

MAKE
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Nedbank Insurance complaints procedure

1 Purpose

The purpose of this procedure is to document Nedbank Insurance's (NI's) commitment to enable everyday certainty for existing and prospective clients through efficient, fair and transparent complaints handling, and to ensure adequate processes and procedures are implemented for internal resolution of complaints.

2 Definitions

'Client committee' means the NI complaints resolution committee, which exercises independence, objectivity and fairness in resolving disputes between the complaints-handling department and any other business unit.

'Compensation payment' means a payment, other than a goodwill payment, by NI to a complainant to compensate the complainant for a proven or estimated financial loss incurred as a result of NI's alleged and proven contravention, non-compliance, action, failure to act or unfair treatment forming the basis of the complaint. This excludes:

- (a) payment of amounts contractually due to the complainant in terms of the financial product or service concerned; or
- (b) refunds of amounts paid by or on behalf of the complainant to NI where such payments were not contractually due, but includes interest on late payment of amounts or refunds referred to in clause (a) or this clause (b).

'Complainant' means a person who has submitted a specific complaint to NI, and/or Nedbank Group and/or the regulatory bodies, including the relevant ombudsman schemes, and/or to NI's service providers and who:

- (a) is a client or prospective client of NI and has a direct interest in the agreement, product or service to which the complaint relates; or
- (b) has submitted the complaint on behalf of a person mentioned in clause (a), provided that a prospective client will be regarded as a complainant only to the extent that the complaint relates to the prospective client's dissatisfaction in relation



to the application, approach, solicitation or advertising or marketing material contemplated in the definition of 'prospective client'.

'Complaint' means a verbal or written communication of dissatisfaction by a complainant, relating to a product or service offered by NI or to an agreement with NI in respect of its products or services in terms of which an allegation is made that:

(a) NI or a service provider of NI has contravened or failed to comply with an agreement, a law, a rule or a code of conduct that is binding on NI or to which it subscribes; or

(b) NI's or its service provider's/providers' maladministration or wilful or negligent action or failure to act has caused the complainant harm, prejudice, distress or substantial inconvenience; or

(c) NI or its service provider(s) has/have treated the complainant unfairly and regardless of whether such an expression of dissatisfaction is submitted together with or in relation to a client query.

'Complaints champions' means the employee within NI assigned to deal with complaints.

'Complaints-handling employees' means the complaints officers and the ombudsman technical lead within NI.

'Determination' means the final decision made in favour of or not in favour of the complainant and/or when compensation is paid.

'Goodwill payment' means a payment by NI to a complainant as an expression of goodwill aimed at resolving a complaint, including ex gratia payments, but where no liability for any financial loss to the client as a result of the matter complained about is proven against NI.

'Media' means the main means of mass communication (television, radio, social media and newspapers) regarded collectively.

'Nedbank Group' or **'the group'** means all clusters, business units, divisions and subsidiaries that comprise Nedbank Group Limited and Nedbank Limited, and includes those companies over which they exercise control.



'Nedbank Insurance' is comprised of Nedgroup Life, Nedgroup Insurance Company (Nedic), Nedbank Insurance Distribution (NID) and Nedgroup Structured Life. These entities operate under their individual licences. Nedbank Insurance is a wholly owned subsidiary of Nedbank Group that provides both short- and long-term insurance.

'Ombud' means a person who is empowered in terms of a scheme to resolve a complaint, which scheme is governed by the Financial Services Ombud Schemes Act, 37 of 2004.

'Policy owner' means the NI Manager: Client Experience.

'Prescribed time frames' means any timeframes indicated by the various regulatory requirements, together with the timeframes as set out in internal processes or accepted industry body standards.

'A prospective client' of NI means a person who:

- (a) has applied to or otherwise approached NI in relation to becoming its client; or
- (b) has been solicited by NI to become its client; or
- (c) has received marketing or advertising material in relation to NI's products and services.

'Regulator/Regulatory body' is a public authority or government agency responsible for exercising autonomous authority over some area of human activity in a regulatory or supervisory capacity. An independent regulatory agency is a regulatory agency that is independent other branches or arms of the government.

'Rejected' in relation to a complaint means that the complaint has not been upheld, and that NI regards the complaint as finalised after advising the complainant that it does not intend to take any further action to resolve the complaint. This can arise either where NI rejects a complaint without offering to take steps to resolve it because it regards the complaint as unjustified or invalid, or where the client or prospective client does not accept or respond to NI's proposals to resolve the complaint and NI then advises the complainant that it does not intend to take any further action to resolve the complaint.



'Reportable complaint' means any complaint that is received by NI, with the exception of a complaint:

- (a) that has been upheld immediately by the person who initially received the complaint;
- (b) upheld in the execution of NI's ordinary complaints management processes, provided that such processes do not take more than five business days to complete from the date the complaint is received; or
- (c) brought to the attention of the group in a manner that there is no reasonable opportunity to report the complaint as made prescribed in relation to reportable complaints.

'Service provider' means another person with whom NI (to whose products or services the complaint relates) has an arrangement in relation to the marketing, distribution, administration or provision of such products or services, regardless of whether or not such other person is the agent of NI.

'Upheld' in relation to a complaint means that the complaint has been finalised in such a manner that the complainant has explicitly accepted that the matter is fully resolved or that it is reasonable for NI to assume that the complainant has so accepted. A complaint should be regarded as upheld only once any undertakings made by NI to resolve the complaint have been met.

3 Scope

The scope of this procedure extends to all complaints against NI that are received by telephone, letter, fax, email, or in person or through the internet. Complaints may be:

Submitted to:

PO Box 1144
Johannesburg
2000

Tel: 0860 333 111



Or emailed to:

complaints@nedbankinsurance.co.za

Or faxed to:

0860 066 641

Or submitted online at:

nedbankinsurance.co.za/tools/Complaints.

4 Complaints procedure

- (a) When a client or prospective client contacts NI at any entry point, the responsible operational department should try to solve the query, without undue delay. Should the problem be solved to the satisfaction of the client, it does not have to be escalated. However, should the client remain dissatisfied, the complaint must be emailed to complaints@nedbankinsurance.co.za.
- (b) Complaints must, where possible, be made in writing with supporting documents.
- (c) A complaint must be acknowledged in writing within three working days from receipt.
- (d) Where complaints are received in person or by telephone, a summary of the complaint must be provided to the complainant in writing in the form of an acknowledgement letter.
- (e) The complaint must be referred to the complaints champion immediately and a response from the complaints champion must be received within four working days. If no response is received, then, on the fifth working day, the complaint will be escalated to the teamleader. If still no response is received, on the sixth working day, the complaint will be escalated to the manager. If still no response is received, the complaint will be escalated to the head of the business unit.
- (f) If an element of the complaint is directed at a distribution channel, binder holder, service provider or an intermediary, the complaint must be referred to the complaints manager/relationship manager of the relevant party and feedback must be received within the agreed timeframes. The complaints-handling employees must consider the complaint after taking reasonable steps



to gather and investigate all relevant information and circumstances and with due regard to TCF principles and commitments. Our office remains committed to the principles of the respective ombudsman offices and will also bear in mind the principles of fairness and equity in resolving complaints.

- (g) Where a complaint is upheld in favour of the complainant, any commitment to make a compensation payment, goodwill payment, or to take any other action, must be carried out without delay or within 48 hours.
- (h) Where a complaint is rejected, the complainant must be provided with clear and adequate reasons for the decision in writing and with the contact details of the relevant ombudsman scheme included in the communication of the final decision. The outcome of the complaint must be communicated to complainants in writing in a manner that is fair, clear and not misleading.
- (i) Complainants must be kept adequately informed in writing of the progress of their complaint and of the decision in response to the complaint.
- (j) Where resolution takes longer than expected, the complainant must be informed in writing of the causes of the delay and provided with revised timelines.
- (k) If there is a recommendation that any payment be made in respect of the complaint, authorisation for payment of that amount must be signed off in accordance with the authority level mandate.
- (l) If the complaints-handling employees recommend that a decision be reversed, such recommendation will be submitted to the relevant business manager in writing. If the recommendation is not accepted, written motivation must be submitted for the refusal. The complaint will then automatically be referred to the client committee for a decision.

5 Prescription

A complaint will not be considered if three or more years have passed from the date on which the complainant became aware, or should reasonably have become aware, that he or she had cause to complain, excluding any time-barring period referred to in the policy contract.



6 Ombudsman schemes

- (a) All matters or complaints received from an ombudsman scheme or through Nedbank Group must be managed by the ombudsman technical lead.
- (b) All ombudsman scheme processes and procedures must be strictly complied with.
- (c) Ombudsman complaints and overturn ratios must be monitored and reported on. Industry determinations, publications and guidance issued by relevant ombudsman schemes must be monitored with a view to identifying failures or risks in NI products or practices.
- (d) The details of the relevant ombudsman scheme must appear on the determination where a complaint is not upheld in the complainant's favour. The ombudsman scheme details are also provided in policy documents, on claim repudiation letters and on the NI website.
- (e) The details of the relevant ombudsman schemes and regulatory bodies are as follows:

Ombudsman for Long-term Insurance

Private Bag X45
Claremont
Cape Town
7753

ShareCall: 0860 103 236
Tel: 021 657 5000
Fax: 021 674 0951
Email: info@ombud.co.za
Website: ombud.co.za

Ombudsman for Short-term Insurance

PO Box 32334
Braamfontein
Johannesburg
2017

ShareCall: 0860 726 890
Tel: 011 726 8900
Fax: 011 726 5501
Email: info@osti.co.za
Website: osti.co.za

Ombud for Financial Services Providers (FAIS Ombud)



PO Box 74571
Lynnwood Ridge
Pretoria
0040

ShareCall: 0860 324 766
Tel: 012 470 9080
Fax: 012 348 3447
Email: info@faisombud.co.za
Website: faisombud.co.za

Association for Savings and Investment South Africa (ASISA)

Cape Town
PO Box 23525
Claremont
7735

Tel: 021 673 1620
Fax: 021 673 1630

Gauteng
PO Box 52115
Rosebank
2132

Tel: 011 214 0900
Fax: 011 447 5013
Email: info@asisa.co.za
Website: asisa.co.za

South African Insurance Association (SAIA)

Ground Floor, Willowbrook House
Constantia Office Park
Corner of 14th Avenue and Hendrik Potgieter Street
Weltevreden Park

Tel: 011 726 5381
Fax: 011 726 5351
Email: info@saia.co.za
Website: saia.co.za

National Consumer Commission

Private Bag X84
Pretoria
0001

Tel: 012 940 4500
Email: nnetshitomboni@thencc.co.za
Website: nccsa.org.za



Financial Services Board

PO Box 35655
Menlo Park
Pretoria
0102

Tel: 0800 110 443 or
0800 202 087 or
012 428 8000
Fax: 012 374 0870
Email: info@fsb.co.za
Website: fsb.co.za

Sasria SOC Limited

PO Box 653367
Benmore
2010

Tel: 011 214 0800 or
0861 727 742
Fax: 011 447 8630 or
0861 727 239
Email: contactus@sasria.co.za
Website: sasria.co.za