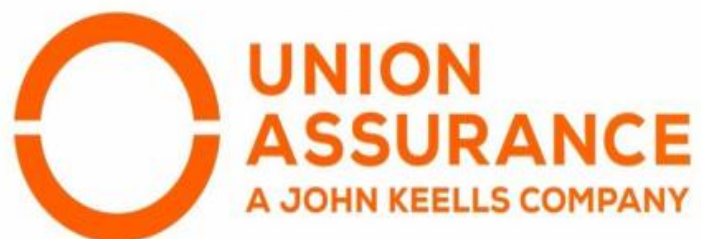


# Complaint Management Policy

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Version 01

Released on 01 July 2020



## Complaint Management Policy

### Our commitment and the purpose of this policy

Union Assurance PLC (PQ12) puts the customer at the heart of what we do. In the present scenario of competitive business, excellence in customer service is the most important tool for sustained and continues growth.

As a service organization, customer service and customer satisfaction are our prime focus. We believe that providing prompt and efficient service is essential not only to attract new customers, but also to retain existing ones. We have come up with a lot of initiatives that are oriented to providing a better customer service and a better complaints redressal mechanism with a view to “Out serve” customers.

Our policy, on complaint handling has been formulated taking into account the following:

- Fair Treatment for all customers both existing policy holders and prospects.
- Complaints raised by Customers are dealt with due care, courtesy and on time
- All complaints are dealt efficiently and fairly
- Customers are fully informed of avenues to escalate their complaints/grievances within Union Assurance and their rights to alternative remedy, if they are not fully satisfied with the response of the Insurer to their complaints.
- Our employees work in good faith and without prejudice to the interests of the customer.

In order to make the complaint mechanism more meaningful and effective, a structured system has been built and in place. This system would ensure that complaint sought is just and fair and is attended within the given Service Level Agreements and within the frame-work of the Insurance Industry Ombudsman Center i.e. governed by Insurance Regulatory of Sri Lanka.

### What is a complaint?

A complaint is the expression of at least one of the following elements:

- A reproach in connection with providing (or failing to provide) our products or services, including but not limited to, unfair business practices, conduct in violation of applicable law or regulation, or unethical conduct
- The identification of a real or potential harm that a policy holder has experienced or may experience
- A request for a remedial action

The initial expression of dissatisfaction by a policy holder, will not be considered a complaint where the issue is settled in the ordinary course of business but if the policy holder or prospect is still dissatisfied with the service/information provided by the our staff (Branch/Head Office/Call Center), he or she can lodge a complainant with us in one of the following ways under “**Addressing your complaint**”;

## Addressing your complaint

The Company's Customer service strategy shall be to enable Customers to avail its services through multiple channels.

The policyholders and prospects can approach us;

| Mode                    | Number/Email Address/Address  |
|-------------------------|---|
| 1. By Post or in Person | - Any of our Branches<br>- Customer Service Unit – No 20, St Michael's Road, Colombo 03 |
| 2. Telephone            | 0112990990 / Short Code: 1330   |
| 3. Email                | info@unionassurance.com   |
| 4. Website              | www.unionassurance.com  |

Your Complaints should address to Mr. Kevin Bandara - Manager Customer Service

## Our Six-point complaint handling process

### 1. We acknowledge

All complaints will be acknowledged in writing within three (3) working days and sent to you either e-mail, fax or by post. We will communicate with you in writing by the same language used by you at the time of complaint made. For branch walk-ins the Customer would be offered an acknowledgement on the spot. An auto acknowledgement by 'SMS' will be sent to Customers post registration of the complaint with the reference number and contact details shall be available.

If the resolution is provided within three (3) working days the acknowledgement will be sent together.

### 2. We Review

We undertake the initial review of your complaint and determine what if any additional information or documentation may be required to complete an investigation.

We may need to contact you to clarify details or request additional information where necessary.

- Provide: Name and Address and Policy Number, Claim Number or ID number of the insured.
- Be specific about the complaint and provide all the important facts (including events) that may have a bearing on the complaint.
- Provide copies of all documents that have relevance to the complaint (i.e. letters, quotations, previous correspondence etc).

- Provide proof of any losses sustained where applicable.
- Specify a solution / remedial action you believe is required to resolve your complaint.

### 3. We Investigate

Once receiving your complaint, we will investigate your complaint objectively and impartially, by considering the information you have provided us.

### 4. We Respond

Following our investigation, we will notify you of our findings and any actions we may have taken in regards to your complaint. The time lines are

|    | <b>Category</b>  | <b>TAT</b>  |
|----|--|---|
| 1. | The acknowledgement of the complaint   | Within 3 working days   |
| 2. | Provided Resolution  | Within 14 working days  |
| 3. | If a resolution cannot be provided within Fourteen (14) working days                         | Call to the customer on the 07 <sup>th</sup> Working Day informing the delay and the reason |
| 4. | To make an appeal  | 4 Weeks from the date of receipt of the resolution or response from us.                     |
| 5. | All matters relating complaints and appeals will be closed in the absence of a reply by you. | 4 Weeks from the date of receipt of the resolution or response from us.                     |

### 5. We take actions

Where appropriate we amend our usual business practice or policies to provide a better service to our valued customers. We take immediate actions to rectify the issue and take necessary actions to correct the issue and whenever possible we shall take necessary corrective actions to eliminate the issues to the future. Further, once we provide you with a resolution to the complaint raised, a detailed letter would be sent to you via post. If we don't hear from you within the next 4 weeks from the date of receipt of the resolution letter, we will consider that your in agreement to our decision and the complaint will be therefore closed.

### 6. We record

We will record your complaint for continuous improvement of process and procedures and monitoring through regular review in order to provide a better service in future.

## How to make an appeal?

If you are dissatisfied with the initial resolution, following contact point is available to make an appeal

Customer Services Manager

No 20, St. Michael's Road, Colombo 03

Tel: +9411-2990 990 Mobile: +94770336374

Email: [kevinb@unionassurance.com](mailto:kevinb@unionassurance.com) / [info@unionassurance.com](mailto:info@unionassurance.com)

## Alternative Dispute Resolution (ADR) methods

If within 30 days of receipt of your complaint, UA has been unable to resolve the complaint to the satisfaction of yourself, and if you wish to pursue the matter further, your complaint may escalate to the Insurance Industry Ombudsman Center (IIOC).

### The contact details for the Ombudsman as follows:

- Address - The Ombudsman, No 143A, Vajira Road, Colombo 5.
- Telephone - +94 11 452 8671 / +94 11 250 5542
- Fax - +94 11 452 8670 / +94 11 259 5625
- Email - [info@insuranceombudsman.lk](mailto:info@insuranceombudsman.lk)