wait until you return home from your trip, with the aim of ensuring you are well enough to return to the UK, which may include cutting your trip short, or to continue your trip as planned."

They also explain that there is no cover for:

Any costs which in the opinion of the treating medical practitioner or in our opinion are not medically necessary or can be delayed until your return to your home country. If the treating medical practitioner's opinion is not the same as our doctor's opinion, then our doctor's opinion takes priority.

I'm sorry to hear of the circumstances which caused Mrs N to claim. It's clear that it was a very difficult and worrying time for her. I have a lot of empathy for the circumstances she's described.

I think Astrenska needs to pay Mr and Mrs N a total of £250 compensation. But, I don't think they need to settle the bill for surgery. I say that because:

- I'm satisfied that Astrenska reasonably concluded that Mrs N's surgery could wait until her return to the UK. I don't think the available medical evidence clearly set out why the treating doctor considered that emergency surgery was required whilst abroad. Whilst it might have been the treating doctor's recommendation there was little persuasive evidence as to why that was his opinion. If the surgery was required urgently, I'd have expected the treating doctor's recommendations to make that clear and explain why surgery couldn't wait. I also note that there was a gap of around a month between the date Mrs N says surgery was first suggested and the planned date of surgery.
- I can see that Astrenska did seek the view of their Chief Medical Officer before declining to cover surgery. That's what I'd expect them to do in such circumstances where there is a difference of opinion between the treating doctor and the medical team. Astrenska's medical team were of the view Mrs N could return home with enhanced pain management. The policy terms say Astrenska is entitled to prioritise their doctor's opinion. And, based on the evidence that's available, I think Astrenska were reasonably entitled to rely on that opinion and decline to cover treatment abroad.
- At the point Mrs N went ahead with surgery I'm satisfied that Astrenska had made it sufficiently clear that they weren't going to cover it. I appreciate that Mrs N was in an upsetting situation and wanted to resolve her symptoms as soon as possible. However, I remain of the view that she undertook surgery knowing that there was a significant risk she wouldn't be covered on her insurance policy.
- Astrenska accepts that there were times when the communication wasn't as clear as it should have been and that one call in particular was not handled well. I think a total of £250 compensation fairly reflects the impact of the worry and confusion caused to Mrs N by these customer service issues. I also bear in mind that Astrenska authorised around £1700 in medical expenses which they aren't seeking to recover from Mrs N. So, overall, I think the compensation offered is fair and reasonable in all the circumstances.
- I appreciate that Mrs N was receiving communication from lots of different people. That's very common during medical assistance claims simply because travel insurers need to operate a 24/7 service and are often helping lots of customers who are unwell abroad in different countries. So, this hasn't changed my thoughts about the overall outcome of the complaint.

Putting things right

Astrenska needs to put things right by paying a total of £250 compensation to Mr and Mrs N for the distress and inconvenience caused by poor customer service and unclear

communications.

My final decision

I'm partly uphold this complaint and direct Astrenska Insurance Limited to put things right in the way I've outlined above.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr and Mrs N to accept or reject my decision before 13 October 2025.

Anna Wilshaw
Ombudsman