

The complaint

Mr and Mrs R are unhappy with the price of their policy after Aviva Insurance Limited took over responsibility for the travel insurance connected to their package bank account.

What happened

Mr and Mrs R have the benefit of an annual travel insurance policy connected to a bank account. They are unhappy with the additional premiums charged by Aviva for trips longer than 31 days and the additional premiums for health conditions.

Aviva looked into what happened and didn't uphold the complaint. They explained they'd replaced the previous underwriter of the policy and communicated changes about the cover to policyholders in May 2024. They said that Mr and Mrs R had been quoted for additional cover in line with the policy terms.

Our investigator looked into what happened and didn't uphold the complaint. She thought Aviva had acted fairly, and in line with the policy terms. She was also satisfied Aviva had adequately explained why Mr and Mrs R had been quoted different prices for the medical premiums. So, she didn't think Aviva had acted unfairly.

Mr and Mrs R didn't agree. They highlighted their age and said that they were vulnerable. They also said that they didn't find out until the last minute before travelling about these issues so they didn't have time to do anything. They also explained Aviva had more recently refused to refund the premiums. Our investigator explained that Aviva was entitled to do that because Mr and Mrs R had cancelled the additional cover options outside the cooling off period and had benefitted from cover. As Mr and Mrs R remained unhappy the complaint was referred to me to make a 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.

I can understand it was disappointing for Mr and Mrs R to incur additional charges for their cover. I empathise with their position as I can see it's caused them a lot of additional worry. However, I'm not upholding this complaint as I don't think Aviva has treated them unfairly. I say that because:

- The policy terms and conditions explain there's a 31 day limit for each individual trip. Aviva has charged an additional premium as Mr and Mrs R wanted cover for a trip that was longer than 31 days. I think that's in line with the policy terms.
- I appreciate that Mr and Mrs R wanted Aviva to just charge them for the additional days over and above that limit. But that's not how the policy is priced – an additional premium is charged per trip. That's a commercial decision Aviva is entitled to take when offering cover. It's not my role to direct Aviva how to structure the pricing of the policy. And I'm satisfied Mr and Mrs R have been treated in the same way as other

customers who wanted to go on a trip longer than 31 days.

- I'm satisfied that Mr and Mrs R were sent information about changes to the policy when Aviva became the provider. That included a summary of cover which set out that a longer trip upgrade for every trip longer than 31 days. Mr and Mrs R travelled in May 2025, so I'm satisfied they had sufficient time to look into this issue and decide whether alternative cover was more suitable for their needs.
- I'm satisfied that Aviva fairly calculated the premiums in relation to the medical screening. I appreciate that there were differences in the prices quoted for Mr and Mrs R, even though they had the same condition. I've looked at the breakdown of the premiums prepared by the underwriter. I think that the premiums quoted were fair, and reflected the information Aviva had about Mr and Mrs R's individual circumstances. For example, it was relevant that they were different ages. So, the fact that they had the same medical condition wasn't the only relevant factor. The underwriting information is commercially sensitive, and can't be shared with Mr and Mrs R, but I hope it reassures them to know that someone independent has reviewed it.
- I've carefully considered what Mr and Mrs R have said about their age, vulnerability and that they were stressed about travelling. However, having reviewed the available evidence, I'm satisfied that Aviva have treated them fairly and in line with the relevant policy terms.
- Mr and Mrs R asked for a refund of the premiums outside of the 14-day cooling off period set out in the policy documentation. I think it was reasonable for Aviva to decline this. Mr and Mrs R have had the benefit of cover, and it was open to them to source alternative cover prior to travel if they were unhappy with the price quoted by Aviva. I appreciate that they were stressed about travelling and under some pressure of time. But I don't think that's because of anything that Aviva did. So, I don't think it would be fair and reasonable to direct Aviva to step outside the policy terms and conditions and refund the additional premiums.

My final decision

I'm not upholding this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr R and Mrs R to accept or reject my decision before 13 January 2026.

Anna Wilshaw
Ombudsman