

COMPLAINTS HANDLING MANUAL

Sun Life of Canada (Philippines), Inc.

Version 6.0

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**Excerpt from full Complaints Handling Manual version 6.0*

1. Complaints Handling Policy

At Sun Life of Canada (Philippines), Inc., we are committed to fair dealing, honesty and integrity in the conduct of our business. We take our responsibilities to our clients very seriously and seek to provide them with the highest quality of service and products. If clients have questions, concerns or complaints about our service, products or representatives, we strive to ensure that these are handled fairly and efficiently.

Complaint resolution is important and we take it upon ourselves to respond to complaints promptly, accurately, with courtesy and utmost confidentiality. We endeavour to train and equip our staff with the necessary skills and resources to handle, monitor and resolve client complaints at their level as appropriate.

We treat complaints presented to us as important opportunities to work with our clients and to make improvements that could enhance the client service experience for everyone doing business with us.

2. Objectives

Our complaints handling process aims to ensure that complaints are handled in a clearly defined and effective manner. Specifically, this documentation will:

- 2.1. Define what a complaint is
- 2.2. Identify various types and categories of complaints
- 2.3. Establish logging, escalation and investigation procedures in handling complaints
- 2.4. Identify remedies for resolving complaints and regain clients' trust and loyalty
- 2.5. Establish turnaround time for various types of complaints
- 2.6. Identify parties involved in a complaint handling process
- 2.7. Define the respective roles and responsibilities of identified parties
- 2.8. Identify how complaints are used as basis for continuous process improvement
- 2.9. Establish review and summarization procedures, internal/external reporting procedures, and procedures for handling confidentiality issues

3. Scope

The scope of this manual includes:

- 3.1 Oral or written complaints received within the Integrated Services Department
- 3.2 Complaints related to client service and policy/plan/investment administration
- 3.3 Complaints resolved at the first interaction or escalated to higher levels
- 3.4 Complaints in the nature of queries and or suggestions.
- 3.5 Exclusions in this scope are:
 - 3.5.1 complaints of advisors that are not related to a client's policy/plan/investment or not done on behalf of the client
 - 3.5.2 complaints that include allegations of some form of mis-selling, non-delivery of the contract, churning/twisting, replacement, failure to properly advise, misrepresentation, or unsuitability of the product. These will be referred to Compliance section for further handling
 - 3.5.3 complaints that are coursed through SEC, media, IC, etc., frontline should not attempt to resolve such complaints but should immediately escalate to the designated persons as follows:

Business	Contact Persons	
	Media-Related	Regulatory-Related
Life Mutual Fund Preneed	Chief Marketing & Client Officer, or appointed representative	General Counsel, or appointed representative

4. Sources of Complaints

A complaint may come directly from the client or through his/her authorized representative. It may be received through:

- 4.1 Phone call
- 4.2 Postal mail
- 4.3 Electronic mail
- 4.4 Client Feedback Form or Net Promoter Score (NPS) survey
- 4.5 Walk-in visit to one of our Client Service Center or at our Head Office
- 4.6 Sun Life websites
- 4.7 Social Media
- 4.8 Online/video chat

5. Definition of a Complaint

- 5.1. A complaint is an expression of dissatisfaction (oral or written) that uses strong words and an angry tone. It is very insistent and/or may involve a threat to bring the matter to media or to regulatory bodies.
- 5.2. A complaint **INCLUDES** any grievance related to client service or general administration of a policy/plan/investment, e.g. complaint that it is taking too long to process an address change, a premium payment, a change in policy features and similar transactions
- 5.3. A **complaint** also **INCLUDES** allegations of some form of mis-selling, non-delivery of the policy contract, churning/twisting, replacement, failure to properly advise, misrepresentation, or unsuitability of the product.

6. Types of Complaints

Type of Complaint	Definition	Example
6.1 Non- Escalated complaint	A complaint, which is immediately resolved at the frontline or resolved by the person who initially handled the complaint.	Policyholder complains to the Client Service Center regarding the paying period of her policy. She was made to believe that the paying period is only 10 years. The Client Service Associate (CSA) reviews the complaint and provides explanation about the different options as to the paying period client can avail of. At this point, the client is satisfied with the explanation given.
6.2 Escalated Complaint	<p>A complaint which is reviewed and dealt with at least "one level higher" than the level which routinely handles and makes operational decisions about the subject matter of a complaint.</p> <p>An escalated complaint is not necessarily a "serious" complaint. It is primarily defined by how high up in the organization the complainant takes his/her complaint before being satisfied with the fairness of the response.</p> <p>Other criteria for escalation:</p> <ul style="list-style-type: none"> - Further investigation is required beyond the frontline staff - Potential fraud/misrepresentation - Where discretionary decisions need to be made - Possible litigation - Compliance issues - Public relations issues 	<p>A policyholder complains to the Client Care (CC) that she was made to believe that the paying period of her policy is 10 years. The CSA reviews the complaint and provides explanation about the different options as to the paying period client can avail of.</p> <p>Policyholder angrily does not accept explanation and wishes to talk to the next level or to an officer of the company. The CSA escalates the case to her Supervisor.</p>

Type of Complaint	Definition	Example
<p style="text-align: center;">6.3</p> <p style="text-align: center;">Further escalated complaint</p>	<p>A complaint that is escalated to and dealt with by any specific Committee (e.g., committee formed with representatives from different functions or different heads under one function).</p>	<p>A policyholder writes to the Insurance Commission (IC) and the IC in turn forwards complaint of policyholder to the Sun Life CEO and Country Head. The complaint is regarding his advisor not accurately and completely explaining the features of his policy which has resulted in his policy lapsing. Client demands the following: (1) policy be put back in force; (2) waive insurability requirements and interest payments; and (3) only pay the back premiums.</p> <p>The Head of Account Services will investigate the policy details, and will coordinate with the Head of Compliance regarding the complaint against the advisor. If complex computation is required, Head of Account Services may also involve Actuarial.</p>

8. Workflows and Procedures

8.1 Flow of a complaint

A complaint will flow through the Integrated Services Dept. via phone call, mail or e-mail correspondence, feedback in the Client Feedback Form or Net Promoter Score (NPS) survey, via Sun Life websites, via social media, via chat or walk-in visit to the one of the Client Service Centers or to the Head Office.

For further inquiries and concerns, please contact us at any of the following:

Sun Life Philippines Website: [Contact Us](#)
 Email: sunlink@sunlife.com
 SUNLINK Client Care: (+632) 88499888
 PLDT Toll-free: 1-800-10-SUNLIFE (7865433) outside Metro Manila
 8:00 AM - 7:00 PM Mondays to Fridays
 *Calls outside the Philippines may incur international call charges

***A full version of this document may be available upon request*