

## The complaint

Mrs V's complaint is about a claim she made on her Allianz Insurance Plc ('Allianz') pet insurance policy.

Mrs V says Allianz treated her unfairly.

## What happened

The details of this complaint are well known to both parties, so I won't repeat them here. Instead, I'll focus on providing 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.

Having done so, I don't uphold Mrs V's complaint for broadly the same reasons set out by the investigator. Before I explain why I wish to acknowledge both her strength of feeling and the various submissions she's made. Whilst I've read everything she's said, I won't be addressing it all. That's not intended to be disrespectful. Rather it's representative of the informal nature of the Financial Ombudsman Service. Instead, I'll concentrate on the crux of Mrs V's complaint, namely whether Allianz treated her fairly.

The starting point is the policy terms. The exclude cover for *"Any behavioural problem or illness."*

The words *"behavioural problem"* are not defined but the policy explains *"illness"* to be:

*"Any sickness, disease, defect, abnormality and/or change from a healthy state. This includes any defect or abnormality which your pet was born with, or which was passed on by his/her parents."*

In this case Mrs V's pet was exhibiting symptoms of anxiety. Mrs V's claim is for the cost of treatment in respect of that. I've thought about the pet's symptoms within the context of the policy terms, and I am satisfied that the treatment of anxiety does fall into a behavioural problem or illness, which accords with our longstanding approach to such conditions. I appreciate that in this case it is possible the pet's symptoms could well have been related to dementia and that the vet was uncertain about whether that was the case, as recorded in its clinical notes. But I don't think this makes a difference to the outcome of Mrs V's complaint because the treatment of dementia would still fall into the exclusion I have noted above for *"illness"*.

Allianz agreed to pay for the initial investigations into possible dementia as a gesture of good will to Mrs V. They said they did so to help ease the transition between the migration of her policy from another underwriter in 2003 who might have covered this type of condition, to their own policy. I don't know what Mrs V's previous policy provided cover for, but from what I've seen Allianz did make clear when they became the underwriter, that the cover they were

offering did not extend to any behavioural issue or illness (as defined above) both in the Insurance Product Information Document (IPID) and the policy terms. For that reason, I think they did more than they needed to by funding part of a claim their policy didn't offer cover for.

Overall, it is a matter for an insurer to determine what risks they are prepared to cover. As long as they have made clear what key elements they are and aren't prepared to cover when offering a policy, as they did here, to allow policyholders to decide whether to take it out, we wouldn't generally conclude they did something wrong.

I appreciate that Mrs V is unhappy that Allianz didn't provide her with an explanation akin to the one they provided this Service with about why her claim was turned down. Whilst I appreciate what she says, I do think they provided enough information to make clear why the problem she was claiming for wasn't covered, even if they didn't explain it in quite so much detail. Mrs V should also note that complaint handling is not something we can consider on a stand-alone basis as in any event so although I appreciate she found Allianz' conduct disappointing, it isn't a matter I can take any further.

### **My final decision**

For the reasons I have set out above, I don't uphold Mrs V's complaint against Allianz Insurance Plc.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs V to accept or reject my decision before 12 March 2026.

Lale Hussein-Venn  
**Ombudsman**