Allianz

Version 4.3

Effective:

Allianz Lanka

Complaints Handling Procedure

Document Details

Document Name	Policyholder Complaints Handling Procedure
Document Version	4.3
Originating Business Function	Complaints Management Function
Document Owner /Custodian and Responsible for Maintenance	Yoshini Samarasinghe | Senior Manager Customer Experience
Reviewed and Approved By	Kasun Yatawara | Chief Marketing Officer
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Review Frequency	Annually
Procedure Required By	Regulator (Insurance Regulatory Commission of Sri Lanka)
Language	Available in three languages - Sinhala | Tamil | English

1. Introduction

This document describes the procedure applicable to Allianz Insurance Lanka Limited (General) herein referred to as Allianz Lanka.

This procedure has been designed to provide useful guidance to Allianz customers and stakeholders in the manner which the company manage the Customer Complaints. The company is committed and adhere to the governance being fair and unbiased in handling the customer complaints and their feedback.

2. Objective

Complaint Management Procedure is introduced with the objective of maintaining the governance, prompt, equal, fair treatment and efficient management of Complaints received by the Company

This procedure is adopted within the Group guidelines and Guidelines on Complaints handling by Insures and Brokers issued by Insurance Regulatory Commission of Sri Lanka and applicable customer protection of the company.

This document serves as a guide for how to lodge a complaint and outline the outlines the steps involved in handling, escalating, in compliance with the *Guidelines on Complaint Handling by Insurers and Brokers(2016)* issued by the Insurance Regulatory Commission of Sri Lanka(IRCSL)

This procedure applies to all Employees and Agents of Allianz Lanka.

3. Definitions

For the purpose of the *Guideline on Complaints Handling by Insurers and Brokers (2016*), following definitions are applicable for this procedure,

a) **Company :** means Allianz Insurance Lanka Limited (known as Allianz Lanka)
b) **Complaint:** means an expression of dissatisfaction made to the Company about the services provided by the Company and/or fraud, misappropriation of customer premiums, claim related disputes, misconduct, and misleading of customers by mis-representation of facts including benefits, exclusions and amount of premia or any other matters including data privacy, Information security and relating to the business operations of the company in Sri Lanka.

c) **Complainant :** means a person /entity who has made a complaint to the Company
d) **Employees :** means all employees of Allianz Insurance Lanka Limited
e) **Officer-In-Charge of Policyholder Complaints Management Function**' - Designated senior managerial personnel of the insurer who holds primary responsibility for overseeing, managing, and ensuring the effective, fair, and timely handling of policyholder complaints.
f) '**Officer Reviewing Appeals'** - The Principal Officer or Specified Officer of the insurer serving as the second level of complaint escalation, responsible for resolving appeals efficiently and effectively while safeguarding policyholder interests.

4. Types of Complaints

1. Misappropriation of customer premium, premium fraud, misconduct, malpractices, system violations and misleading of customers by mis-representation of facts including benefits, exclusions and amount of premia, data privacy breach, information security and any other concerns raised relating to the business operations of the company in Sri Lanka.
2. Service related complaints Proposal, Policy issuance, Policy servicing, Claims Services, Premium Collections, Branch services, Services from Sales Agents etc.
3. Personal Data Privacy related complaints

5. Complaint Category

1. Marketing & Sales
2. Underwriting
3. Claims
4. Policy Servicing
5. Premium
6. Services
7. Data Privacy
8. Information Security
9. Others

6. Lodging of Complaints

Facilities are made available for complaints to be lodged, at minimum, via following modes:

a. Verbally
   (i) By telephone
   (ii) By visiting the Branch or Head office or Customer Care Centre

b. In writing
   (i) By e-mail/Website
   (ii) Letters
   (iii) Social Media posts
   (iv) Text Messages
   (v) Any other means of communication

***Note**: Complaints can be made in Sinhala, Tamil or English. Communications with the complainant should be in the language in which the complaint was made. A clear and simple language shall be used in communicating with complainants.*

7. Receiving Methods

1. Customer's Direct Complaints -
   (i) To the Head office or Customer Care Centre
   (ii) To the Customer Experience Team
   (iii) To the Allianz Branch Level
   (iv) To the Broker/ Agent Level
   (v) Through any of the means set out in lodging of complaints above
2. Company's Detections
3. Third Party reporting
4. Direct contact of Officer In Charge of Policyholder Complaints Management Function(Customer Experience)

Name	Ms. Yoshini Samarasinghe
Designation	Senior Manager - Customer Experience
Address	Allianz Insurance Lanka Limited, Levels 26-27, One Galle Face Tower, No 1 A, Centre Road, Galle Face, Colombo 02.
Contact No	011 4788814 | 0771924852
Email	info@allianz.lk

8. Complaint Handling Process

8.1 How to make a complaint

In the event of a customer feels that he/she is dissatisfied with the manner in which they have been served at any of our customer touch points or if our products do not meet their expectation there are many avenues opened to our customers to reach the Complaints Handling Unit (Customer Experience Team) and make a complaint.

Following facilities are made available for complaints to be lodged;

(i) **By visiting or writing to:** The Customer Experience Management Unit at Allianz Insurance Corporate office premises or by visiting any branch office or by visiting our Customer Care Centre, No 323, Union Place, Colombo 2.

(ii) **Direct Telephone contact:** Senior Manager – Customer Experience / Complaints Management Unit 0114788814

(iii) Complaints can be made via 24hrs

- Hotline - General Insurance 0112303300

(iv) **Email**: email to reach us via info@allianz.lk

(v) **Website :** customer feedback form available at www.allianz.lk

(vi) Standard notice board displayed at every branches at the front office with the contact numbers/email to reach the Customer Complaints Handling Unit

(vii) **Address:** Letters addressing to the Complaint officer in-charge as shown below

Senior Manager Customer Experience
Allianz Insurance Lanka Ltd
Level 26-27,
One Galle Face Tower,
No 1A, Centre Road ,
Galle Face ,
Colombo 2.

8.1.1 Language of preference: Customers could make the complaints in Sinhala, Tamil or English at their convenient and all correspondence with the complainant is followed in the language in which the complaint was made.

8.1.2 Documents and information to be produced along with a complaint by the policy holder/insured:

1	Name of policy holder
2	National Identity Card (NIC) number.
3	Policy number | Vehicle number | Claim number
4	Contact details such as telephone no's/email, postal address
5	Subject of the complaint
6	Description of the complaint in writing preferably (email/letter/social media)
7	Documents or evidences (Proof) supporting the complaints
8	Any additional documents or information that the Company may reasonably request based on the nature and complexity of the complaint.

8.2 Complaint Review Process

8.2.1 Registering/Recording of Complaints

Every service related complaints received at branches/departments/Customer care centre should be forwarded to Senior Manager – Customer Experience via email or via the Complaint Management System. (CMS)

Each complaint is recorded in the Complaint Management System by the Complaints Handling Officers. The system records are maintained with all the necessary information on the complaints, including;

a) Name of policy holder
b) Policy number/vehicle number
c) Contact details/email
d) Description of the complaint
e) Date of receiving the complaint
f) Category of the insurance -Life, Motor or Non Motor
g) Date of acknowledgement
h) Status of the complaint - Resolved/pending/Partially resolved
i) Date of closing the complaint
j) Date of Resolution
k) Description of Resolution

8.2.2 Acknowledgement of complaints

All complaints are recorded in the Complaints Management System within 3 days from the receipt of such complaint. CMS is an in-house developed application enabling to enter and monitor the complaints until the resolution is reached. A reference number for each complaint is provided along with an acknowledgement.

After receiving complaint in writing, acknowledgement shall be sent within 3 working days. The acknowledgement contains the ''Reference number'' and ''contact details'' of the person to be contacted in the event that customer requires to know the status of the complaint.

8.2.3 Analysis of complaints

i. Every incoming complaint is categorized by the nature of the complaint. If the complaints are premium fraud related, misappropriation, wrong selling/misselling, procedural violation, malpractices, data privacy & information security related, then complaints will be forwarded to the internal investigation unit for further investigations.
ii. Customer Experience Management should also conduct the preliminary investigation in order to find out the facts and to resolve the complaints. However, the respective Department Head or Head of Branch/Regional Sales Manager and Provincial Sales Manager are required to support the Customer Experience Management unit to resolve the complaint within the set timelines.

iii. If Complaint handler views that further inquiry needs to be conducted based on the preliminary findings, the respective head of the department or head of branch should be informed of the same. Accordingly, explanation should be called from the respective employee within (3) working days as per the Complaint Handling Procedure of the Company.

Role of Complaint Handling Unit

a) The complaint shall be addressed to the respective department or operational unit by the Complaints Handling Unit. The status of the complaint should be kept informed and updated to customer.
b) A Complaint Register shall be maintained and updated by Complaints Handling Unit of CRM and by the respective Departments.
c) Complaints Handling Unit should update the Complaint Management System of the outcome. Meantime, HR should take appropriate action based on the findings by the Inquiry and the copy of the decision should be filed in the personal file of the employee/agent.
d) The outcome of the inquiry should be informed to the respective Department head and internal Investigation unit and Legal & Compliance for their information and records.
e) The complaints Register must be orderly maintained at the respective Branch as well.

8.2.4 Timelines in complaints handling and communicating resolution

Activity	Timeline
Recording of Complaints	Within 3 days from the receipt date
Acknowledgement of Complaints	Within 2 days from the receipt date
Resolution for the service related complaints	Within 8 working days
Resolution for the Premium Misappropriation related complaints	28 Days –Subject to availability of the facts and evidences
Communicating the resolution to customer	Within 2 days from the decision taken the facts and evidences
Responding to the appeal	Within 4 weeks from the receipt date

**** These timelines may be extended in situations where the complaint is complex in nature. Such complexity may arise due to various factors and if this occurs, we will explain the reasons for the delay and keep you updated until the matter is fully resolved.***

In case an appeal, if the complainant not satisfied with the resolution given, he or she could contact the following officer.

Name	Anura Perera
Designation	Chief Underwriting Officer
Address	Allianz Insurance Lanka Limited, Levels 26-27, One Galle Face Tower, No 1 A, Centre Road, Galle Face, Colombo 02.
Mobile	94 761289695

9. Complaint Management Unit

Complaint management unit consists of Manager – Customer Experience and complaint handling supporting staff. The members of the unit have been specially trained to handle the complaints in line with the requirements. They are competent and posses the required skills and abilities to handle the complaints within the guide- lines. They coordinate with respective stakeholders and business owners to make sure that complaint handling procedure is effectively managed. The complaint handling unit extends services to both long term business and non life. Complaints handling team is responsible for communicating with complainant with regards to the feedback and resolutions.

10. Alternative Dispute Resolution Mechanisms

In the event the customers are not satisfied with the resolution given by the company we would advise them to refer their complaint to the either Insurance Ombudsman or Insurance Regulatory Commission of Sri Lanka (IRCSL).

In addition to the above, arbitration clauses are incorporated in non motor and motor policies with regard to determining quantum and/or terms of the policy depending on the policy. Further, Life policies do not have an arbitration clause included.

Office of Insurance
Ombudsman,No 143A, Vajira
Road,Colombo 5.

Telephone +94 11 250 5542 / +94 11 250 5041

Email info@insuranceombudsman.lk
Website https://insuranceombudsman.lk/

Director Investigations

Insurance Regulatory Commission Of Sri Lanka
Level 11 East Tower, World Trade Center,
Colombo 01.

Telephone – 0112396184-9 / 0112335167

11. Publication of Complaint Handling Procedure

The complaint handling procedure has been hosted in our intranet giving access for our internal employees to view and understand the process easily. The same has been hosted in the company website for the external customer also to be used as guidance.

12. Analysis, Monitoring and reporting of complaints

a) Customer feedback and complaints are analyzed periodically by the Customer Complaints Handling Unit and shared with the respective heads of departments on monthly basis as a Complaint Summary.

b) Complaints are assessed through an in-depth analysis of the issues in a fair and consistent manner and independently by the Customer Complaints Handling Unit in order to identify the root cause of the issue, any service gaps and other related factors which have tantamount to the complaint for necessary corrective and preventive action. (Quarterly Review).

c) Complaints Analysis is presented to the BOM (Board of Management) quarterly basis. In the meantime, Customer complaint summary for the Life and General is extracted and reported to the management on or before 10th of following month.

d) Information on complaints handling and effectiveness of the complaints management shall be submitted to IRCSL on bi-annual basis (within 30 days of the end of each bi-annual period and annual reporting as per the scheduled time and the format given by the authorities.

e) Complaint ageing and overdue analysis is also prepared in order to improve the effectiveness of the Complaints Management.

f) Information and documentation relating to complaints will be kept and archived for a reasonable period of time based on the nature of the complaint for the

Annexure 1: Complaint Management Flow Chart

Complaint Handling Process Flow Chart

