complaint

Mr F has complained that AIG Europe Limited turned down a claim for an accident under his Disabling Injuries Protection Plan. And that it won't pay out under a Hospital Cash Plan, which it says was cancelled in 2006.

background

Mr F had the above two policies with a company that's an appointed representative of AIG. And he tried to make a claim following an accident under these in 2015. AIG said the Hospital Cash Plan was cancelled in January 2006 when the direct debit payment was cancelled. And it said this meant there wasn't anything due under this policy. And it said there wasn't anything due under the Disabling Injuries Plan, as it only provides cover if Mr F is disabled because of the accident or he's suffered a fracture.

Mr F complained to AIG, but it still wouldn't pay his claim. And he eventually complained to us. Our adjudicator said AIG's approach was reasonable. But Mr F still doesn't think it is, so his case has come to me for a final decision.

my findings

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've decided not to uphold Mr F's complaint.

As our adjudicator explained, Mr F's Hospital Cash Plan – plan number ending F4N – was cancelled in January 2006. I know he doesn't agree, but I'm satisfied from what AIG's provided that it was. And I can see AIG's appointed representative wrote to Mr F to tell him this had happened. This means he's not entitled to claim on it for anything that happened after this date.

He does have a Disabling Injuries Protection Plan – plan number ending B54 - which is still in force. But this policy only provides cover if Mr F becomes permanently disabled or suffers a fracture due to an accident. And from what I've seen on AIG's file neither applies to Mr F. So this means he's not entitled to a payment under the plan.

I realise Mr F has raised a lot of queries and he's not really happy with the way AIG has dealt with them. But I think it's done a reasonable job in dealing with his complaint and queries.

This all means it's not appropriate for me to uphold Mr F's complaint against AIG.

my final decision

I've decided not to uphold Mr F's complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr F to accept or reject my decision before 11 April 2016.

Ref: DRN1441744

Robert Short ombudsman