

POLICY ON REDRESSAL OF POLICYHOLDER GRIEVANCES

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Preface:

The key intent of Reliance Nippon Life Insurance Company Ltd. is to provide excellent customer service. A prompt mechanism to address customer grievances is integral to meeting this objective.

Further, in accordance with the IRDAI (Protection of Policyholder's Interests) Regulations 2017 (PPI) which state, "Every insurer shall have in place an effective grievance redressal procedure to address complaints of policyholders efficiently and with speed and communicate the action taken by the insurer on the complaint to the complainant along with the information in respect of Insurance Ombudsman as may be necessary". Reliance Nippon Life Insurance Company Ltd. (hereinafter referred to as "RNLIC") had defined a grievance redressal policy for resolving complaints.

The aforesaid grievance redressal policy is reviewed periodically to ensure adherence to IRDAI guidelines.

The RNLIC grievance redressal policy is applicable to grievances received from our customers and/or policy owners (proposers) in the capacity of policyholders and is not applicable to Queries, Requests and Urgent Requests. This policy also does not apply to concerns raised by mediators, intermediaries or agencies acting on behalf of customers unless legally authorized by the policy owner.

Grievances received through Consumer forums, Courts, Ombudsman offices and any legal notices will be treated separately as directed by the respective forums and will not remain time bound to a specific TAT. These will be decided on a case-to-case basis.

Customer Service Touchpoints:

In line with our intent, customers have several options to interact with the Company and keep themselves updated with the relevant information regarding registration of their grievances and the status of their grievance after it is registered. It is our endeavor to be easily accessible and customers may opt for any communication channel mentioned below -

- Reliance Nippon Life Insurance Branch Network
- Contact Centre – 1800-102-1010 (toll free)
- Website - www.reliancenipponlife.com
- Email – rnlife.customerservice@relianceada.com
- Snail Mail - Reliance Nippon Life Insurance Company Limited,
701 & 702, 7th floor, Silver Metropolis,
Off Western Express Highway,
Goregaon (E),
Mumbai 400063

Classification of Customer Interactions:

We classify customer interactions as follows:

Query: A 'Query' is defined as any communication from a customer for the primary purpose of requesting information about RNLIC or its products /services.

Request: A 'Request' is defined as any communication from a customer soliciting a service such as a change, modification, or cancellation in the policy.

Grievance: A 'Grievance' is defined as any communication that expresses dissatisfaction about an action or lack of action, about the standard of service/deficiency of service of an insurance company and/or any intermediary or asks for remedial action.

Urgent Request: We may come across instances, where RNLIC may have fulfilled a policyholder-initiated transaction as per regulatory guidelines and in accordance with internal procedures and laid service standards. However, the customer does not concede to /denies fulfillment. Such interactions do not fall under the purview of grievances despite the customer being seemingly dissatisfied. Such instances will be classified as "Urgent Requests" to ensure appropriate evaluation and completion of the transaction/request. e.g.: Reconsideration of a repudiated death claim, cancellation request beyond a reasonable period outside freelook or intimation of non-receipt of policy where RNLIC has a record of dispatch and delivery.

Grievance Redressal Procedure:

Our Policyholder may approach any of our touchpoints with their requirement / query. The receiving unit will do the preliminary check by way of asking probing questions and according to the nature of the interaction, shall communicate the further procedure/resolution to the customer.

Once a grievance is registered in the RNLIC CRM which is integrated with the IGMS portal of the IRDAI, the grievance classification and the required Turn Around Time (TAT) for resolving the grievances shall not exceed 2 weeks (15 days as per IGMS) in compliance with IRDAI Guidelines for Grievance Redressal by Insurance Companies (Ref: 3/CA/GRV/YPB/10-11) dated Jul 27, 2010 as amended from time to time.

Acknowledgement of Grievances:

All Customer Complaints are recorded in our CRM and a unique Service Request number (SR) is generated against each of these. This has a corresponding IGMS token number.

An acknowledgement shall be sent to the customer within 2 working days from receipt of the complaint. The acknowledgement shall be sent in the form of SMS (where mobile number is registered in our records) or E-mail (where the email ID is registered in our records). A letter shall be sent in the event that neither the mobile number nor email ID are registered.

The acknowledgement shall carry the details of the grievance redressal procedure including the touchpoint details.

Turn Around Time (TAT) for resolution of Grievances:

RNLIC shall offer a resolution within the timelines provided by Insurance Regulatory Development Authority of India (IRDAI) not exceeding 2 weeks (15 days as given in the IGMS) of receipt of grievance and communicate the resolution in writing 'In Favour' or 'Not in Favour' of the complainant.

Where RNLIC has acceded with the complainant as 'Partial in Favour', the grievance shall be addressed within 2 weeks and communication in writing shall be provided seeking further information if any.

If a complaint exceeds the laid down turnaround time, the customer will be kept informed about the status of the grievance.

Closure of Grievances:

A grievance shall be considered as closed when:

- a) RNLIC has acceded to the appeal of the complainant fully.
OR
- b) The complainant has indicated in writing, acceptance of the response of the insurer.
OR
- c) The complainant has not responded to the insurer within 8 weeks of the company's written response.

Where the grievance is not resolved in favour of the policyholder or partially resolved in favour of the policyholder, the insurer shall inform the complainant of the option to take up the matter before insurance ombudsman giving details of the name and address of the Ombudsman of competent jurisdiction.

Any instance of a complaint being raised repeatedly (by the same customer referring to the same matter across complaint categories) will be tagged under the status 'Duplicate' available in IGMS.

Grievance Redressal Mechanism:

The Grievance Redressal Mechanism, which is approved by the Board of Directors of RNLIC is displayed at our Branches, available in the policy documents sent to policyholder and published on our website and will be in effect for all Customer interactions pertaining to redressal of policyholders' grievances.

LEVEL I

In case you are dissatisfied with any of our services, please feel free to contact us at:

- a) Contact Centre: 1800-102-1010 (toll free) Or,
- b) You can also email us at rnlife.customerservice@relianceada.com. Or,
- c) Contact the Customer Service Executive at your nearest branch of the Company. Or,
- d) Write to: Reliance Nippon Life Customer Care, 701 & 702, 7th floor, Silver Metropolis, Off Western Express Highway, Goregaon (E), Mumbai 400063

LEVEL II

If your Grievance is unresolved for more than 10 days – Please contact our Branch Service Manager (BSM), who is also the Local Designated Grievance Officer at your nearest branch.

LEVEL III

If you are unhappy with the resolution offered – Write to Head of Customer Care at rnlife.headcustomercare@relianceada.com or at the address mentioned above.

If you are still not satisfied with the resolution offered – Write to our Grievance Redressal Officer, Head of Legal & Compliance at rnlife.gro@relianceada.com or at the address mentioned above.

If the issues remain unresolved; any further reference may be made to the Insurance Ombudsman in terms of Rule 12 & 13 of the Redressal of Public Grievance Rules, 1998.

Procedure for filing complaint with Ombudsman:

As per Provision of Rule 13(3) of the Redressal of Public Grievance Rules, 1998 the complaint to the ombudsman can be made:

1. If the grievance has been rejected by the Grievance Redressal Machinery of the Insurer or the complainant had not received any reply within a period of one month from date of lodgment of complaint or complainant is not satisfied with the reply given to him by the insurer.
2. The Complaint has been filed within one year from the date of rejection by the Company if it is not simultaneously under any litigation.

Role of Policyholder Protection Committee

With a view to addressing the various compliance issues relating to the protection of the interests of policyholders, as also relating to keeping the policyholders well informed of and educated about insurance products and complaint handling procedures, RNLIC has also set up Policyholder Protection Committee which directly reports to the Board of RNLIC.

The Committee shall review periodically:

- a) The procedures and mechanism to address grievances of policyholders including mis-selling by intermediaries.
- b) The status of complaints to the policyholders and shall also be responsible for ensuring:
 - Compliance with the statutory requirements as laid in the regulatory framework.
 - Adequacy of disclosure of “material information” to the policyholders. These disclosures shall, for the present, comply with the requirements laid down by the Authority both at the point of sale and at periodic intervals.

Review of the Policy

- The Policy will be reviewed annually or as and when required by the Board.
- The Policy is owned by the Customer Care Team