

## **The complaint**

Mr H complains that Philip Williams (G INS) Management Limited failed to transfer him within an insurance trust scheme from being a retired member to a staff member.

## **What happened**

Mr H is a member of a representative body (that I'll call 'M'). M provides an insurance trust scheme that has a number of insurance policies within it. The scheme was arranged by Philip Williams on behalf of the trustees in its role as insurance intermediary, and it also administers the scheme. There are separate benefits for staff members and retired members (for ease, I'll refer to these as the staff member scheme and the retired member scheme). The retired member scheme doesn't include a number of health insurance benefits, including sick pay.

Mr H was a member of the scheme in his employed role. In 2017, he retired from this role and was transferred into the retired member scheme and paid premiums via his pension. Around three months later Mr H returned to work, but in a different role to the one he previously held.

In 2024, Mr H was injured and stopped work. He wanted to make a claim for sick pay benefit but was told he wasn't eligible as he was registered as a retired member rather than a staff member.

Mr H queried this with M. After looking into it, M said they were told by the health benefit insurer that they would only allow someone to remain in the staff scheme for health insurance without underwriting if there had been a break of less than four weeks. As Mr H had been retired for nearly three months, the insurer said he would have needed to reapply with a new application and satisfy underwriting. As this didn't happen, he remained in the retired member scheme. They said he could now apply for the staff member scheme, but the application would need to be underwritten, and backdated claims couldn't be considered.

Mr H said he had notified M in 2017 to let them know he had returned to work. He said he wasn't sent an application form to complete. Philip Williams then liaised with Mr H about the matter and confirmed there was no trace of an application being made. Mr H remained unhappy and thought M and Philip Williams were at fault.

Philip Williams issued a final response on 4 August 2025. It said Mr H would need to take up the matter with M. Unhappy with this response, Mr H brought a complaint to this service.

Our investigator looked into things but didn't recommend the complaint be upheld. She said there was no evidence that Philip Williams had been notified that Mr H wanted to be added to the staff member scheme.

Mr H didn't accept our investigator's findings and so the matter has been passed back to me to consider.

## **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.

In considering this complaint, I've taken account of relevant law and regulations, regulators' rules, guidance and standards, codes of practice and what I consider to be good industry practice.

Philip Williams has explained that after someone has moved to the retired member scheme, they cannot automatically transfer back to the staff member scheme, as this would be subject to a new application (and I understand this needs to be approved by the health insurer). Philip Williams told Mr H he would have been required to submit a new application form to M, and this would have been passed to Philip Williams, and then onto the insurer for the underwriting process. It said it had no trace of an application being made to it.

Mr H says he called M in 2017 when he returned as an active member of staff to let them know this. He recalls M told him to put this information in an email, which he says he did. Unfortunately, Mr H doesn't have a record of sending this email. I understand M doesn't have a record of receiving it. So, Mr H wasn't asked to complete an application and has therefore remained in the retired member scheme.

As Philip Williams has no record of being told that Mr H needed to transfer into the staff member scheme and didn't receive a completed application form to pass onto the insurer, I agree with our investigator that it didn't do anything wrong here.

I've noted Mr H's comments that he has paid a higher amount in premiums as a retired member than he would have paid if he'd been in the staff member scheme. He wants the overpayment to be repaid. Though as I've found that Philip Williams wasn't at fault for what happened, I don't require it to compensate Mr H for any financial loss he has experienced as a result of remaining in the retired member scheme. I would suggest Mr H raises this concern directly with M.

## **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 H to accept or reject my decision before 14 April 2026.

Chantelle Hurn-Ryan  
**Ombudsman**