

Dispute Resolution Policy

At Phoenix Health we are committed to providing our members with high quality health cover and access to affordable care. Despite our best efforts, we understand that there may be an occasion where you would like to pass on some feedback or raise a concern regarding your experience with us.

The Phoenix Health Dispute Resolution Policy explains how we handle matters that are brought to our attention, what information we need to address a complaint and our commitment to resolving issues fairly and in good faith.

Lodging a complaint

You can lodge a complaint by:

- calling us on **1800 028 817**;
- emailing us at **enquiries@phoenixhealthfund.com.au**; or
- mail at **PO Box 156, Newcastle NSW 2300**

Please note that complaints need to be about a health insurance related matter. Complaints about the quality of service or treatment provided by a health professional or a hospital should be directed to the provider as per the service providers dispute policy

Protecting your privacy

We are committed to protecting and maintaining your privacy, and/or the privacy of someone whom you have authorised to represent you in the matter. Your information will be handled in accordance with the Phoenix Health Privacy Policy.

What happens when we receive a complaint?

We will:

- contact you within five working days to acknowledge receipt of your written complaint, or immediately if you contacted us by phone, and outline our process for handling the complaint;
- provide an update within 7 days on the progress of the complaint (or at another time if agreed to by both parties);
- provide you with updates each week (no longer than 7 days between updates) until the complaint is resolved; and
- notify you of the outcome and the reasons for the outcome.

We will investigate whether:

- we have followed the relevant product and service guidelines;
- we need additional information to review your complaint;
- a complaint has been made about a person and their rights;
- it would be appropriate to escalate the complaint to our Member Service Manager or in some circumstances, we will refer the matter to our Chief Executive Officer.



We're listening

This Dispute Resolution Policy outlines our processes for letting us know if you have feedback or concerns about your experience with us.

We have a genuine interest in hearing where you think we can do better and finding common ground on matters that are important to you.



Sharon Waterhouse
Chief Executive Officer

Options for external dispute resolution

If you are not satisfied with our handling of the complaint, you may seek complaint mediation through the Commonwealth Private Health Insurance Ombudsman (PHIO).

PHIO is an independent office, appointed by the Federal Government, whose services are free to all health fund members. The Private Health Insurance Ombudsman handles enquiries, suggestions and complaints and will assist you in resolving a dispute.

Online: ombudsman.gov.au

Phone: 1300 362 072

We're here to help

If you need assistance with understanding this process or making a complaint, please reach out to our Member Service Team on the contact details below.