

Customer Complaint Handling and Dispute Resolution Policy

(For Customers)



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1. Purpose of the Complaint Handling and Dispute Resolution Policy

The purpose of the Customer Complaint Handling and Dispute Resolution Policy (policy) is to set out the policy and procedures for the handling of complaints received by Teachers Federation Health Limited ABN 86 097 030 414 (TFH) from its customers.

The Board and senior management of TFH view complaints as an opportunity to:

- (a) maintain and enhance customer loyalty and approval; and
- (b) enhance our competitiveness by continuous review and improvement.

This policy is an abridged version of the Customer Complaint Handling and Dispute Policy which is an internal document maintained by THF.

Customers can lodge complaints in writing via post, fax or email, in person at one of our Member Contact Centres or over the phone with a member of our contact centre.

Phone:	1300 728 188 Monday – Thursday, 8am – 8pm (AEST) Friday, 8am – 6pm (AEST) Saturday, 8.30am – 12.30pm (AEST)
Mobile and overseas callers:	+ 61 2 8346 2111
Fax:	1300 728 388
Email:	complaints@teachershealth.com.au
Mail:	Teachers Health Fund GPO Box 9812 Sydney NSW 2001

2. Complaints handling and dispute resolution procedure

TFH categorises the level of complaints into first, second, third level resolution. The level of resolution depends on the type and nature of the complaint. This section describes each of these categories and the steps undertaken to resolve the complaint.

2.1. First Level Resolution

A First Level Resolution complaint is defined as either:

- (a) First contact resolution – the complaint is resolved at the time of contact, through the appropriate distribution channel and within 3 working days of receipt; or
- (b) Staff review – where the first contact resolution complaint has been unsatisfactorily resolved or the complaint is sensitive or complex in nature; a second level review is undertaken by an appropriately nominated staff member.

All First Level Resolution complaints must be resolved within **three (3) working days** of receipt of the complaint.

2.2. Second Level Resolution

A Second Level Resolution complaint is defined as follows:

- (a) Referred to Team Leader or Business Unit Manager – the First Level Resolution has failed to resolve the complaint or the complaint is more sensitive or complex in nature; the complaint is then escalated to the Team Leader or Business Unit Manager for review and consideration.

All Second Level Resolution complaints must be resolved within **fourteen (14) working days** of receipt of the complaint.

2.3. Third Level Resolution

A Third Level Resolution complaint is defined as:

- (a) Assisted referrals – PHIO Complaints Level 1 and Level 2.

First and Second Level complaints must be resolved within **three (3) working days** of receipt from PHIO. TFH must respond directly to the complainant and advise PHIO of the action taken and response provided.

- (b) Disputes – PHIO Complaints Level 3

All Third Level Resolution complaints require intervention by PHIO.

All Level 3 complaints must be resolved within **fourteen (14) days** of receipt from PHIO. TFH must respond directly to PHIO.

Note on The Commonwealth Ombudsman

A customer making a complaint has the right to lodge their complaint with the Ombudsman if they are not satisfied with the outcome of our processes. All relevant staff at UHI, advise customers of this right as well as the internal escalation process.

The Ombudsman can be contacted on

Phone: 1300 362 072

Fax: 02 6276 0123

Website: www.ombudsman.gov.au and www.privatehealth.gov.au

Note on Health Centres (Dental, Optical and Allied Health Services)

A customer making a complaint in relation to the Health Centre (dental, optical or allied health) practices has a right to lodge their complaint to a governing board, if they are not satisfied with the outcome of our processes.

In this case, the complaint should be referred to the Executive Manager, Health Services who will then refer to the complainant to the relevant governing board (refer to table below).

Note on Teachers Healthcare Services

A customer making a complaint in relation to Teachers Healthcare Services has a right to lodge their complaint to a governing board, if they are not satisfied with the outcome of our processes.

In this case, the complaint should be referred to the Clinical Operations Manager who will then refer the customer to the relevant governing board (refer to table below).

State:	Governing board
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NSW	Health Care Complaints Commission
QLD	Office of the Health Ombudsman
All other states	Australian Health Practitioner Regulation Agency

Note on complaints about breaches of the Australian Privacy Principles

A customer can make a complaint in relation to TFH breaching the Australian Privacy Principles (APP) or the TFH Privacy Policy.

In the first instance, a customer must lodge their complaint with TFH following the procedures stated above, and if they are not satisfied with the outcome of our processes, then the complainant has the right to lodge the complaint with PHIO.

If the complainant is still not satisfied with the outcome, then the complaint may be taken to the Office of the Australian Information Commissioner (OAIC).

OAIC can be contacted on 1300 363 992 or a member can write to:

The Office of the Australian Information Commissioner

Phone: 1300 363 992

Email: enquiries@oaic.gov.au

GPO Box 5218, Sydney, NSW 2001

See also OAIC privacy complaint brochure for further details:

<http://www.oaic.gov.au/privacy/making-a-privacy-complaint>

2.4. Travel Insurance Services, General Insurance and Life Insurance

2.4.1. Travel Insurance Services

In the event a customer makes a complaint that relates to Travel Insurance with Allianz Global Assistance (AGA) the complaint should be referred to AGA at the time of receipt and recorded in the HAMBS system.

AGA will attempt to resolve the complaint in accordance with their internal dispute resolution process. If the complainant is not satisfied with the outcome, they will have the right contact the Financial Ombudsman Service Limited (FOS).

A dispute can be referred to FOS, subject to its terms of reference. FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms.

2.4.2. General Insurance

In the event a customer makes a complaint that relates to General Insurance with QBE the complaint should be referred to QBE at the time of receipt and recorded in the HAMBS system.

QBE will attempt to resolve the complaint in accordance with their internal dispute resolution process. If the complainant is not satisfied with the outcome, they will have the right contact the Financial Ombudsman Service Limited (FOS).

A dispute can be referred to FOS, subject to its terms of reference. FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms.

2.4.3. Life Insurance

In the event a customer makes a complaint that relates to Life Insurance with AIA Australia the complaint should be referred to AIA at the time of receipt and recorded in the HAMBS system.

AIA will attempt to resolve the complaint in accordance with their internal dispute resolution process. If the complainant is not satisfied with the outcome, they will have the right to contact the Financial Ombudsman Service Limited (FOS).

A dispute can be referred to FOS, subject to its terms of reference. FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms.

2.4.4. Financial Ombudsman Service

The contact details for FOS are:

Financial Ombudsman Service Limited GPO Box 3, Melbourne Victoria 3001

Phone: 1800 367 287

Fax: (03) 9613 6399

Website: www.fos.org.au

Email: info@fos.org.au

In general, where there has been a significant breach of a legal or regulatory requirement, the organisation will then assess the complaint to determine whether it is required to be reported to ASIC.

3. Monitoring and reporting on complaints

Monitoring and reporting is an important part of the complaints handling process.

It is the responsibility of the TFH Board, the Risk and Governance Committee and senior management to monitor and review various aspects of the complaints handling process, appropriate to their role and responsibilities.

To this end, procedures have been established to enable appropriate monitoring, review and reporting and for continuous improvement.