

Sound Commercial Practices Guideline

Purpose

The purpose of this Policy is to ensure a free and equitable procedure for dealing with client complaints, in accordance with the Fair Treatment of Customers principle.

At Humania Assurance, we believe that client complaints are important and that our duty is to deal with any dissatisfaction expressed promptly and courteously.

1. Inform the appropriate department of your dissatisfaction

If you are dissatisfied with a decision or the way in which your file was handled, you must first contact the department that served you.

The contact information of the employee who served you is available in the documents you have on hand. If you do not know who to contact, you may get in touch with Customer Service.

| Customer Service | St-Hyacinthe | Montreal | Elsewhere |
|---|--------------|--------------|----------------|
| Group Insurance | 450-773-7236 | 514-485-7236 | 1-800-818-7236 |
| Individual Insurance | 450-773-7170 | 514-489-8404 | 1-800-773-8404 |
| Email: clients@humania.ca | | | |

Here are some tips:

Before contacting us

- a) **Gather** all your documents so you can refer to them easily;
- b) **Determine** why you are dissatisfied, the questions you wish to ask, the arguments you wish to make, and the desired solution (if you are seeking financial compensation, you should say so);
- c) **Decide** how you will contact us:
 - a. If you call, it is best to call ahead to set up an appointment, so the employee can locate your file and give you the necessary time;
 - b. If you write, keep copies of the documents you are sending.

During the conversation

- a) **Go** straight to the point, be calm and do not hesitate to ask questions;
- b) **Note** the employee's name, a summary of the conversation and the answer received, and keep a copy of all correspondence;
- c) **Ask** the employee how long it should take for a response.

If you are dissatisfied with the answer and wish to speak to the department supervisor, **say so**.

If the supervisor does not respond after a reasonable time, **contact** Humania's Complaints Officer.

2. Filing a complaint with Humania's Complaints Officer

If you are still dissatisfied after communicating with the appropriate department, you may file a formal complaint with the Complaints Officer. Here is the contact information for Humania's Complaints Officer:

| | |
|--|---|
| Mr. Jean-Patrice Dozois Assistant Vice-President, Legal Affairs & Compliance Humania Assurance 1555 Girouard Street West Saint-Hyacinthe, Quebec J2S 2Z6 | Email: jean-patrice.dozois@humania.ca |
| | Telephone: 1-800-363-1334 or from Montreal: 514-485-1334, ext. 307 |
| | Fax: 1-844-773-4999 |

If you need help filing your complaint, you may call Ms. Marie-Kim Larouche, Compliance Advisor, at 1-800-363-1334, ext. 479.

Your complaint must be made in writing, and "Complaint" must be written at the top of your letter; alternatively, you may use the complaint form.

Describe the reason for your complaint, the steps you have taken and the response you received. Explain your arguments, and identify the solution you are seeking.

3. Complaint examination

Any employee who receives a complaint must immediately forward it to the Complaints Officer.

A **complaint file** is opened for each complaint by the Complaints Officer. This file includes all documents that are relevant to the examination of the complaint.

An **acknowledgement of receipt** will be sent to you within five (5) days following receipt of your written complaint to inform you of the turnaround for complaint examination. If your complaint can't be handled within ten (10) days following its receipt, the acknowledgement of receipt must include a notice concerning the client's right to request the transfer of the complaint to the relevant authorities.

The Complaints Officer will handle your complaint in an **impartial manner** and keep you informed of your complaint examination and the response time, taking into account the potential need to obtain additional information from third parties to examine your complaint.

In **response to your complaint**, you will receive a letter indicating the following:

- The decision regarding your complaint and the grounds for this decision;
- The procedure for requesting that your file be transferred to regulatory authorities or other external organizations.

4. Complaint transfer

If you are still dissatisfied with the process or your answer and you have completed the above steps, you may ask our Complaints Officer to send a copy of your file to the following external organizations:

- a) In Quebec, the Autorité des marchés financiers (AMF);
- b) Elsewhere in Canada, the OmbudService for Life & Health Insurance (OLHI).

The client may exercise this right only upon expiry of the period identified for obtaining a final answer, not to exceed a period of one year from the date that answer is received.

5. Registry and report to the authority

A complaints registry has been created for the purposes of applying the Policy. The Complaints Officer records and updates the information on complaints that meets the definition of that word.

A complaint is defined as follows:

"For the purposes of the policy, a complaint is the expression of at least one of the following three elements:

- a) A reproach against the registrant;
- b) The identification of real or potential harm that a consumer has sustained or may sustain; or
- c) A request for remedial action."

The Complaints Officer reports annually to the regulatory authorities on complaints made during the period in question.

6. Effective date

This Policy was updated in May 2019. It must be updated every two (2) years.