

Complaints Handling Policy

1. Purpose

This document outlines Reserve Bank Health Society Limited ("RBHS")'s policy for the process of resolving complaints. The purpose of this policy is to:

- Increase the satisfaction of members and third parties who deal with RBHS;
- Be transparent and protect members' rights, including their right to make comments and complaints;
- Ensure RBHS is efficient, fair and easy to contact for dealing with complaints;
- Provide accurate, timely and relevant information about complaints and how they are being handled; and
- Continue to improve RBHS's products and services by monitoring and reporting on all complaints.

2. Scope

This policy applies to all employees of RBHS, including senior management and the Board of Directors, and to all problems, grievances and disputes received from members.

3. Risks Covered in this Policy

The policy is a key control in managing the following key Risk for RBHS:

- Operational delivery

Specifically, this policy ensures that RBHS protects member's rights, by being efficient, fair and easy to contact. The requirements under this policy represent significant mitigation controls against the above listed risk.

4. Guiding Principles

4.1 People Focus

RBHS is committed to quick and fair resolution of all complaints. Complaints provide an opportunity to improve products, services and processes. All RBHS employees recognise a complainant's right to make a comment or complaint. With this in mind, employees will actively ask for feedback when talking to members, agents and other parties.

People making a complaint will be actively involved in the complaints process and treated with respect at all times.

4.2 No Detriment to Complainant

RBHS will take all reasonable steps to ensure that complainants are not adversely affected because of a complaint made by them or on their behalf.

4.3 Visibility and Transparency

RBHS's policy for handling complaints will be displayed clearly in printed material (like brochures and cover descriptions), on the RBHS website.

4.4 Accessibility

Any person or group making a complaint will be able to contact all levels of employees at RBHS, subject to following due process as described below.

Policy holders have three avenues of appeal: informal, formal (written) and external. Policy holders are encouraged to try to resolve issues informally in the first instance. All complaints will be treated in a fair manner.

Complaints should be directed to the RBHS through either:

- Telephone – 1800 027 299
- Facsimile – 1300 309 704
- Email – info@myrbhs.com.au
- Post – Locked Bag 23, Wollongong DC NSW 2500.

All complaints will be recorded as commencing at the time of the initial communication with the complainant. The remedy sought by the complainant is also recorded. A record of complaints escalated to the CEO, Board or Ombudsman will be reviewed by the Board of the RBHS through quarterly reporting.

Complaints are defined as any expression of dissatisfaction with a product or service that is offered or provided.

A complainant will begin their contact with a Customer Service Consultant (CSC) either by phone, email, through our Online Member Services, post, fax or face-to-face, and our CSC will use their best endeavors to resolve the complaint straight away.

If they aren't able to resolve the complaint, they will refer it to a Team Leader and, if necessary, it will be escalated to the Service Delivery Manager. Any unresolved complaints will be further reviewed by a member of the executive team, and finally the CEO.

A complaint can be classified as Level 1, 2 or 3, as defined below.

Complaint - Level 1 (Grievance)

Policy holder contacts the RBHS and expresses concern about an aspect of their membership. The employee reviews the complaint based on relevant Rules/Policies. The complainant is informed of these Rules/Policies and the RBHS explanation. If the complainant accepts the explanation, the matter is resolved immediately, and there is no further action required by the RBHS.

Complaint – Level 2 (Problem)

Policy holder contacts the RBHS and expresses concern about an aspect of their membership and is not satisfied with the explanation given by the employee. The matter will then be referred to a team leader/manager. A resolution will usually be found at this point and put into place. If the complainant accepts the response, no further action is required.

Complaint – Level 3 (Dispute)

Policy holder contacts the RBHS and expresses concern about an aspect of their membership and is not satisfied with the Level 2 resolution. In this case, the matter is referred to the Chief Executive Officer (CEO). The CEO may present the case to the Board with his/her recommendation if deemed necessary.

The policy holder will be contacted within 14 days of indicating dissatisfaction with the written explanation.

In all cases, policy holders will be involved in declaring issues closed and closures will be recorded.

If this does not resolve the matter, the complainant will be made aware of their right to take their complaint to the Private Health Insurance Ombudsman:

Private Health Insurance Ombudsman
Telephone – 1300 737 299
Email – phio.info@ombudsman.gov.au
Internet – www.privatehealth.gov.au

If the RBHS is contacted by the Ombudsman, the RBHS will assist with the Ombudsman's investigation and report to the Board on the progress of any complaint.

RBHS recognise the diversity of membership and aim to resolve complaints in a way that meets the needs of each individual's needs. If specialist services are needed (like language or interpreting services), we will provide them to make sure that the complaint is resolved in a way that satisfies all parties.

4.5 No charges

RBHS will not charge a fee to a member who lodges a complaint.

4.6 Responsiveness and Communication

RBHS will respond quickly to all complaints, and will:

- Acknowledge receipt of the complaint within 2 days.

- Keep the member informed and provide a progress report of the complaint every 7 days until resolved (or at another time if agreed to by both parties). The member will be provided with access to this and other RBHS policies that are relevant to their complaint.
- Notify the complainant or the complainant's representative of the outcome and the reasons for the outcome upon resolution.

All employees at RBHS are responsible for handling complaints effectively. The employee who first receives the complaint has the authority to resolve it (subject to RBHS's Delegations Policy) and will keep the complainant updated throughout the process.

4.7 Objectivity, Fairness and Equity

Complaints will be dealt with objectively, without bias and in an equitable manner. RBHS's Complaint Management System continually tracks progress of the complaint and escalation to a more senior period if required.

4.8 Privacy and Disclosure

RBHS will ensure that personally identifiable information about a member is handled in accordance with the RBHS Privacy Policy and the Australian Privacy Principles.

AUTHORISED BY:

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