



Medical insurance dispute over cover for pre-existing condition

What happened

Janice submitted an insurance claim for her hernia surgery.

Her insurer capped the payout to £5,000, stating that the hernias were linked to Crohn's disease, which was a pre-existing condition.

Janice disagreed with the insurer's assessment and submitted additional evidence to support her claim.

She asked the insurer to pay the full cost of her surgery under her policy.

The insurer maintained the hernias were linked to her pre-existing condition and denied full coverage.

What we considered

- the medical history and reports from consultants
- whether the hernias were most likely caused by Crohn's disease or other factors
- whether the pre-existing condition cover and annual limit were applied per the policy terms
- the effect of exclusions if the hernias were not linked to Crohn's disease

What we found

- the insurer fairly assessed the claim based on medical reports
- Janice's surgery was related to her pre-existing condition
- the insurer's application of the exclusion for pre-existing conditions was fair and reasonable

COMPLAINT NOT UPHeld – the insurer was not required to pay compensation

Key learning

The specific and clear wording of your insurance policy and its limitations regarding pre-existing conditions will ultimately determine whether your claim will be paid. Always read and understand your policy terms thoroughly when buying an insurance policy and when making a claim.