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Wise Healthcare Centrepay Complaints Policy

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1. Policy Information

Organisation: Wise Healthcare Pty Ltd
Trading Name: Wise Healthcare
ABN: 99 670 643 393
Policy Owner: Director / Chief Executive Officer
Approved By: Director
Version: 1.0
Effective Date: 01 June 2026

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2. Purpose

Wise Healthcare Pty Ltd is committed to providing customers with a clear, simple, accessible, fair and impartial process for making and resolving complaints relating to Centrepay.

This policy explains:

- how customers and their representatives may make a complaint;
- how Wise Healthcare receives, records, investigates and resolves complaints;
- how customers will be supported throughout the complaint process;
- how complaints may be escalated internally or externally;
- how Wise Healthcare meets its Centrepay reporting and recordkeeping obligations; and
- how complaint information is used to improve services and protect customers.

This policy is intended to comply with the Centrepay Policy for Businesses, Centrepay Terms of Use and applicable consumer, privacy, disability and NDIS requirements.

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3. Scope

This policy applies to:

- all Centrelink customers using, considering using or previously having used Centrepay to pay Wise Healthcare;
- prospective and existing Wise Healthcare customers;
- customers' nominees, advocates, guardians, family members and authorised representatives;
- Wise Healthcare directors, employees, contractors and agents; and

- complaints concerning Wise Healthcare's conduct in connection with Centrepay.

A complaint may concern:

- a deduction started without proper consent;
- an incorrect deduction amount or frequency;
- an unauthorised increase to a deduction;
- failure or delay in changing, suspending or cancelling a deduction;
- deductions continuing after accommodation or services have ended;
- an overpayment or credit balance;
- incorrect allocation of a payment;
- a disputed accommodation charge;
- goods or services not supplied as agreed;
- the quality or suitability of goods, services or accommodation;
- Centrepay being presented as mandatory;
- failure to offer another payment method;
- fees or charges associated with using Centrepay;
- customer hardship or financial risk;
- staff conduct;
- privacy or confidentiality;
- discrimination, victimisation or retaliation;
- insufficient information about a deduction;
- failure to provide records or a response; or
- any other concern connected with Wise Healthcare's use of Centrepay.

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4. Policy Principles

Wise Healthcare will:

1. treat complaints seriously, respectfully and confidentially;
2. make the complaint process free and accessible;
3. accept complaints through multiple channels;
4. assist customers who experience disability, communication, literacy, language or technological barriers;
5. handle complaints fairly, impartially and without bias;
6. ensure that the person investigating a complaint is not directly involved in the matter

wherever practicable;
7. provide procedural fairness to all affected parties;
8. protect complainants from retaliation, disadvantage or interruption of services because they made a complaint;
9. consider the customer's safety, wellbeing, financial position and vulnerability;
10. respond in writing, or verbally where a written response is not possible or appropriate;
11. aim to resolve complaints within 20 business days;
12. promptly correct unauthorised deductions, overpayments and administrative errors;
13. notify Services Australia about serious, repeated or unresolved complaints within the required timeframe;
14. retain complaint records for at least seven years; and
15. use complaint information to improve systems, services and staff practices.

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5. Centrepay Commitments

Wise Healthcare recognises that Centrepay is:

- voluntary for customers;
- free for customers;
- one payment option rather than the only available payment method; and
- dependent on the customer's informed and express consent.

Wise Healthcare will not:

- force, pressure or improperly influence a customer to use Centrepay;
- make Centrepay a condition of receiving accommodation or services;
- charge a customer a Centrepay transaction fee;
- pass any Centrepay business fee or administrative cost to a customer;
- start, restart or increase a deduction without the customer's consent;
- prevent or discourage a customer from varying or cancelling a deduction;
- continue deductions where the customer is no longer liable for the relevant charge;
- knowingly retain an overpayment to which Wise Healthcare is not entitled; or
- use Centrepay for goods or services outside the service reasons for which Wise Healthcare is approved.

Customers may use another payment method offered by Wise Healthcare, including electronic

funds transfer, debit card, credit card, EFTPOS or bank direct debit, subject to the applicable service or accommodation agreement.

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6. Accessing This Policy

A customer may obtain this policy:

- from the Wise Healthcare website;
- by asking any Wise Healthcare staff member;
- by email;
- by post;
- in person at the Wise Healthcare office; or
- in another accessible format where reasonably requested.

Wise Healthcare will provide a copy of this policy within five business days of a customer requesting it.

The policy is available free of charge.

Where required, Wise Healthcare will assist a customer to understand this policy through:

- plain-language explanations;
- Easy Read information;
- an interpreter;
- a communication aid;
- a support person, advocate or nominee; or
- another reasonable communication adjustment.

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7. Who May Make a Complaint

A complaint may be made by:

- the customer;
- a prospective customer;
- a former customer;
- a nominee;
- a guardian;

- an advocate;
- an authorised representative;
- a family member or support person;
- a service provider;
- a regulator; or
- another person with information about the matter.

Where a person makes a complaint on behalf of a customer, Wise Healthcare may confirm their authority before disclosing the customer's personal information.

A customer may make a complaint anonymously. Wise Healthcare will consider and investigate anonymous complaints as far as reasonably possible, although anonymity may limit the investigation or the response that can be provided.

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8. How to Make a Complaint

A complaint may be made:

Telephone: 03 9005 7786
Email: hello@wisehealthcare.com.au
Online: https://wisehealthcare.com.au/contact-us/
Post: Wise Healthcare, Suite 22, 797 Plenty Road, South Morang VIC 3752
In person: At the Wise Healthcare office or by speaking with an authorised staff member
Through an advocate or representative: With the customer's permission where required

A complaint does not need to be in writing. Wise Healthcare will accept complaints made verbally, through an interpreter, using assistive technology or through a representative.

Any staff member receiving a complaint must:

- listen respectfully;
- record the complaint;
- confirm the customer's preferred communication method;
- identify any immediate safety or financial risks; and
- promptly refer the complaint to the responsible manager or complaints officer.

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9. Information That May Assist the Complaint

Where possible, a complainant should provide:

- their name and contact details;
- the customer's name, where the complaint is made by another person;
- their relationship to the customer;
- the date and nature of the issue;
- the deduction amount and frequency;
- relevant accommodation, invoice, receipt or payment details;
- what occurred;
- who was involved;
- any supporting documents;
- any immediate risks or hardship;
- the outcome they are seeking; and
- their preferred method of communication.

A complaint will not be rejected merely because some information is unavailable.

Wise Healthcare will help the complainant identify and provide relevant information where assistance is required.

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10. Immediate Risk and Protective Action

Wise Healthcare will treat a complaint urgently where it involves:

- an allegedly unauthorised deduction;
- a deduction continuing after consent was withdrawn;
- immediate financial hardship;
- risk of homelessness;
- possible fraud, exploitation, coercion or abuse;
- serious misconduct;
- privacy or data compromise;
- repeated incorrect deductions;
- a vulnerable customer;
- a threat to health, safety or wellbeing; or
- a matter that may affect multiple customers.

Where appropriate, Wise Healthcare may immediately:

- place the disputed matter on hold;
- cease or request cancellation of the deduction;
- prevent further increases or changes;
- review the deduction authority;
- reconcile the customer's account;
- contact Services Australia;
- arrange a refund;
- preserve relevant records;
- escalate the matter to senior management;
- notify an appropriate regulator or authority; or
- arrange advocacy, financial counselling or safeguarding support.

Stopping or suspending a disputed deduction does not prevent Wise Healthcare from separately resolving any legitimate debt through lawful and appropriate processes.

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11. Acknowledging a Complaint

Wise Healthcare will aim to acknowledge a complaint within two business days.

The acknowledgement will normally include:

- confirmation that the complaint has been received;
- the name or position of the person handling it;
- a complaint reference number, where available;
- an outline of the next steps;
- any further information required;
- the expected timeframe;
- the customer's escalation options; and
- contact details for further enquiries.

Where a written acknowledgement is not possible, Wise Healthcare may provide the acknowledgement verbally and record this in the complaint file.

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12. Assessment and Triage

The complaints officer or responsible manager will assess:

- the seriousness and urgency of the complaint;
- whether the matter concerns Centrepay;
- whether there is an immediate financial or safeguarding risk;
- whether the deduction should be stopped, varied or investigated;
- whether the complaint is serious, repeated or unresolved;
- whether other customers may be affected;
- whether independent investigation is required;
- whether the matter must be reported to Services Australia;
- whether another regulator or authority should be notified;
- whether the complaint also falls under the NDIS complaints or incident-management framework; and
- what assistance or reasonable adjustments the complainant requires.

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13. Investigation

Wise Healthcare will conduct investigations that are proportionate to the seriousness and complexity of the complaint.

An investigation may include:

- speaking with the complainant;
- reviewing the customer's Centrepay deduction authority;
- confirming whether valid consent was obtained;
- reviewing deduction commencement, change and cancellation records;
- examining payment and reconciliation reports;
- reviewing invoices, receipts and accommodation agreements;
- checking the customer's account and any credit balance;
- interviewing relevant employees or contractors;
- reviewing correspondence and telephone records;
- considering relevant legislation, Centrepay requirements and organisational policies;
- identifying whether other customers are affected; and
- obtaining specialist, legal or regulatory guidance where required.

The investigator will remain impartial and will not have a direct conflict of interest in the complaint

wherever practicable.

The complainant and affected staff members will be given a reasonable opportunity to provide relevant information.

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14. Timeframes

Wise Healthcare will aim to resolve complaints within 20 business days.

Where a complaint cannot be resolved within 20 business days, Wise Healthcare will:

- inform the complainant before or as soon as practicable after the timeframe expires;
- explain the reason for the delay;
- describe the actions already taken;
- identify any outstanding information;
- provide a revised expected completion date;
- continue to provide reasonable progress updates; and
- consider whether the complaint must be notified to Services Australia as unresolved.

Urgent complaints will be prioritised and addressed as quickly as reasonably possible.

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15. Complaint Outcomes

Following the investigation, Wise Healthcare may:

- uphold the complaint;
- partially uphold the complaint;
- resolve the complaint by agreement;
- determine that the complaint is not substantiated;
- correct customer records;
- cancel, suspend or amend a deduction;
- refund an overpayment;
- waive or correct an inappropriate charge;
- issue an apology or explanation;
- provide the relevant service or remedy;
- improve a policy, procedure or system;
- provide staff training, guidance or supervision;

- take disciplinary or contractual action where appropriate;
- make a report to Services Australia or another authority; or
- take other reasonable corrective or preventive action.

An outcome will be based on the available evidence and applicable requirements.

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16. Advising the Complainant of the Outcome

Wise Healthcare will provide the outcome:

- in writing; or
- verbally where a written response is not possible, appropriate or requested.

The outcome will normally explain:

- the complaint issues considered;
- the investigation undertaken;
- the information reviewed;
- the findings;
- the reasons for the decision;
- any corrective action or remedy;
- any refund or deduction adjustment;
- any process improvements;
- the complainant's internal review rights; and
- external escalation options.

Where an outcome is provided verbally, Wise Healthcare will make a written internal record of the advice provided.

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17. Refunds and Overpayments

Where Wise Healthcare identifies an incorrect or unauthorised payment, it will promptly:

- stop or correct the relevant deduction where it has authority to do so;
- reconcile the customer's account;
- calculate the amount owing to the customer;
- communicate the outcome to the customer;
- refund the amount using an appropriate payment method; and

- maintain evidence of the refund and account correction.

Wise Healthcare will not retain an overpayment as a credit where the customer is no longer using, or does not intend to use, the relevant goods, services or accommodation.

Any disputed amount will be handled fairly and will not be treated as resolved merely because the deduction has stopped.

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18. Internal Review and Escalation

A complainant who is dissatisfied with the initial outcome may request an internal review.

The review will, wherever practicable, be completed by a senior person who:

- was not the original decision-maker;
- has appropriate authority;
- has no conflict of interest; and
- can reconsider the evidence and outcome impartially.

The reviewer may:

- confirm the original outcome;
- vary the outcome;
- request further investigation;
- propose another remedy; or
- refer the matter to the Director.

The complainant will be advised of the review outcome and external escalation options.

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19. Notification to Services Australia

Wise Healthcare will notify Services Australia within five business days after becoming aware of:

- a serious Centrepay complaint;
- a repeated Centrepay complaint;
- an unresolved Centrepay complaint;
- a customer who remains dissatisfied with Wise Healthcare's complaint outcome;
- a complaint indicating that multiple customers may be affected;

- a complaint involving unauthorised deductions or significant financial harm;
- a complaint involving suspected systemic non-compliance; or
- another matter required to be reported under the Centrepay Policy for Businesses or Terms of Use.

Wise Healthcare will provide Services Australia with relevant information about:

- the complaint;
- the investigation;
- findings;
- corrective action;
- refunds or payment adjustments;
- customer communication;
- process improvements; and
- any continuing risk.

Wise Healthcare will cooperate with Services Australia in any complaint investigation, assurance activity, compliance review or audit.

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20. Complaints Directly to Services Australia

A customer may make a Centrepay complaint directly to Services Australia at any time.

Customers may:

- use the Services Australia online complaints and feedback form;
- call the Services Australia Feedback and Complaints line on 1800 132 468;
- contact Services Australia through their usual Centrelink payment line;
- use their Centrelink online account through myGov; or
- visit a Services Australia service centre.

Wise Healthcare will not discourage a customer from contacting Services Australia or another authority.

Where Wise Healthcare cannot resolve a complaint satisfactorily, it will provide the customer with information about contacting Services Australia.

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21. Other External Assistance

Depending on the nature of the complaint, a complainant may also contact:

NDIS Quality and Safeguards Commission

For concerns about the quality or safety of NDIS-funded supports or services.

Telephone: 1800 035 544
TTY: 133 677
National Relay Service: 1800 035 544

Consumer Affairs Victoria

For consumer, accommodation, contract or fair-trading concerns.

Telephone: 1300 55 81 81

Australian Competition and Consumer Commission

For information about consumer rights and Australian Consumer Law.

Office of the Australian Information Commissioner

For privacy complaints concerning the handling of personal information.

Commonwealth Ombudsman

Where the complainant remains dissatisfied with Services Australia's handling of a Centrepay complaint.

Advocacy and Support

A customer may obtain assistance from:

- an independent disability advocate;
- a community legal centre;
- a financial counsellor;

- a nominee or guardian;
- an interpreter service; or
- another trusted support person.

Wise Healthcare will provide reasonable assistance to access an external complaint or advocacy option.

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22. Privacy and Confidentiality

Wise Healthcare will handle complaint information in accordance with:

- applicable privacy legislation;
- the Australian Privacy Principles;
- NDIS privacy requirements;
- Centrepay requirements; and
- Wise Healthcare's Privacy Policy.

Complaint information will be:

- collected only as reasonably necessary;
- stored securely;
- accessed only by authorised persons;
- disclosed only with consent or where authorised or required by law;
- protected from unauthorised access, loss, alteration or disclosure; and
- used for investigation, resolution, reporting, safeguarding and organisational improvement.

The complainant's identity will be kept confidential as far as reasonably possible. Complete confidentiality cannot be guaranteed where disclosure is necessary to investigate the complaint, protect a person or comply with the law.

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23. No Retaliation or Disadvantage

A person will not be:

- refused services;
- evicted or threatened with eviction;
- treated unfairly;
- intimidated;

- harassed;
- subjected to retaliation;
- charged additional amounts; or
- otherwise disadvantaged

because they made, supported or intended to make a complaint.

Any allegation of retaliation will be treated as a serious complaint and escalated to senior management.

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24. Complaint Records

Wise Healthcare will maintain a complaint register and retain complaint records for at least seven years.

Records may include:

- the date the complaint was received;
- the complainant's details;
- the customer's details;
- the issues raised;
- accessibility or communication needs;
- Centrepay deduction information;
- risk and urgency assessment;
- evidence collected;
- investigation notes;
- correspondence;
- findings and reasons;
- actions and remedies;
- refunds or deduction changes;
- internal review outcomes;
- notifications to Services Australia or other authorities;
- systemic issues identified;
- process improvements;
- the date the complaint was closed; and
- evidence that the complainant was advised of the outcome.

Complaint records will be maintained separately from general service notes where appropriate and

protected against unauthorised access.

25. Serious, Repeated and Systemic Complaints

Wise Healthcare will analyse complaints to identify:

- repeated complaints about the same issue;
- recurring deduction errors;
- complaints involving the same staff member or process;
- patterns affecting vulnerable customers;
- systemic consent problems;
- repeated cancellation or refund delays;
- inaccurate records;
- deficiencies in staff training;
- potential misconduct; and
- non-compliance with Centrepay requirements.

Serious, repeated or systemic issues will be escalated to the Director and reported to Services Australia where required.

Corrective action may include:

- reviewing affected customer accounts;
- contacting potentially affected customers;
- making refunds;
- changing systems or controls;
- revising policies and procedures;
- delivering additional staff training;
- increasing supervision or auditing;
- restricting system access;
- disciplinary action; or
- notifying a regulator.

26. Continuous Improvement

Wise Healthcare will use complaint information as part of its continuous improvement and

compliance-management systems.

Following a complaint, Wise Healthcare will consider:

- what happened;
- why it happened;
- whether the problem could affect other customers;
- whether the existing controls were adequate;
- what corrective action is required;
- how recurrence can be prevented;
- whether staff require further training;
- whether policies, forms or agreements require amendment; and
- whether the effectiveness of corrective action should be reviewed.

Actions arising from complaints will be recorded, assigned to responsible staff, monitored and closed only after completion.

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27. Staff Responsibilities

All Wise Healthcare personnel must:

- understand this policy;
- recognise and record complaints;
- respond respectfully;
- assist customers to use the complaint process;
- immediately escalate urgent financial, safety or safeguarding concerns;
- preserve relevant records;
- maintain privacy and confidentiality;
- avoid conflicts of interest;
- cooperate with investigations;
- implement corrective action; and
- comply with Centrepay obligations.

Only authorised personnel may access or manage Centrepay deductions and reconciliation information.

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28. Staff Training

Wise Healthcare will provide relevant staff with training covering:

- the purpose and voluntary nature of Centrepay;
- customer consent requirements;
- starting, varying, suspending and cancelling deductions;
- alternative payment methods;
- prohibition against passing Centrepay fees to customers;
- recognising complaints;
- accessible complaint handling;
- financial hardship and vulnerability;
- refunds and overpayments;
- privacy and recordkeeping;
- reporting serious, repeated or unresolved complaints;
- fraud, coercion and exploitation risks; and
- escalation to Services Australia.

Training will occur at induction, when Centrepay responsibilities are assigned, after significant policy changes and periodically thereafter.

Training attendance and competency records will be retained.

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29. Management Oversight and Review

The Director or delegated senior manager is responsible for:

- overseeing compliance with this policy;
- reviewing the complaint register;
- ensuring complaints are resolved within required timeframes;
- approving reports to Services Australia;
- monitoring refunds and corrective actions;
- identifying systemic issues;
- reviewing staff training;
- ensuring records are retained; and
- reporting material risks to organisational governance.

This policy will be reviewed:

- at least annually;
- following a serious or systemic complaint;
- after an adverse compliance finding;
- when Centrepay requirements change;
- when relevant legislation changes; or
- where monitoring identifies that the policy is not operating effectively.

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30. Related Documents

This policy should be read with:

- Wise Healthcare Feedback and Complaints Policy;
- Wise Healthcare Feedback and Complaints Procedure;
- Wise Healthcare Easy Read Feedback and Complaints Policy;
- Wise Healthcare Privacy Policy;
- Wise Healthcare Incident Management Policy;
- Wise Healthcare Continuous Improvement Policy;
- Wise Healthcare Records Management Policy;
- Wise Healthcare Accommodation or Occupancy Agreements;
- Centrepay Deduction Authority procedures;
- Centrepay reconciliation and refund procedures;
- Centrepay Policy for Businesses;
- Centrepay Terms of Use; and
- applicable NDIS policies and procedures.3

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31. Contact

Questions about this policy may be directed to:

Wise Healthcare Pty Ltd
Suite 22, 797 Plenty Road
South Morang VIC 3752

Telephone: 03 9005 7786
Email: hello@wisehealthcare.com.au
Website: https://wisehealthcare.com.au/