

The complaint

Mr H is unhappy with the service he received from AXA PPP Healthcare Limited trading as AXA Health and that they didn't cover his claim for a medical device.

What happened

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

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

I'm sorry to read of the circumstances which led Mr H to claim, and the impact his condition has had on his professional life. However, whilst I have a lot of empathy with his circumstances, I'm not upholding this complaint because:

- I'm satisfied it was reasonable for AXA to provide Mr H with a list of Ear Nose and Throat specialists. That's what was recommended in the GP referral.
- It transpired the specialist Mr H first saw wasn't able to help Mr H with sleep apnoea. But I don't think that's something AXA is responsible for. AXA don't have access to the specific detail of what work a consultant is able to carry out. And, I think they've reasonably highlighted that it was for the consultant to check what Mr H's symptoms and potential diagnosis was, before arranging an appointment.
- I appreciate that Mr H was told by the first consultant that AXA were aware he didn't treat sleep apnoea. However, it's unclear who that was communicated to and in what circumstances. And, in any event, as I've outlined above AXA don't hold detailed information about what a consultant can't help with within their specialism. That's standard industry practice and is typical of how many private medical insurers work.
- Mr H was then referred to another consultant who also couldn't help. But that wasn't a process AXA was involved in. Mr H acted on a recommendation from the first consultant. So, that's not something I can reasonably hold AXA responsible for.
- I appreciate that Mr H says his condition worsened and I'm sorry to hear that's the case. But based on the available evidence I'm not persuaded that's as a result of anything AXA did wrong.
- Mr H was told he wasn't covered for a medical device (called a CPAP machine) for his sleep apnoea. I think that's fair as the policy terms specify that CPAP machines aren't covered. This information was also highlighted to Mr H during the claims

process. So, I think AXA has acted fairly and in line with the policy terms when declining this part of the claim.

My final decision

I'm not upholding this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr H to accept or reject my decision before 11 February 2026.

Anna Wilshaw
Ombudsman