

COMPLAINTS HANDLING MATRIX

Customer can register his concern thru Website, Phone or writing EMAIL we maintain Complaint's log book received from the Customer
(Through Phone Call, E-mail, Fax etc.)

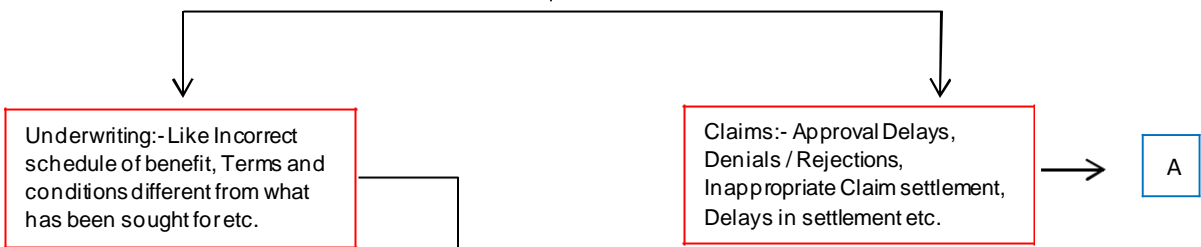
Acknowledging the complaint received with Reference Number to be used for future correspondences

Department Responsible: Complaints Handling Dept. (CHD)

Forward the Complaint to the Health Insurance Dept. of CIB for their action

Department Responsible: Health Insurance Dept. (HID)

Dept. Head of HID to Identify the Nature of the complaint as below



Internal

Insurer

TAT – Closure within 3 working days – by CIB

TAT – Closure within 7 – 10 working days with an interim update mail to client by 4th working day.

B → After Identification of the Nature of complaint – Dept. Head to forward it to Nominated representative for their swift action and report back to CHD

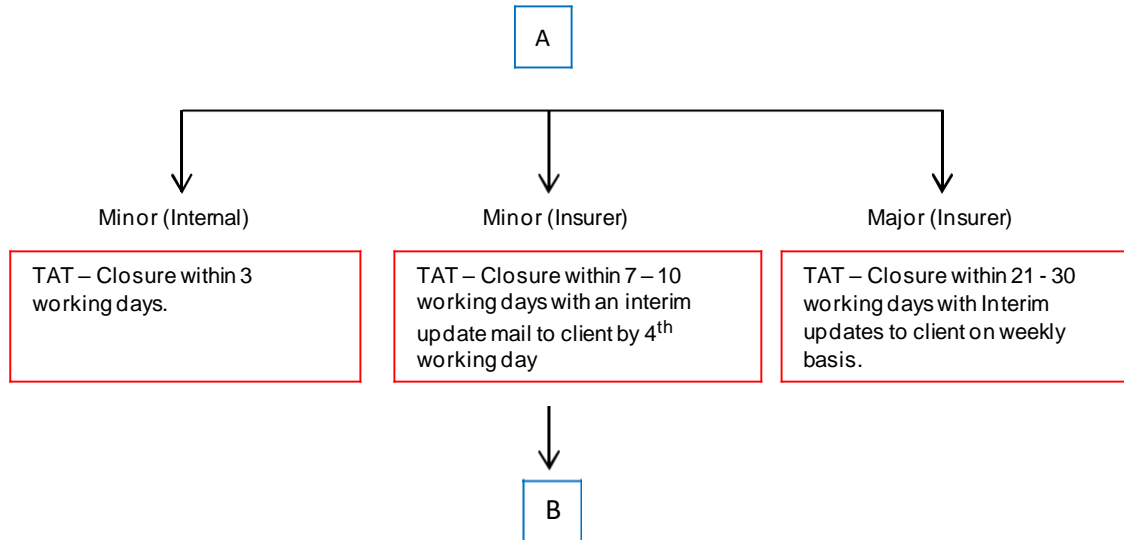
Issue Resolved

Yes

No

Close the Complaint in the log book with relevant remarks

Nominated Rep. to escalate to the Head of HID to take up with the Insurers to reach an amicable solution



Notes:-

- Monthly report of all complaints received and status must be submitted to the Director – General insurance
- Fort-nightly review by the Head of Compliance with the process owners.
- Market Intel and information's to be shared during training sessions with the PHIRs to avoid recurrences, taking reported cases as example.