

## **Statement from BT Financial Group (representing Westpac) to Background Briefing**

“We understand that issues surrounding mental health and the insurance industry can often be complex and at times confronting given the nature of the hardship being presented.

We approach all customers with compassion and work closely with healthcare professionals and their employer to best support their recovery.

We have allied health professionals on staff, including clinical psychiatrists, to help customers with a range of services. These include rehabilitation plans, exercise physiology programs and wellbeing, through to nutrition and life coaching.

Any suggestion that BT unnecessarily seeks independent medical opinion as part of the claims process is incorrect.

Around half of all claimants with a mental illness are not referred to any independent medical experts by BT. In these circumstances medical opinion from the customer’s own specialists is used to determine the claim.

BT does request independent medical advice in instances where there are differing views, or there is limited or contradictory evidence.

This was a unique claim with challenging circumstances and we strongly believe we acted fairly and in good faith in seeking to understand Mr Fernando’s situation.

We do not believe it is unreasonable in complex claims to ask a customer to attend two specialist appointments a year to help us understand contradicting information.

As raised by the ABC, from June 2012 to September 2015 BT was supporting Mr Fernando with income protection payments as he continued to receive treatment as his TPD claim was assessed.

BT will happily further review the claim should there be any change to Mr Fernando’s condition and there is supporting medical evidence. Mr Fernando can escalate to the Financial Ombudsman Service (FOS), a free service for consumers, and we have provided details on how he can do this”