



Kshema General Insurance Limited

Grievance Redressal Policy

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1. Introduction

Kshema General Insurance Limited, ("the Company"), is working predominantly in agriculture and allied business sectors, building customized products for farmers and cultivators in the Indian agriculture sectors. The Company has a robust mechanism in place to resolve/ address customer complaints in a timely and effective manner. The Company will strive to provide the highest quality of customer service to ensure continued customer satisfaction, retention and sustained growth of products and services. A customer complaint may be genuine or may be a result of misunderstanding about the product or service. To facilitate the customers to raise their grievances, the Company has put an appropriate mechanism in place for redressal of customer grievances. The Company has established this Grievance Redressal Policy to supplement the Policy for Protection of Interests of Policyholders.

2. Objective

- a) Ensure the customer an unbiased, fair and speedy means of dealing with complaints on an ongoing basis.
- b) Protect customers against fraud, deception, or unethical practices.
- c) Consistently assess the impact of services to serve clients better.
- d) Put in place a formal grievance redressal mechanism for the customers.
- e) Ensure speedy and efficient resolution of customer issues with adherence to basic principles of transparency and integrity.
- f) Educate the customers about escalation mechanisms for resolution of the complaints if they are not satisfied with the Company's response.

3. Definitions

- a) "Complaint/Grievance" means written expression (includes communication in the form of electronic mail or other electronic scripts), of dissatisfaction by a complainant with insurer, distribution channels, intermediaries, insurance intermediaries or other regulated entities about an action or lack of action about the standard of service or deficiency of service of such insurer, distribution channels, intermediaries, insurance intermediaries or other regulated entities. It is clarified herein that an inquiry or request would not fall within the definition of the complaint or grievance.
- b) "Complainant" means a policyholder or prospect or any beneficiary of an insurance policy who has filed a complaint or grievance against an insurer or a distribution channel.

- c) "Mis-selling" means the erroneous selling of a product by communicating false representation of features, returns or benefits of the product to the customers. It encompasses various illegal business practices by the salespersons involving misrepresentation of facts with the intention of deceiving customers. Being a customer-centric organisation, the Company is committed to curbing mis-selling by establishing initiatives of awareness. The Company evaluates customer complaints on mis-selling with proper investigations and fact-finding exercises and putting the Complaint on a fast track resolution mode.

4. Principles of Grievance redressal

- a) Customers are always treated fairly.
- b) Complaints raised by customers are dealt with an open mind, and with courtesy.
- c) Customers are informed through policy documents of avenues of escalation process for their complaints and grievances within the organization.
- d) To treat all complaints efficiently and fairly.

5. Documentation of Grievances

Grievance redressal mechanism starts with the standard documentation protocol.

- a) Acknowledging the grievance with a complaint Number.
- b) Providing necessary action on the grievance received in the stipulated time frame.
- c) Escalation details like name, contact number, email ID and website addresses will be furnished.

6. Grievance Redressal Officer

- a) The Grievance Redressal Officer ('GRO') of the Company is placed at the Corporate Office of the Company and reports to the CEO. However, CEO may authorize any other senior management executive to supervise the GRO.
- b) The Company may, as may be required, designate the respective branch heads, if any, as the Grievance Redressal Officer for each branch office.

7. Source of Complaints

The Company may receive the complaint/grievance from any of the following sources:

- a) Policy Holder
- b) Beneficiary under the Policy
- c) Claimant / Nominee under the Policy

- d) Authority
- e) Ombudsman
- f) Government Redressal Portals

8. Lodging of Complaints:

The Customer may register any service request concerning issue of insurance policy or mistake in insurance policy, claim related service requests or any product related service through any of the following:

- a) Call us on the toll-free number 1800 572 3013
- b) E-mail to us at customer.support@kshema.co
- c) You may write to us at the policy issuing address as mentioned on the policy schedule.
- d) You may also register lodge your grievances/complaints through our website – www.kshema.co
- e) You may lodge your grievances/complaints through our iAgri app.
- f) If your grievance/complaint is not resolved, you may write to our designated Grievance Officer at gro@kshema.co, details of the same is available at Company's website.
- g) If you are not satisfied with the resolution provided by the Grievance Redressal Officer, you may register your complaints at Bima Bharosa Portal of IRDAI at <https://bimabharosa.irdai.gov.in/>. You may also reach out to IRDAI Grievance Call Centre (IGCC) at 1800-4254-732/155255 for voice calls and complaints@irdai.gov.in through e-mail for registration of your grievance/complaint. For more details, you may visit IRDAI site at <https://irdai.gov.in/igms1>
- h) If you are still not satisfied after having followed the above steps, you may approach the Insurance Ombudsman for Redressal. Login to <https://www.ciains.co.in/Ombudsman> to get details on Insurance Ombudsman Offices.

9. Stages of Grievance Redressal process

- a) Complaints will be registered as the first step;
- b) Complaint number will be generated for each grievance;
- c) Complaint will be assigned to the concerned department;
- d) Investigation into the complaint will be done by the concerned department;
- e) Basis the investigation grievance redressal will be provided by the concerned department;
- f) Review of the grievance redressal would be done as per above;

- g) Communicate the solution to the customer;
- h) A window will display escalation details with the solution; and
- i) Closing of the complaint;

10. Grievance Redressal Process:

- a) The Company's system shall involve, mirroring of its Grievance database with the Bima Bharosa Portal (earlier known as IGMS) of the IRDAI and shall also facilitate analysis of complaints, mitigation, improvement of processes and system, through constant review;
- b) The Company shall have in place a system to receive and deal with all kinds of Complaints, relating to grievances, from prospects and policyholders;
- c) The system shall enable and facilitate the required interfacing with the Authority's system of handling Complaints;
- d) The Company shall issue a unique complaint number to the Complainant;
- e) Complaint will be updated in the Bima Bharosa Portal of the Authority upon receipt and followed until closure;
- f) The Company shall send a written acknowledgement to the Complainant and also the details of the closure as defined by the Authority;
- g) Closure of complaint: A complaint shall be considered as closed when:
 - 1) The Company has acceded to the request of the Complainant fully; or
 - 2) Where the Complainant has indicated in writing, acceptance of the response of the insurer; or
 - 3) Where the Complainant has not responded to the Company within 8 weeks of its written response;
- h) Where the Grievance is not resolved in favour of the Complainant or partially resolved in favour of the Complainant, the Company shall inform the Complainant of the option to take up the matter before the Insurance Ombudsman in the relevant jurisdiction;
- i) Collective insights from all the complaints will be derived through detailed root cause analysis and necessary remediation measures will be implemented to avert recurrence; and
- j) Complaints of Fraud, Mis-selling, Malpractices will be intimated to Risk Management Committee for appropriate disciplinary and other actions. The Committee will review these insights to understand and act on improvement avenues.

11. Mis-selling and Unfair Business Practices at Point of Sale and Services

The Company takes stringent steps to reduce such practices at the new business acquisition stage such as corrective action that may include termination of the salesperson, if proved.

Process for handling Mis-selling Complaints:

- a) The grievance redressal process set out in this Policy will be replicated for handling Mis-selling Complaints;
- b) Mis-selling Complaints are to be put on to the fast track mode for resolution;
- c) Mis-selling Complaints are escalated to the respective distribution channel head for review and resolution;
- d) Mis-selling Complaints will be referred to concerned department, as decided by the Risk Management Committee, for investigation;
- e) Appropriate action and resolution are implemented after investigation and conclusion;
- f) Closure of the Complaint can further be classified in the following categories;
 - 1) Complainant agreeing to retain the policy with actual terms and conditions of the product;
 - 2) If the complaint is a proven case of Mis-selling, then premium refund will be initiated in favour of the Complainant;
 - 3) Disciplinary action will be initiated against the sales person/(s); and
- g) Letter for closure of the complaint will be sent to the Complainant

12. Turnaround Time in the Grievance Handling

1	Acknowledgement of the Grievance	1 working day
2	Resolving a grievance	7 working days
3	Acceptance or rejection of proposal form	7 working days
4	Refund of proposal deposit if proposal is not accepted or extra premium charged	8 working days
5	Claim settlement	25 working days from last receipt of the documentation
6	Certificate of insurance or policy not received by the complainant	3 working days
7	Any required details incomplete in the policy	3 working days
8	Details shown in policy or Add-on are incorrect	3 working days
9	Endorsement for modification of policy/Add on are not issued by the company	3 working days

10	Customer requested for Cancellation of the policy	3 working days
11	customer requested a Duplicate insurance policy	3 working days
12	Nomination details shown in the policy are different from the proposal form	3 working days
13	Information on policy is different from the proposal form	3 working days
14	Premium receipt not received by the insured	2 working days
15	Any service other than the above	3 working days

13. Registration of Complaints with IRDAI

If the policyholder remains dissatisfied with the resolution of the Company, he / she

- a) Can make use of the Bima Bharosa system – IRDAI portal <https://bimabharosa.irdai.gov.in> for registering the complaints themselves and to monitor the status of the complaints.
- b) Can send the complaint through email to complaints@irdai.gov.in
- c) Can call Toll Free No. 155255 or 1800 4254 732
- d) Apart from the above options, if it is felt necessary by the complainant to send the communication in physical form, the same may be sent to IRDAI addressed to:
 General Manager
 Insurance Regulatory and Development Authority of India
 Policyholder’s protection & Grievance Redressal Department – Grievance Redressal cell
 Sy.No.115/1, Financial District, Nanakramguda,
 Gachibowli, Hyderabad – 500032.

14. Review of the Policy:

The policy shall be reviewed on an annual basis by the committee or whenever any changes are to be incorporated into the policy due to any amendment to the regulations or as may be felt appropriate by the committee.
