



## COMPLAINT HANDLING PROTOCOL

Salus Mutual Insurance Company (the “Company”) prides itself on our exceptional customer service. If you are dissatisfied with the service received, a claims settlement, or your insurance policy, we want to know about it.

The fastest way to resolve a concern is by contacting us at 1-800-265-7635 in order to be directed to the appropriate individual. If your concern is not handled within ten business days, please escalate your concern by contacting our Company’s Complaint Officer.

### **Definition of a Reportable Complaint**

CCIR definition - An expression of dissatisfaction about the service or product provided by an insurer or intermediary. It may involve, but is differentiated from, a claim (unless relating to the administration of the claim process) and does not include a simple request for information.

Any complainant who is dissatisfied with product or services provided by Salus Mutual or its employees or associates may wish to file a complaint.

### **Complaint Officer**

Our Complaint Officer, as filed with the Financial Services Regulatory Authority of Ontario (FSRA), is Steve Dilts CPA, CMA, President & CEO.

You may contact the Complaint Officer at:

Mail: Salus Mutual Insurance Company  
29584 Pioneer Line, P.O. Box 312  
Dutton, Ontario N0L 1J0  
Email: [complaints@salusmutual.ca](mailto:complaints@salusmutual.ca)  
Phone: 1-800-265-7635 ext. 1201

### **Complaint Resolution Process**

Our goal as a policyholder-owned, purely mutual insurance company is to treat customers in a fair, courteous, and timely manner.

To initiate the Company’s complaint handling process with the Complaint Officer, please contact the Complaint Officer as noted above. You must be prepared to provide a description of your complaint and include the following information:

- 1) Your name and contact details.
- 2) Your relationship with Salus Mutual, specifying whether you are an applicant for insurance or an existing policyholder.
- 3) Your policy number, claim number or other identifying information to allow us to investigate your concerns.
- 4) The nature of your complaint and as detailed as possible a description of the conduct or issue arising in the complaint.
- 5) Copies of any documentation supporting the complaint.
- 6) This Complaint Handling Protocol does not apply to any situation involving litigation by the insured against the Company or where the insured has retained legal assistance in that regard.

### **Expected Timelines to Resolution or Final Company Position**

Complaints will be reviewed by the Complaint Officer or their alternate within five (5) business days of being received.

The Complaint Officer will consult with appropriate employees or associates and send you a letter outlining Salus Mutual's final position within sixty (60) days of the review of your complaint.

Timelines mentioned above are minimum standards.

### **Further Escalation**

If, after taking these steps, you feel that your complaint is unresolved, you have the option of contacting FSRA to further escalate your complaint.

You may contact FSRA at:

Mail: Financial Services Regulatory Authority of Ontario  
Complaints and Risk Assessment Branch  
25 Sheppard Avenue West, Suite 100  
Toronto, Ontario  
M2N 6S6

Online: <https://www.fsrao.ca/submit-complaint-fsra>

Phone: 1-800-668-0128