

UNITED INDIA INSURANCE COMPANY LIMITED

At United, It's always U before I

**POLICY FOR
PROTECTION OF
POLICYHOLDERS'
INTERESTS**



Regd. Head Office - 24
Whites Road, Chennai



UNITED INDIA INSURANCE COMPANY LIMITED
POLICY FOR PROTECTION OF POLICYHOLDERS' INTERESTS

VERSION II - 2025

Approved in the Board Meeting held on 12/07/2019 and further revised in the Board Meeting held on 10/11/2025

INTRODUCTION

United India Insurance Co. Ltd. regards customer service as a top priority and Customer Delight is an integral part of the Company's overall strategy. Every contact that our customers have with us is an opportunity to refine and enhance our standards of services.

We have developed our systems with the understanding that Customer Care is a crucial element in all aspects of our functioning since it affects the way our customers view our Company.

It shall be our continuing endeavor to design personalized experiences, measure customer feedback and make improvements in service on the basis of suggestions and ensure consistency and continuity in customer relationships.

OBJECTIVES

The Policy focuses on the following main objectives:

- (i) Steps to be taken for enhancing insurance awareness so as to educate prospects and policyholders about insurance products, benefits and their rights and responsibilities.
- (ii) Service parameters including turnaround times for various services.
- (iii) Procedure for speedy resolution of complaints
- (iv) Steps to be taken to prevent mis-selling and unfair business practices at point of sale and service.
- (v) Steps to be taken to ensure that during policy solicitation and sale stages, the prospects are fully informed and made aware of the benefits of the product being sold vis-à-vis the product features attached thereto and the terms and conditions of the product so that the benefits / returns of the product are not misstated / misrepresented.

INSURANCE AWARENESS AND TRAINING

We are committed to reaching out to our policyholders and prospective customers through multiple channels. Our robust network of operating offices across the country allows us to connect with individuals on a personal level. The marketing teams at these

offices, including Agents engage directly with customers to educate them about our products, their benefits, and the rights and responsibilities of policyholders.

To further enhance our outreach and accessibility, we adopt the following measures:

Digital Accessibility: Recognizing that a large segment of today's customers are tech-savvy and prefer quick, convenient access to information, we maintain a modern, user-friendly website. It provides comprehensive details about our products, benefits, policyholder rights and responsibilities, and other relevant information about our company operations.

Multi-Channel Communication: We actively engage with policyholders through electronic and print media, as well as through other effective and accessible communication channels.

Insurance awareness is created through our Publicity activities such as informative product Advertisements in print and audio-visual media, product brochures which give the highlights of the product coverage and exclusions, posters, billboards, bus and auto panels and other outdoor media, in regional languages also. Conduct of Customer seminars and Special Drive campaigns by offices is an important medium for spreading insurance awareness amongst our customers.

We inculcate the values of Customer Service and the importance of gaining Customer loyalty and ensuring Customer retention through training programmes to all sections of employees. We make trainees aware that it is the customer who chooses the insurer and not vice-versa and that employees play a vital role through positive attitude and caring services in gaining and retaining customers.

A trained knowledgeable marketing force is essential for ensuring that customers are informed and made aware about our products and services.

VISION AND COMMITMENT

Our Vision

- To become the most preferred insurer in India, with global footprint and recognition.
- To become a trusted brand admired by all stakeholders
- To become the best-in-class customer service provider, leveraging technology and multiple channels.
- To become the provider of a broad range of innovative products to meet the needs of all customer segments.
- To be a great place to work in with highly motivated and empowered employees.
- To be recognized for its contribution to the Society.

Our Commitment

We shall

- Act courteously, fairly and reasonably in all our dealings with the customers
- Make sure that our Policy documents and claim procedures are clear and simple
- Give complete information about our Products and Services
- Deal quickly with the grievances of customers and resolve them through nominated Customer Care Officers in all operating offices
- Respond to all commercially viable general insurance needs of the citizens to provide new covers and promote insurance inclusion.
- Continue to provide customized insurance products for the rural and weaker sections of the Society at affordable prices.
- Continue to develop a professional workforce for proper execution of the roles assigned to them.
- Have a regular consultative process with all our stakeholders and set up monitoring mechanism for delivery of promised services to our customers.

STANDARDS FOR ACCESS TO CITIZENS

We shall

- Host on our website www.uiic.co.in all relevant information relating to working hours, documents required for issuance of policies and for claims settlement.
- Make available literature on products and services at all our offices.
- Reach out through electronic and print media, intermediaries and other communication channels.
- Enhance the access of citizens through Dedicated Toll free Number- 1800 425 3333, and Portals.
- Earmark the time between **3.00 PM to 5.00 PM of every Wednesday** (next working day, in case Wednesday happens to be a holiday) for personal interaction between customers and Office-in-charge / Customer Care Officer of the Operating Office / Regional Office for resolving the grievance.

Standards for Servicing

We shall

- Strive to adhere to the timelines as prescribed by the Regulator in respect of Policyholders servicing.
- Be clear and transparent in seeking fulfilment of requirements for settling a claim or any other service to the customer.

SERVICE PARAMETERS AND TURNAROUND TIMES**CITIZEN'S CHARTER (General)
BASIC SERVICE STANDARDS**

S. No	SERVICE	DESCRIPTION OF ITEM OF SERVICE	Regulatory Turnaround Time
1	New Business Processing Proposal	Processing of Insurance Proposal and seeking further requirements for consideration of the proposal.	7 days
		Decision on proposal from the date of receipt of proposal or from the date of receipt of additional requirement whichever is later.	
		Providing copy of the policy along with the proposal form	15 days
2	Post Policy Request Service	Post Policy Service Requests concerning mistakes / corrections in the Policy document	7 days
3	Policy Servicing (from the date of receipt of request for the service specified)	Change of Address (KYC Norms to be complied)	
		Registration /Change of Nomination, Assignment.	
		Alteration in Original Policy conditions (where applicable)	
		Change of location of risk	
		Inclusion of new member in case of group policies	
		Any other non-claim related changes	
		Cancellation of policy and refund of premium	

		Appointment of Surveyors (through Tech based solution)	24 hours
4	Claims	Submission of final report after receiving Insurer's request	15 days
		Communicating acceptance or rejection of the claim	7 days
5	Auto Action by the Insurer	Premium Due Intimation	One month before due date
6	Complaints	Acknowledgement to complainant	Immediately
		Action on Complaint & Intimation of Decision to the complainant	14 days
		If complaint is NOT resolved by the Insurer, communicate the details to the Policyholder of options including referring the complainant to Insurance Ombudsman / Consumer Court.	14 days from original date of receipt of complaint. *

*(The policyholder may approach the Insurance Ombudsman if his / her complaint is not resolved within 30 days or if the decision of the company is not acceptable to the policyholder.)

Expectation from the Policyholder -

1. Immediate intimation of claims in writing.
2. Preservation of Salvage.
3. Filing of first information report with Police Authorities in case of Fire, Theft and Accidental Death claims
4. Preservation of recovery rights by filing claims with carriers in case of marine claims
5. Intimating the Fire brigade and obtaining Fire brigade report.
6. Preservation of all records for Company's verification.

NOTE: For detailed information please refer to the policy documents and/or claims procedure available in the website.

CITIZEN'S CHARTER (HEALTH INSURANCE)

s. No	Service	Description Of Item of Service	Turnaround Time
1	New Business Proposal Processing	Processing of Insurance Proposal and seeking further requirements for consideration of the proposal	7 days
		Decision on the proposal from the date of receipt of the proposal or from the date of receipt of additional requirement whichever is later	
		Providing a copy of the policy along with the proposal form	15 days
		Free look cancellation and refund of deposit from the date of receipt of the request	7 days
2	Post Policy Service Request	Post Policy Service Requests concerning mistakes/corrections in the Policy document	7 days
3	Policy Servicing (From the date of receipt of request)	Change of Address (KYC Norms to be complied)	
		Registration /Change of Nomination, Assignment.	
		Alteration in Original Policy Conditions (where applicable)	
		Issuance of duplicate policy	7 days
		Inclusion of new members (in case of group policies)	
		Any other non-claim-related changes	

		Cancellation of policy and refund of premium	
4	Claims	Acceptance of cashless claims by TPA /company to Hospital and communicate to them	1 hour
		TPA's offer of settlement to the Insurer / Hospital after submission of document	3 hours
		Settlement of claims (other than cashless)	15 days
5	Auto Action by the Insurer	Premium Due Intimation	One month before the due date
6	Complaints	Acknowledge to complaint	Immediately
		Action on Complaint & Intimation of Decision to the complainant	14 days
		If complaint is NOT resolved by the Us, communicate the details to the Policyholder of options including referring the complainant to Insurance Ombudsman / Consumer Court	14 days from the original date of receipt of the complaint *

*The policyholder may approach the Insurance Ombudsman if their complaint is not resolved within 30 days or if the decision of the company is not acceptable to the policyholder

Disclaimer : It is hereby clarified that this does not, in any manner, form part of the policy terms and conditions of United India Insurance Co. Ltd., nor does it constitute any condition of service for the company's employees.

PREVENTION OF MIS-SELLING / UNFAIR BUSINESS PRACTICES AND ENSURING PROPER SOLCITATION/ SALE OF PRODUCTS

The major strategy for preventing mis-selling is to educate the marketing force about the terms and conditions of the Products and inform them about the prescribed code of conduct. Agents' meetings shall be held on a fortnightly basis in operating offices. Agents shall be apprised about the policies of the Company, Product Features, market trends and challenges and their own performance based on reports. Apart from these regular training sessions, we shall also organize special training programmes for selected Agents from time to time. We believe that only a well-educated and well-informed Agency force can communicate with the prospects about the benefits of the products and can ensure

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that the benefits / returns of the product are not mis-stated / mis-represented.

Terms of appointment of the Agents and the Code of Conduct for the Agents, which they are made aware of at the time of their appointment itself, have adequate provision to prevent mis-selling and misrepresentation by the Agents. Necessary disciplinary provisions have also been stated therein.

Brokers' Meet and Awareness Programme shall be organized across regions periodically for the Brokers so that our Products and Policies are well understood by the Brokers and communicated to the Policyholders and the prospects in the right way.

Periodical training sessions shall be conducted for Specified Persons of the Bank branches of our Bancassurance agents. This would help to spread awareness of our products and prevent mis-selling.

We also have our Conduct and Discipline rules in place for employees' behavior and conduct.

GRIEVANCE REDRESSAL MECHANISM

We have a **Board-approved Grievance Redressal Policy**, which can be accessed on our official website. For complete details on the procedure for prompt and effective resolution of complaints, please refer to the policy.

Key highlights of our grievance redressal process include:

Modes of Communication

Policyholders may register either by inhouse portal United India Grievance Management system (UGMS), letter/over telephone/personal visit/e.mail, on various portals maintained by the IRDAI/Ministry/National Consumer Helpline/Directorate of Public Grievances and Pension.

Office Contact Information

Our website provides a comprehensive list of offices along with their office codes, names of office in-charges, contact numbers, and email addresses.

Escalation Process

Policyholders or prospects are encouraged to first approach the issuing office for grievance resolution or queries.

If not resolved satisfactorily, they may escalate the matter to the Regional Office Customer Care Department, followed by the Head Office Customer Care Department, if required.

Dedicated Email Support

We have created specific email addresses to streamline communication:

- o customercare@uiic.co.in
- o Policyholders may use these to lodge any complaints or share feedback.

Integrated Complaint Tracking

All customer service and grievance-related transactions are recorded in our **UGMS**

UNITED INDIA GRIEVANCE MANAGEMENT SYSTEM

UGMS is integrated in real-time with the **Integrated Grievance Management System (IGMS)**, **Bima Bharosa** of IRDAI, ensuring real-time status updates of each complaint.

Grievance Redressal: The Customer Grievance Redressal System (CGRS) attached as Annexure 1 to this Policy, has been updated in line with IRDAI's Protection of Policyholders Interests Regulation 2024 and it forms part and parcel of the Board approved Policy for Protection of Policyholders' Interests.

The timelines for resolution of grievance is given herein below:

Activity	Timeline (from date of registration of the grievance)
Written acknowledgement of grievance to a complainant	Immediately
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

OPERATING STRUCTURE FOR THE PROTECTION OF POLICYHOLDERS' INTERESTS

At our organization, safeguarding the interests of policyholders is a core value embedded across all levels of operation. While every department shares this responsibility, a dedicated structure ensures focused oversight, accountability, and continuous improvement in customer service.

1. Board Level Oversight

- The **Board of Directors** has established a specialized committee titled: "**Policyholders' Protection, Grievance Redressal & Claims Monitoring Committee.**"
- This committee is responsible for conducting periodic reviews of the company's performance in protecting policyholders' rights and enhancing customer satisfaction.

2. Head Office Level

- A **General Manager** provides top-level oversight of the **Customer Care Department**.
- A designated **Grievance Redressal Officer (GRO)**, at the level of **Deputy General Manager**, handles escalated complaints and ensures effective resolution.
- The department is staffed by experienced professionals and led by a **Chief Manager**, ensuring operational efficiency and timely grievance redressal.

3. Regional Office / Service Hub Level

- Each region is overseen by a **Regional Manager**, responsible for driving customer care initiatives.
- A **Customer Care Nodal Officer** assists the Regional Manager in grievance handling and maintaining high standards of service delivery.

4. Operating Business Office Level

- The **In-Charge of each Business Office** holds direct accountability for protecting policyholders' interests, addressing customer concerns, and ensuring prompt, quality service.

Our Commitment:

This multi-tiered framework reflects our unwavering commitment to delivering **responsive, transparent, and accountable service** to all policyholders, thereby reinforcing trust and satisfaction at every level of interaction.

STANDARDS, FAIRNESS AND OPENNESS OF THE POLICY

This Policy shall be reviewed by the Policyholder Protection, Grievance Redressal and Claims Monitoring (PPGR&CM) Committee at periodical intervals. Amendments, if any, made to these documents upon such review shall stand incorporated in this Policy.

The Chairman cum Managing Director of the Company shall have the powers to issue necessary clarifications for removal of doubts on any provision of the policy and may prescribe guidelines for implementation of the policy in its overall framework.

We shall

- Invite feedback from customers on services availed in our UGMS portal
- Review the standards of services offered annually with a view to improve the benchmarks.



UNITED INDIA INSURANCE COMPANY LIMITED
 Regd. & Head Office: 24 Whites Road, Chennai 600 014

Customer Grievance Redressal System 2025

1. Introduction:

Grievance or Complaint is defined as 'Any Communication that expresses dissatisfaction about an action or lack of action or about the standard of service/deficiency of service of the Insurance Company and/or an Intermediary and seeks remedial action.

2. The framework of the Grievance Redressal Policy covers the following aspects:

a. **Registration of Grievance/Complaint:** A complainant may register a complaint with the Company for defects/deficiency/delay/repudiation/non-payment/partial payment/arbitrary deduction/refund/misbehaviour relating to all services and products rendered by the Company.

b. **Mode of Registration:** The Complainant may register his complaint either by inhouse portal United India Grievance Management system (UGMS), letter/over telephone/personal visit/e.mail on various portals maintained by the IRDAI/Ministry/National Consumer Helpline/Directorate of Public Grievances and Pension.

c. **Timeline for acknowledgement:** Every grievance must be acknowledged immediately.

d. **Timeline for resolution of the grievances:** Redressal of grievance must occur within 15 days unless it is complicated or warrants substantial time because of legal requirement or other such reasons.

e. **Display of details regarding Grievance Redressal Procedure and contact details of Customer Care Officers:**

(i) The Grievance Redressal Procedure with contact details of various Grievance Officers/Customer Care Officers should be displayed in the website and must be updated from time to time.

(ii) A copy of the CGRS will be displayed in English and local language in all offices of the Company.

(iii) Every Office of the Company shall display in a prominent place, the name, address and other details of the Insurance Ombudsman within which the jurisdiction of the office falls.

(iv) Dedicated Toll Number- 1800 425 33333, for attending to the calls from Customer.

- f. Closure of Complaint/Grievance:** A complaint shall be considered as disposed off and closed when the Company has responded to the request of the Complaint within the terms of relevant policy/rules of the Company or when there is an evidence of payment/reply submitted by the Company or when the complainant has not responded to our request to submit the required documents/to comply with the requirements, within 8 weeks, as fixed by IRDAI.

The final reply sent to the complainant shall contain the address of the Insurance Ombudsman to whom the complainant can approach if he/she is not satisfied with the Company decision.

- g. Grievance Redressal Structure:** There will be a Grievance Redressal Officer in the Company at a Senior level nominated at the Corporate Office. The GRO at the Corporate Office shall be contact person for the IRDAI/Ministry/General Insurance Council.

3. The Company will have a 3 Tier Grievance Redressal Machinery with designated Grievance Officer at each level as follows:

At operating/business Office:

Office In charge shall be the Grievance Officer and he/she would attend to all grievances received.

At Regional Office: A Scale-III/IV Officer in the concerned Regional Office shall be Grievance Officer of the Region. Grievances of complex nature/beyond approval limit of operating office, shall be put up to Grievance Review Committee of RO.

At Head Office: A Scale V/VI Officer in HO-Grievance Department shall be nominated as the Grievance Redressal Officer. Grievances of complex nature/beyond approval limit of RO, shall be put up to Grievance Review Committee of HO.

- (a) The designated Grievance officers of Business office/RO shall be available at their respective offices for personal interaction with customers on all Wednesday between 3.00 PM and 5.00 PM except on holidays. In case of the designated Grievance Officers are on leave/absent on any Wednesday, another nominated Officer of the same office shall attend to the customer interaction. All complaints/grievance received during interaction shall be registered and numbered for necessary action.
- (b) Customer may meet the Grievance Officers with prior appointment on any other working day during working hours.
- (c) The names of the Grievance Officer shall be displayed in English and the Local Language in the Operating Office/Regional Office Notice Board along with his mobile number.
- (d) The Company's Corporate website will display the details of Grievance Officers prominently.
- (e) Customers who are not in a position to meet the Grievance Officers may send their complaint/grievance in writing by post or drop the letter in the complaint box kept in each office. Our offices would attempt to clear the contents of the box daily and it will be registered and numbered along with complaints received by post or other means.

4. Grievance Committees:

Grievance Review Committees in Regional Offices shall be constituted with the Officers of the RO. The Committee may be further strengthened by including an outside member such as a retired District Court Judge or a retired Chairperson of Consumer Forum. The Grievance Review Committee of Regional Office shall be constituted with the Regional in charge as the Chairperson, Regional Managers/Managers (Technical, IT) and Regional Manager- In charge of Uni Customer Care Department. Minimum quorum would be Chairperson, RM, Uni Customer care and any other member. They are authorized to consider the grievances up to the financial limits of the Regional Claims Committee of that particular RO. The Grievance Review Committee of RO will meet periodically as per requirement to redress/dispose grievances within the specified time schedule.

The HO Grievance Review Committee shall be constituted with the General Manager of Customer Care Department as Chairperson, Grievance Redressal Officer of HO, DGM(IT), DGM (Motor), DGM (Health) and DGM (Property) as the other members. Minimum Quorum would be Chairperson, GRO and any 1 other member.

The HO Grievance Review Committee may be further strengthened by including an outside member such as retired District Court Judge or a retired Chairperson of Consumer Forum/retired Chairman/Ombudsman, which would help in providing transparency in the decision-making process.

Grievances exceeding the powers of Regional Grievance Review Committee & of complex nature, shall be placed before the Grievance Review Committee of HO for their decision upon a written representation from the insured/aggrieved customer on the decision taken.

HO Grievance Review Committee shall examine and decide upon grievances relating to claims up to financial powers applicable to General Manager/Scale VII of the Company. In respect of claims decided by CMD/HCC, the HO GRC based on the advice of Domain Department in HO shall put up a detailed note before the said authority for re-examining and a decision in the matter.

In both the above cases, the domain department in HO will have to re-examine the cases and give a detailed report/present the case before GRC at HO.

5. UGMS-Online Portal:

An Online Grievance Redressal Portal shall be the place for the customers to register complaint online and track its redressal. The UGMS will be accessed by the Customer Care Officers at all levels and the same will be monitored by HO Uni Customer Care Department. It shall be integrated with Bima Bharosa – (IGMS The Integrated Grievance Management System) of IRDAI. In addition, there shall be a complaint register open for the public to post their complaints which will be kept in a prominent place in each office.

If any complaint/grievance is received directly by Head Office, Grievance Department, then the grievance shall be referred to Grievance Officer of the RO concerned who would obtain the full details relating to the grievance from the concerned office and convey the same to HO Grievance Department within 10 days (In case of grievance referred by DPG/IRDAI/Ministry, the replies shall be given within 21 days). HO Grievance Department should then reply to the complainant within 5 days of receipt of details from RO in all cases except where the complexities in a case demand more time in which case, appropriate update on the status shall be communicated to the complainant. (overall timelines is 15 days).

Similar procedure as described above shall be followed by Regional Offices in respect of complaints/grievances received by them directly. Reply in such cases shall be given by RO Grievance Department within the same time frame. Grievance Review Committees of Ros should meet periodically to redress/dispose grievance within the specified time schedule and send returns to HO, Grievance Department.

6. MINISTRY PORTAL GRIEVANCES

The various Portals such as CPGRAMS, PMOPG, DPG, DARPG shall be accessed on a daily basis by the Nodal Officer at Head Office. All Policyholders' related grievances shall be registered in the UGMS Portal and resolution details entered in both UGMS and Ministry Portals.

Grievances pertaining to non Policy holders' issues such as HR related Grievances are tracked in the Ministry portal itself alongwith the entry of resolution details.

Grievance redressal will be made part of corporate governance and Board of the Company will actively monitor redressal of complaints.