

Navi General Insurance Limited

Policy on Protection of Policyholders' Interest

Ver 8.0

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1. Preamble

This policy sets out the minimum requirements pursuant to the provisions of Regulation 5 (1) of the Insurance Regulatory and Development Authority (Protection of Policyholders' Interests) Regulations 2024, for protection of Policyholder's Interests which includes Insurance Awareness, Service Parameters for various Services rendered, Procedure for expeditious resolution of grievances, Prevention of Mis -Selling and unfair business practices.

2. Applicability

This policy shall come into force with effect from the date of adoption of the policy by the Board of Directors of the Company.

3. Governance Structure

The Board of Directors in the Board Meeting held on April 27, 2017, has constituted Policyholders Protection Committee, as stipulated in IRDAI Guidelines for Corporate Governance ("Guidelines") for insurers in India dated May 18, 2016, and as amended from time to time. The Committee shall discharge all its functions and responsibilities as outlined in said guidelines from time to time.

4. Insurance Awareness & Consumer Education Program

Consumer education is a part of our organization's ethos & philosophy for service excellence. We shall create Insurance Awareness for our customers as well as society on the need for protection (insurance). Our education shall not only be limited to insurance, but we shall undertake to educate customers on various risk exposures & their effective management.

4.1. Guiding Principles for our Insurance Awareness & Consumer Education Program:

- Creating Insurance Awareness is the key to Sustainable Growth of the industry.
- We believe that consumer education is a matter of his / her rights.
- We shall empower our customers to make informed and suitable decisions.
- Through Education it shall be our effort to win the trust of our customers, partners,

society as well as trust in their circles of influence.

4.2. Insurance Awareness & Consumer Education Program may include any or all, but not limited to, following:

- Simplicity & transparency in the documentation and communication with policyholders.
- Inclusivity and accessibility of insurance cover to persons with disabilities.
- Advertisements and Campaigns through various media & channels to create insurance awareness.
- Leveraging digital initiatives to increase awareness and make learning fun.
- Insurance awareness education programs.
- Robust training methodology for the Sales & Distribution partners.

5. Nodal Officer for Insurance Awareness

The Head of Customer Service shall act as the Nodal Officer for Insurance Awareness & Consumer Education. The Company's Nodal Officer for Insurance Awareness shall follow-up with the various stakeholders for tracking the progress of the initiatives agreed and report it to the Managing Director and CEO from time to time. He shall support the overall initiatives for Insurance Awareness & Consumer Education by way of information dissemination and resource allocation.

6. Grievance Redressal Framework

Navi General Insurance Limited (Navi GI) understands that with increasing awareness towards insurance, stiff competition in the industry and technological advancements, creating customer service differentiators is highly important for achieving high levels of customer experience. Customer-centricity is a core philosophy of Navi GI and shall guide its employees to provide exceptional customer service. The Company is committed to provide high quality customer service consistently.

6.1. Grievance Redressal Officer

- 6.1.1. Navi GI shall nominate a designated Grievance Redressal Officer ("GRO") of a senior management level at Corporate Office to address the customer's grievances efficiently and fairly. The GRO at the corporate office will be the

contact person for the Authority.

- 6.1.2. Every other office of the Company shall also have a designated Grievance Officer who shall be head of that office. The details of the GRO/designated Grievance Officer along with the contact details in full shall be published on the website of the Company and the name and contact details of designated Grievance Officer of respective office and the other Grievance Officers in hierarchy up to GRO at corporate office shall also be displayed in the notice board of respective offices.
- 6.1.3. Every office of the Company shall also display in a prominent place the name, address and other contact details of the insurance ombudsman within whose jurisdiction the office falls.

6.2. Defining a Grievance

- 6.2.1. A “Grievance/Complaint” means written expression (includes communication in the form of electronic mail or voice based electronic scripts) of dissatisfaction by a complainant with respect to solicitation or sale or purchase of an insurance policy or related services by insurer and /or by distribution channel.
- 6.2.2. However, an inquiry or service request would not fall within the definition of the “complaint” or “grievance”.

A grievance may originate due to, but not limited to, following –

- Failure to deliver a product or service within the turnaround times committed.
- Gap between the product or service delivered than what was proposed by and offered to the customer.
- Experiences of or feelings of any unfair treatment by the customer from the company, its officials, or its intermediaries.

6.3. Creating Customer Awareness

Navi GI shall take every possible step to inform, train and provide updates of its Grievance Redressal mechanism to its customers. Its employees shall be properly trained toward this endeavor. The Company shall ensure that minimum service levels and Turnaround times, as prescribed by IRDAI are displayed in all its offices.

7. Prevention of Mis-Selling and unfair business practices

Navi GI shall build such a framework where any kind of miss-selling or unfair business practices are not only intolerable but also prevented from happening. There shall be a two- way approach adopted by Navi GI towards this. First, its employees and channel partners shall be directed to disseminate the complete information or product and process to the customers. Secondly, any grievance in this regard shall be taken seriously and besides quick resolution, it must be reviewed to the depth for any remedial action required.

8. Procedure for Expeditious Resolution of a Grievance

The Company shall have a system including IT systems and a procedure for receiving, registering and disposing of grievances in each of its offices. The Company shall publicize its grievance redressal procedures and ensure that it is specifically made available on its website.

The Company shall necessarily form part of the **Bima Bharosa** put in place by the Authority to facilitate the registering/ tracking of complaints on-line by the policyholders. The Company's system shall involve mirroring of the Grievance database of the company with Bima Bharosa and shall also facilitate analysis of complaints, mitigation, improvement of processes and system, through constant review.

The Company shall also have in place a system to receive and deal with all kinds of calls including voice/e-mail relating to grievances, from prospects and policyholders. The system shall enable and facilitate the required interfacing with the Authority's system of handling calls/e-mails.

9. Categorization of a Grievance

NAVI GI shall adopt the categorization of grievances as prescribed by the IRDAI from time to time and incorporate the same in the Grievance Management System.

10. Disposition of a Grievance

NAVI GI shall have a system and procedure for receiving, registering, and disposing of grievances in each of its offices. NAVI GI shall adopt the following minimum time-frames –

- The Company shall acknowledge every complaint as and when they are received.
- The acknowledgement shall contain the name and designation of the officer who will deal with the grievance.
- The acknowledgement shall also contain the grievance redressal procedure and the time taken for resolution of the grievance.
- Where the grievance is resolved within 24 hours, the resolution may be sent along with the acknowledgement.
- Where the grievance is not resolved within 24 hours, NAVI GI shall resolve the same within 2 weeks of its receipt and send a final resolution. Wherever a grievance requires detailed investigation, which may take more time, NAVI GI shall communicate suitably to the complainant with tentative time for resolution.
- Where, within 2 weeks, NAVI GI sends the complainant a response, which offers redress or rejects the grievance and gives reasons for doing so.
- The Company shall inform the complainant about how he/she may pursue the complaint, if dissatisfied.
- The Company shall inform that it will regard the grievance as closed if it does not receive a reply within 8 weeks from the date of receipt of response by the complainant.

11. Closure of a Grievance

A grievance shall be considered as disposed of and closed when

- The Company has acceded to the request of the complainant fully (or)
- Where the complainant has indicated in writing, acceptance of the response of the insurer (or)
- Where the complainant has not responded within 8 weeks of the Company's written response
- Where the Grievance Redressal Officer has certified that the Company has discharged its contractual, statutory and regulatory obligations and therefore closes the grievance.

12. Service Parameters & Turnaround Times

There are two types of turnaround times involved.

- The service level turnaround times, which are mapped to each classification of complaint (which is itself based on the service aspect involved).
- The turnaround time involved for the grievance redressal.

As to (a), the TATs are mapped to the classification as prescribed by IRDAI. These TATs reflect the timeframes as already laid down in the IRDA Regulations for Protection of Policyholders Interest and more, as, wherever considered necessary (for certain service aspects not getting specifically reflected in the Regulations), specific TATs are indicated in the classification and mapping provided by IRDAI.

With regards (b), the minimum TATs required to be followed shall be as prescribed below:

12.1. Service Parameters & Turnaround Times – Health

Service Parameter	Maximum Turn Around Time
General	
Processing of proposal and communication of decision including seeking further requirements	7 days
Issuance of policy document / proposal and providing a copy of the policy along with the proposal form	15 days
Service requests concerning corrections, refund of proposal deposit, and other non-claim-related services to be completed within the specified timeline. This includes: • Change of address (KYC Norms to be complied) • Registration/change of nomination • Issuance of duplicate policy • Assignment • Alteration in original policy conditions (where applicable) • Inclusion of new member in case of group policies • Cancellation of policy and refund of premium	7 days (from the date of receipt of request for the service specified)

Claims Related	
Health Claims	
• Cashless claims – Initial Approval	Immediately, but not more than 1 hr
• Cashless claims – Discharge Approval	Within 3 hrs of discharge request from the hospital

Reimbursement Claim Settlement / Rejection	15 Days from submission of claim
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Grievances	
Written Acknowledgement of grievance to a complainant	The Company shall acknowledge every complaint as and when they are received
Seek and obtain further details, if any, from the complainant (permitted only once)	Within one week
Resolution of grievance and issue of final letter of resolution	Within two weeks
Closure of grievance on non-receipt of reply from the complainant	Within eight weeks

12.2. Channels to Lodge a Grievance

The customers can lodge their grievances, using any of the following facilities given below:

CHANNEL	Mode	Details
Contact Center	Inbound Toll-Free No. (Group and Motor Insurance)	1800 123 0004
	Inbound Toller No. (Retail Health Insurance)	8147544555
	Email	insurance.help@navi.com
	Website, portal Online Form Submission	www.naviinsurance.com
Navi GI Office	a) Walk-in b) Letters / Correspondence	Any Office of Navi GI
Escalations	Email / Letter	gro@navi.com

12.3. Service Parameters & Turnaround Times – Non Health

Service Turn Around Time (TAT)	
General	
Processing of proposal and communication of decisions including requirements / issuance of policy / cancellation	7 days
Post policy issue service requests concerning mistakes/refund of premium on account of freeloop cancellations and also Non claim related service requests	7 days
Refunding of proposal deposit under any circumstances	7 days from the date of underwriting decision date
Claim Processing	
Appointment of surveyor	Within 24 hours of the receipt of intimation from the insured.
Receipt of survey report	15 Days from appointment date
Claim decision	7 Days from survey report
Settlement of claim	15 Days from the last document receipt
Settlement of claim (Third Party Claims)	30 Days from the last document receipt

13. Grievance Escalation

The Company will put in place a structured Internal Escalation Mechanism to ensure that all grievances are addressed within defined TAT and those exceeding the TAT are escalated to the higher authority.

All the policies shall carry information about the Grievance Handling procedures of the Company. A grievance form will be annexed with all policy documents and will also be provided at the Branches.

This will also contain the contact details of the IRDAI & Insurance Ombudsman Offices, where the customer can approach in case he/she is not satisfied by the Grievance resolution

provided by the Company.

14. Ombudsman

The Central Government has established an office of the Insurance Ombudsman under Redressal of Public Grievances (RPG) Rules 2017 for redressal of grievance or complaint with respect to Insurance Policies. Where the grievance is not resolved in favor of the policyholder or partially resolved in favor of the policyholder, the Company shall inform the complainant of the option to take up the matter before the insurance ombudsman giving details of the name and address of the Ombudsman of competent jurisdiction.

The complaint to the Ombudsman should be made in writing, duly signed by the complainant or by his legal heirs, with full details of the complaint and the contact information of the complainant as per provisions of the said Rules. The Company shall adhere to the provisions and procedures of the Redressal of Public Grievances (RPG) Rules 2017 for redressal of grievance or complaint with respect to Insurance Policies.

The updated details of the Ombudsman office will be published on the website of the company.

15. IRDAI Consumer Affairs Department

Insurance Regulatory Development Authority of India (IRDAI) has created a Consumer Affairs Department to deal with the complaints from various policyholders that they may have with insurance companies. IRDAI may be contacted in case of any unresolved grievances as per following details;

Insurance Regulatory and Development Authority
of India Consumer Affairs Department
Sy No. 115/1, Financial District,
Nanakramguda, Gachibowli, Hyderabad – 500032
United India Tower, 9th floor, 3-5-817/818, Basheer Bagh,
Hyderabad – 500 029E-mail id: complaints@irda.gov.in Call
Center: Toll Free No: 155255 / 1800 4254 732

Only cases of delay/non-response regarding matters relating to policies and claims are taken up by the Cell with the insurers for speedy disposal.