

The complaint

Mr B complains that Astrenska Insurance Limited trading as Collinson Insurance didn't allow him to continue and extend his cover under his travel insurance policy.

What happened

Mr B had a backpacker single trip travel insurance policy which covered him between 30 January 2024 to 24 December 2024. The insurer was Astrenska.

Mr B unfortunately needed medical treatment in September 2024 whilst abroad. And he returned to the UK for treatment in October 2024. But when he wanted to continue his trip and extend the cover he had under his policy, Astrenska said the cover under his travel insurance policy had ceased.

Mr B says that the policy terms say that Astrenska must give him 14 days' notice before cancelling the policy, as well as refund the unused premium. But Astrenska has relied on a policy term which sets out the circumstances when no refund will be given for the unused premium. Mr B doesn't think the term is lawful, or fair.

Mr B also says he was given the reassurance that he could continue his trip and be covered under the same policy, as long as he declared the new medical condition he now had. To resolve the complaint, Mr B wants Astrenska to refund his full premium.

Astrenska said that its medical team had recommended that Mr B needed to curtail his trip and return home early to continue his medical treatment in the UK. And in this situation, the policy terms say cover ceases, and there's no refund of premium. Astrenska said Mr B was entitled to make a claim for the medical costs he incurred during his trip, as well as a claim for curtailment.

One of our investigators reviewed the complaint. Having done so, she thought that Astrenska had acted in line with the terms and conditions of the policy. And she didn't think it had treated Mr B unfairly or unreasonably.

Mr B didn't agree with the investigator's findings. In short, he maintains that the policy term Astrenska has relied on isn't fair or reasonable. He also isn't happy that he was reassured his cover could continue before he returned home, and he was only told afterwards that this wasn't possible.

As no agreement was reached, the complaint has 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.

Industry rules set out by the regulator (the Financial Conduct Authority) say insurers must handle claims fairly and shouldn't unreasonably reject a claim. I've taken these rules, and other industry guidance, into account when deciding what I think is fair and reasonable in the circumstances of this complaint.

Firstly, Mr B has referred to the policy term for when the insurer cancels the policy. But this doesn't apply in the circumstances. Astrenska didn't cancel the policy. Cover under the policy simply ceased in line with the terms and conditions of the policy. I appreciate Mr B may not agree, but I'm satisfied this is a fair interpretation of the circumstances and the policy terms.

The "Return Home Cover" of the policy says the following:

"The cover under your travel policy allows you to make 2 return trips to your home country during the policy period.

You must be aware of the following conditions that will apply should you choose to use this option:

- You are only allowed 2 return trips during the policy period*
- Each trip can only be for a maximum of 21 days*
- If your trip home exceeds 21 days your policy will terminate immediately and you will need to purchase a new policy should you wish to travel again*
- When using the return home cover, all cover is suspended on clearance of customs in your home country and restarts after the baggage check-in at your international departure point to your overseas destination.*

Please note, you cannot claim for any travel and/or accommodation expenses under this cover.

All cover ceases if you have made a claim or intend to claim under the 'Cutting Short Your Trip' Section of the policy, or if we require you to return home early for medical reasons then all cover under this policy will cease for any further travel. No refund will be given for the unused portion of the policy."

I appreciate that under the terms of the policy, Mr B was able to return home, continue the trip and remain covered, as above. But the key here is the last paragraph of the above term. I don't think this term is unlawful or unfair. Insurers are entitled to decide what level of risk they're willing to accept in return of a premium. Mr B had a single trip travel insurance policy which included an exception to returning home during the period of cover. But otherwise, once the policyholder has travelled, and the insurer recommends they return home early for medical reasons, the terms make it clear that cover under the single trip travel insurance policy ceases.

I'm satisfied Mr B had the benefit of the policy, as he was covered by the policy when he travelled, and he was able to make a successful claim under the policy. And I can see that Astrenska's medical team said that he should return to the UK for medical reasons. So, I'm satisfied Astrenska has acted in line with the terms and conditions of the policy, and it has treated Mr B fairly and reasonably. I don't think it would be fair or reasonable for me to ask Astrenska to refund Mr B any part of the premium for a policy that he's had the benefit of, and when the policy terms make it clear that cover ceases in his circumstances.

Mr B says that he was told prior to returning home that he'd be able to continue his trip and still be covered under this policy. But it looks like this was likely a conversation he had with the administrator of the policy. If Mr B is unhappy with the actions of the administrator, he would need to raise a complaint about them separately.

I can see that the administrator got in touch with Astrenska about this, and Astrenska told the administrator that cover would cease in line with the terms and conditions of the policy. So, I can't see that Astrenska gave Mr B incorrect information about this when the administrator queried it.

However, even if Astrenska did give Mr B incorrect information as above, this wouldn't change the outcome of this complaint. This is because I don't think this would have prejudiced Mr B's position. He had always intended to return to the UK at this point, and I'm satisfied he had access to his policy terms which set out the relevant terms clearly. Astrenska also clarified the policy coverage before Mr B continued his trip, which meant that he was able to find alternative cover before doing so.

I'm sorry to disappoint Mr B, but I don't think there's anything Astrenska needs to do, to put things right in the circumstances of his complaint.

Mr B has since raised concerns about Astrenska's medical assistance whilst he was abroad. If he remains unhappy, he needs to raise these issues as a new complaint with Astrenska in the first instance.

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 B to accept or reject my decision before 23 October 2025.

Renja Anderson
Ombudsman