

The complaint

Mr L is unhappy with the service he received from MetLife Europe d.a.c whilst it handled his claim.

What happened

Mr L had an accident policy with MetLife. He claimed on his policy following a diagnosis of an illness. His complaint is centred around the way he was treated by MetLife during the claims handling process, in particular, the time it took for MetLife to give an answer to his claim and the way he was spoken to during a call. MetLife received Mr L's claim form on 25 August, but it wasn't until almost two months later that it was paid.

MetLife acknowledged there were some delays and that it didn't always respond to Mr L in good time, however maintained that the majority of delays were subject to delays receiving information from Mr L's GP.

Our investigator didn't fully agree. He accepted MetLife had to wait for the GP to respond to its questions and he agreed this was reasonable for MetLife to validate his claim. But he noted there was a three-week delay from the beginning of September until 24 September 2020, when MetLife eventually contacted Mr L's GP. He said that MetLife should pay £150 compensation for the overall trouble and upset caused. Our investigator didn't find in Mr L's favour re: the phone call because he didn't find any evidence that MetLife had treated him unfairly on that point.

MetLife accepted our investigator's findings, but Mr L didn't. In summary, he said that MetLife should pay him 20% of the value of his claim as a way of apology. He explained that a higher level of compensation would send a clear message to MetLife that it should treat its customers fairly from the outset. He said the £150 compensation isn't enough because it doesn't punish the insurer enough. He's worried this'll mean MetLife won't take its actions seriously in the future. And so, it's for me to make a final 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.

Having done so, I've decided to uphold this complaint, but for the same amount of compensation as already suggested by our investigator. I think the £150 compensation fairly reflects the level of trouble and upset caused and for the same reasons. I'll explain why.

It's not in dispute that MetLife caused a delay whilst handling Mr L's claim. He'd spoken with MetLife on 4 September and asked for an update, only to be told his claim was in hand. But it wasn't until almost three weeks later that there was any real, meaningful movement on his claim. The 24 September is when it was decided that additional medical evidence was needed, and that MetLife would need to contact the GP. This could've been decided much sooner and perhaps when Mr L contacted it on 4 September for an update. It's unclear why this happened, but MetLife has accepted responsibility for its actions here and agreed with

the recommended compensation made by our investigator.

I accept Mr L's arguments that this was a serious concern of his and that it caused him unnecessary trouble and upset. He maintained regular contact with MetLife during that time and wasn't given clear answers about the progress of his complaint. But that doesn't mean he should receive 20% of the value of his claim as compensation. I say that because its not for the ombudsman to punish MetLife for making a mistake. The ombudsman considers complaints and looks to put things right where errors have occurred. I note Mr L's claim was paid almost two months later at the end of October 2020, but I should highlight there were delays with Mr L's GP responding to MetLife's request for additional information. And I don't think it fair to hold MetLife responsible for that.

MetLife also needed to validate his claim so it could decide whether to accept it. In order for it to do that, it needed to discuss the specifics of Mr L's illness so that it could fairly determine whether his symptoms began during the period he was insured. And so, whilst I understand this felt uncomfortable for Mr L, I should like to reassure him that this was necessary for it to do that. I didn't find any evidence of MetLife treating him any differently to other consumers in similar stages of that process. I also note the adviser explained and apologised during the conversation for asking any questions that made Mr L feel uncomfortable – which I thought was fair.

I think £150 compensation is fair as it adequately and fairly acknowledges the impact the delay caused overall. It's for these reasons, I won't be asking MetLife to pay anything more in the circumstances.

My final decision

I'm upholding this complaint and MetLife Europe d.a.c must now pay Mr L £150 compensation for overall trouble and upset caused.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr L to accept or reject my decision before 5 July 2022.

Scott Slade
Ombudsman