

The complaint

Mrs S has complained that The Royal London Mutual Insurance Society, Limited (“Royal London”) declined to register a claim under a critical illness policy.

What happened

The background to this complaint is well known to the parties so it serves no purpose for me to repeat all the details here. In summary Mrs S has a critical illness policy with Royal London. She has had the policy since 2002. In February 2025 she suffered a cardiac arrest whilst undergoing testing for a medical syndrome. Mrs S tried to make a claim, but Royal London wouldn’t register it as her policy didn’t cover cardiac arrest.

Unhappy Mrs S complained to our Service. Our investigator didn’t recommend the complaint be upheld, they didn’t find that Royal London had treated Mrs S unfairly.

Mrs S appealed.

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 agree with the conclusions reached by the investigator for these reasons:

- The relevant regulatory rules provide that Royal London must handle claims promptly and fairly and must not unreasonably reject a claim. So I’ve looked at all the circumstances here to see if Royal London acted in accordance with the regulations.
- Mrs S has asked for a medical review, but it is not in dispute that in February 2025 Mrs S suffered a cardiac arrest and required ICU care. The issue here is what is covered by her policy.
- Unfortunately for Mrs S her policy doesn’t cover cardiac arrest – so it follows that she has no cover for this condition. Royal London did consider whether Mrs S met the definition for coma, which is included in her policy, but the definition wasn’t met.
- I do understand Mrs S’s disappointment – she has suffered a serious medical event and believes that her policy should respond. But in order for a claim to be considered the condition must be listed in the policy and meet the specific policy definition. As cardiac arrest isn’t covered by Mrs S’s policy, I don’t find that Royal London treated her unfairly or unreasonably by not registering her claim.
- Later policies may include different conditions or definitions – but it wouldn’t be reasonable to require Royal London to consider a claim under a policy which she doesn’t have.
- Finally, Mrs S has said that Royal London has paid similar claims under older

policies. It may be this is so, but such evidence is not before me. Nevertheless even if it were, I must consider Mrs S's complaint on its own facts, evidence and circumstances. And here I don't find that Royal London has treated her unfairly for the reasons I've given.

- I can see that Mrs S has suffered a serious health issue and that its consequences are ongoing. I'm very sorry that my decision doesn't bring Mrs S the news that she hoped for.

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 Mrs S to accept or reject my decision before 19 March 2026.

Lindsey Woloski
Ombudsman