How to make a complaint

At MetLife we always aim to do the right thing by our customers. So if you're unhappy or dissatisfied about something you've experienced, we'd like to hear about it.

Our complaints process is your opportunity to have your case reviewed by our specialist team – giving you a considered outcome and giving us valuable feedback on where we can improve.

Who can lodge a complaint?

Anyone can lodge a complaint or feedback at any stage.

If you wish for someone to lodge a complaint on your behalf, MetLife will require your written consent to meet our privacy obligations (see contact details).

You can lodge a complaint by:



- calling us on 1300 555 625
- completing our 'Contact Us' form
- emailing aucomplaints@metlife.com
- writing to us at GPO Box 3319, Sydney NSW 2001, or
- on any social media page controlled by MetLife Australia.

How does the complaint process work?

Step 1

You lodge a complaint or feedback

We will acknowledge your complaint within 1 business day of receipt, or if that's not possible, as soon as practicable. After that, MetLife will record your complaint for tracking purposes and endeavour to resolve your complaint at first instance.

If we can resolve your complaint within 5 business days, MetLife will only provide a verbal response and not a written response unless you request one.

Australian Financial Complaints Authority (AFCA)



GPO Box 3, Melbourne VIC 3001 Telephone: 1800 931 678 Online: www.afca.org.au Email: info@afca.org.au

Step 2

Internal review of disputes

If your complaint can't be resolved by MetLife within 5 business days, or it relates to certain topics such as a declined claim, the value of an insurance claim or financial hardship, it will be escalated to our independent and specialist complaints team, Customer Relations. You can also request this escalation at any time.

Customer Relations will review and investigate the issues raised in your complaint. Within 30 days* of lodgement you will receive a written response to your complaint, or an update explaining why we haven't been able to resolve it.

If your insurance is held through a superannuation fund, employee scheme or trustee, you will receive the written response or update within 45 days**, from either MetLife or that partner organisation.

Step 3

External review of disputes

If you are not satisfied with MetLife's final response to your complaint, the complaints process itself, or you do not receive MetLife's final response within the timeframes specified in Step 2, you can contact the relevant industry dispute resolution service.

Please note that before these services can investigate your complaint, they generally require you to have first given MetLife the opportunity to address your complaint.

For all disputes related to any life insurance product, you should contact the **Australian Financial Complaints Authority** (AFCA).

Time limits may apply to complain to AFCA, so you should act promptly or otherwise consult the AFCA website to find out if/when the time limit relevant to your circumstances expires.

What if I need additional assistance?

Let us know at any stage if you need any additional assistance throughout the complaints process. This may include the use of an interpreter or the National Relay Service, or additional time to respond to any of our requests. You can also let us know your preferred method of communication so we can always reach you.

* This timeframe is effective 5 October 2021. For complaints received prior to this date, the timeframe is 45 days

** This timeframe is effective 5 October 2021. For complaints received prior to this date, the timeframe is 90 days.

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