

Making enquiries and complaints.

▶ The information in this document forms part of the CareSuper Member Guide Product Disclosure Statement dated 22 December 2021 and Corporate Insurance Product Disclosure Statement dated 22 December 2021.



WE'RE YOUR FIRST POINT OF CALL

The first step to make an enquiry or complaint is through us.

Call or write to us and we'll address any problems as fairly and quickly as we can.

We can help with any enquiries or complaints you may have.

HOW TO MAKE AN ENQUIRY OR COMPLAINT

CALL US

Call **1300 360 149** between 8am and 8pm, Monday to Friday (AET).

WRITE TO US

The Enquiries & Complaints Manager CareSuper, Locked Bag 20019 Melbourne VIC 3001 or go to caresuper.com.au/getintouch.

Any complaint you make through our social media channels Facebook, LinkedIn, Twitter and YouTube are also valid, provided we are able to identify you. We'll then investigate your complaint and provide you with a response.

WHO CAN MAKE A COMPLAINT

Anyone can make a complaint, including:

- A current or former member of CareSuper
- An employer making contributions to CareSuper
- A current, potential or former beneficiary of a member, or a deceased member of CareSuper
- An executor or administrator appointed to manage the estate of a deceased member of CareSuper
- People with, or who claim to have, an interest in a death benefit
- Certain parties to a Family Law Agreement or order affecting super
- A person you have appointed to act on your behalf, such as a lawyer, a Power of Attorney, Adviser (or third party authority), or family member or friend.

HOW YOUR COMPLAINT WILL BE HANDLED

We will attempt to resolve your complaint as quickly as possible through our internal complaint management process following the steps below:

- You can make a complaint by telephone, email, online (including social media), by post or in person
- We will investigate all complaints fairly and provide a response of the outcome of the investigation, addressing the issues you have raised and what you can do if you are not satisfied with the decision or response
- We may ask you to provide more information to complete our investigation so we fully understand the events and matters as they relate to the issues you are not happy about
- There are certain timeframes (listed on the following page) that we must respond to complaints in. In most instances, if your concerns have been resolved by phone within 5 days of receiving your complaint, a written response will not be provided unless:
 - You request one
 - It relates to financial hardship
 - It relates to a declined insurance claim
 - It relates to the value of an insurance claim, or
 - It involves a decision made by the Trustee.

Disclaimer: When writing this document none of your personal financial needs, circumstances and objectives were considered, making all advice in this document general. Before making any super-related decisions, we recommend reading all available information, assessing your financial situation and seeking expert advice from a licensed or authorised financial adviser. We've taken all reasonable care to ensure the accuracy of this information, as required by law, but to the extent permitted by law, do not accept liability for any loss, direct or indirect, as a result of reliance on the information in this document.

COMPLAINT TIME LIMITS

The time it takes to investigate and respond to you will depend on the type of complaint and complexity of the matters raised. Some can take longer than others but we have up to 45 days after receiving your complaint. If you have an objection to a death benefit distribution, then we have 90 days after the expiry of the 28-day death benefit notification period to respond. See below for time limits for making disability and death complaints.

Disability benefits

No limit

Death benefits*

Within 28 days of receiving our written notice about the proposed payment decision.

*If you're not notified of the 28-day period (or if the date or notification is incorrect or faulty) the time limit doesn't apply.

ESCALATING AN ENQUIRY OR COMPLAINT TO AFCA

You may be able to escalate your complaint to the Australian Financial Complaints Authority (AFCA).

AFCA provides a fair and independent financial services complaint resolution that is free. They may be able to help resolve your complaint.

HOW AFCA MANAGES YOUR COMPLAINT

AFCA aims to resolve complaints by working towards a mutual agreement between the complainant and CareSuper. If an agreement can't be made, AFCA will review your complaint and issue us with a determination. There may be some circumstances where the Trustee can appeal this in court.

AFCA COMPLAINT TIME LIMITS

There are specific time limits set by the government for making complaints about disability benefits, death benefits and contribution statements provided to the

Australian Taxation Office (ATO) as outlined below. Making your complaint in the time limits ensures you then have access to the AFCA complaints resolution service.

Disability benefits

Employment permanently ended due to the medical condition your claim is based on:

- You made your TPD claim within 2 years of permanently ending your employment because of the medical condition, and
- You make your complaint to AFCA within 4 years of the Trustee's original decision.

Employment didn't permanently end due to the medical condition

- You make your complaint to AFCA within 6 years of the Trustee's original decision.

Death benefits

Within 28 days of receiving the Trustee's final decision notice (providing you've been advised of the 28-day period).

Generally, you can lodge a complaint within 2 years of receiving a final response from us about your complaint, but AFCA may not accept your complaint.

For complaints regarding contribution statements we have provided to the ATO, a time limit of 12 months applies from when you received our written notice (e.g. benefit statement). There are no strict time limits for making other types of superannuation complaints to AFCA.

HOW TO CONTACT AFCA

Call **1800 931 678**
Write to Australian Financial Complaints Authority
GPO Box 3
Melbourne VIC 3001
Email info@afca.org.au
Visit afca.org.au

HOW TO MAKE A COMPLAINT ABOUT PRIVACY

We take your privacy very seriously. If you have any concerns about privacy, or believe your rights have been breached and want to lodge a formal complaint, you can contact us directly. We'll investigate and provide you with a response within 30 days.

If you're not satisfied with our response, or you don't receive a response within 30 days, you can refer your complaint to the Office of the Australian Information Commissioner (OAIC).

HOW TO CONTACT OAIC

Call **1300 363 992**

Write to Office of the Australian Information Commissioner
GPO 5218
Sydney NSW 2001

Email enquiries@oaic.gov.au

Web oaic.gov.au



TALK TO US

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Monday to Friday (AET)

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Locked Bag 20019
Melbourne VIC 3001

Contact caresuper.com.au/getintouch

Visit caresuper.com.au