Please read your Pet Health Insurance Policy carefully to determine the parties’ rights and duties and what is and is not covered. Some provisions in the policy limit or restrict coverage.

Throughout this policy, the words you and your, refer to the policyholder (Pet Parent) shown in the Declarations Page.

The words we, us and our, refer to the company providing this insurance.

Words and phrases that appear in bold type have special meaning found in Section V. Definitions.

I. INSURING AGREEMENT

We rely on the statements you made in the application. Upon your payment of the premiums when due, we will provide coverage as specifically described in this policy for your pet as shown on the declarations page.

Benefits are subject to terms, conditions, limitations and exclusions of this policy and to your responsibility for the coinsurance and deductible. Coverage is in effect at the time and date shown on the declarations page subject to the waiting periods described in II. EXCLUSIONS & LIMITATIONS 1) b., 1) c. and 1) d.

1) WE COVER: Reimbursement of the cost incurred by you for medically necessary veterinary treatment recommended by your veterinarian for conditions covered by this policy. These costs will be covered when your pet:
   a. develops an illness, or
   b. has an injury as a result of an accident;
   during the coverage term.
   This policy shall not cover amounts charged by the treating veterinary clinic that are greater than the treating veterinary clinic’s standard or published charges.

2) LIFETIME LIMIT: The maximum amount you may claim while coverage is in force with respect to any one pet for veterinary treatment over the lifetime of that pet. The Lifetime Limit is shown on the declarations page. Subject to the maximum lifetime limit, there are no limits per claim or per year.

3) COINSURANCE: The portion you are required to pay for your pet’s veterinary treatment. Your pet’s coinsurance amount is shown on the pet schedule of the declarations page.

4) DEDUCTIBLE: Your pet’s deductible is shown on the pet schedule of the declarations page. Your pet’s deductible shall apply once per coverage term.

5) MONTHLY PREMIUM: Your monthly premium is set forth on your declarations page. Monthly premiums may change for all policyholders to reflect changes in the costs of veterinary medicine. We will notify you at least sixty (60) days in advance of such change.

6) CHANGES TO YOUR COVERAGE: Your coverage, coinsurance, and deductible will not change due to your pet’s claims experience.

II. EXCLUSIONS & LIMITATIONS

1) GENERAL EXCLUSIONS
   We do not cover:
   a. Veterinary examination fees.
b. **Injury** from an **accident** that occurs within the first fifteen (15) days following the **pet policy effective date**.

c. **Illness** that occurs or recurs within the first fifteen (15) days following the **pet policy effective date**.

d. **Illness** related to hip dysplasia that occurs or recurs within the first twelve (12) months following the **pet policy effective date**.

e. Conditions or complications that result from **accidents** that occur or **illnesses** that develop or redevelop within the first fifteen (15) days following the **pet policy effective date**.

2) **PRE-EXISTING CONDITIONS**

*We do not cover pre-existing conditions.*

3) **PREVENTIVE CARE EXCLUSIONS**

*We do not cover:*

a. **Spaying** and neutering.

b. Preventive healthcare including vaccinations or titer test, flea control, heartworm medication, de-worming, nail trim, and grooming.

c. Parasite control including but not limited to internal and external parasites for which readily available prophylactic treatments are available.

d. **Dental health care**, however if injury to teeth is caused by an accident, we do cover the cost of extraction and/or reconstruction of damaged teeth.

e. Anal gland expression.

4) **OTHER EXCLUSIONS**

*We do not reimburse the costs, fees or expenses associated with:*

a. **Injury** or **illness** due to any intentional, neglectful or preventable act, including organized dog fighting, by you or a member of your household;

b. Elective procedures, cosmetic procedures, preventive procedures including but not limited to:

   1. tail docking;
   2. ear cropping;
   3. de-clawing;
   4. micro-chipping;
   5. dew claw removal; or
   6. ear cleaning;

c. Boarding or transport expenses;

d. **Conditions** arising from a specific activity if the same or a similar activity occurred prior to the **pet policy effective date** and displayed the propensity for the activity to recur and cause injury or illness to your pet;

e. Future treatment for injury or conditions of a leg when cruciate ligament problems to any other leg existing prior to the **pet policy effective date**, have been identified, regardless of whether or not the new signs or symptoms are related to such cruciate ligament problems;

f. Diseases preventable by vaccines and prophylactic medications (such as heartworm, lice, internal parasites and fleas);

g. Complications of conditions excluded or limited by this **policy**;
h. Abnormalities where clinical symptoms were apparent prior to the pet policy effective date. This includes conditions that are detectable by a routine physical exam by your veterinarian;

i. Claims in any way arising from the lack of use and/or implementation of preventive healthcare products and/or methods when such products and/or methods would be in accordance with generally accepted veterinary standards. Routine healthcare includes: vaccinations, flea control, heartworm medication, de-worming, dental care, ear plucking, grooming, and prudent regular care;

j. Special diets, foods, vitamins, grooming, nail trims, shampoo and bathing;

k. Any claim for loss from a nuclear incident as defined in the Nuclear Liability Act, nuclear explosion or contamination by radioactive material;

l. Conditions arising from any specific activity if the same or similar activity occurs after you have received written notice from us regarding the specific activity;

m. Experimental or investigational treatment or medicine;

n. Breeding or conditions relating to breeding, whelping, and queening;

o. Diagnostic tests for conditions excluded by this policy;

p. Diagnostic tests due to complications of conditions excluded or limited by this policy;

q. Conditions caused by war or war activities whether war be declared or not. War activities include civil war, insurrection, rebellion, or revolution or any act or condition incident of any of the foregoing;

r. Feeding, housing or exercise;

s. Training, therapy, medications or other methods or forms of behavioral modification;

t. Shipping or mailing costs unless associated with a covered compounded medication or diagnostic tests.

5) LIMITATIONS

a. A pet less than six (6) years of age on the date of enrollment must have undergone a complete clinical examination. The exam must have taken place either in the twelve (12) months prior to the pet policy effective date, or within fifteen (15) days following the pet policy effective date. A pet six (6) years of age or greater on the date of enrollment must have undergone a complete clinical examination within thirty (30) days prior to the pet policy effective date, or within fifteen (15) days following the pet policy effective date. Your failure to submit your pet to a complete clinical examination may void the policy. If the policy is voided, the policy premium will be refunded.

b. For pets six (6) years of age or greater on the date of enrollment, no coverage shall apply for illness related to hip dysplasia.

c. For working pets, no coverage shall apply for any condition resulting from activities related to racing, breeding, law enforcement, guarding or for any commercial use.

d. We will not make any payments for any claims for which you are entitled to be paid under any other insurance except for any additional sum which is payable over and above such other insurance.

III. GENERAL CONDITIONS

1) Premium is payable monthly by Direct Debit or by charge to your credit card, according to the option selected by you on the application. This policy is continued until cancelled, and will renew automatically each month as long as premium payments are current. When you have not paid the premium, we may cancel this policy. We will let you know at least twenty (20) days before the date cancellation takes effect. No coverage will be provided for any claim with a date of veterinary treatment between the premium due date and the cancellation date, unless the premium payments are current.

2) You may cancel your policy by notifying us in writing via regular mail, fax or email at least fourteen (14) days in advance of your next premium payment.
3) You must be the owner of each pet shown on the pet schedule. If the pet owner dies, becomes unable to care for any insured pet, or passes the ownership of any insured pet, the coverage will continue without interruption, if approved in writing by us, subject to all other terms and conditions of this policy.

4) A pet is covered under this policy only while the pet is in the United States of America, or temporarily away in Canada.

5) You must agree to implement all reasonable means possible in the care and protection of your pet. You further agree to protect your pet from aggravation or recurrence of the injury or illness.

6) This coverage is not transferable to other pets. All new pets are subject to a new application and your monthly payment will increase.

7) You are entitled to increase the deductible or coinsurance amount applicable to your pet at any time. This request must be made in writing and will become effective the month following approval by us. You may apply to lower the deductible or coinsurance amount applicable to your pet provided you have not previously filed a claim with us for that pet. This request must be in writing and will become effective the month following approval by us.

8) Notice of loss must be given by either you or your agent.

9) The loss is payable within sixty days after completion of the claim form, unless applicable state law provides for a shorter period.

10) In order to process a claim, you must allow us to contact your present and previous veterinarian(s) and provide us with the necessary authority to obtain any information we may require. In the event information relating to the history of the pet is missing or incomplete, the claim will not be processed. You must also agree to submit the pet to examination, if we require, by a veterinarian selected by us.

11) In the event of any disagreement between you and us with regard to a claim, the matter will be referred to a veterinarian of ours. If the matter is not resolved, an independent third party veterinarian shall be appointed by us. This independent third party veterinarian's decision shall be final and binding on all parties.

12) Every action or proceeding against us for the recovery of any claim under or by virtue of this contract is absolutely barred unless commenced within one year after the loss or damage occurs or unless state law requires a longer period.

IV. ADDITIONAL CONDITIONS

1) MISREPRESENTATION AND FRAUD – This policy will be voided if you have concealed or misrepresented any material fact or circumstance concerning this insurance or the pet covered. We do not provide coverage, for an insured who has intentionally concealed or misrepresented any such facts or circumstances before or after a loss.

2) CANCELLATION
   a. We may cancel this policy if we do not receive a monthly premium from you when the premium is due. In such a case a written notice will be sent to you at your last email address known to us. We will provide at least (20) days notice of our intent to cancel. The notice will be in accordance with the provisions of III. GENERAL CONDITIONS 1). Otherwise, we may cancel this policy by providing you at least ninety (90) days written notice.
   b. You may cancel this policy at any time by notifying us in writing via regular mail, fax or email. This is in accordance with the provisions of III. GENERAL CONDITIONS 2).

3) STATE LAW – When this policy's provisions are in conflict with the statutes of the state in which this policy is issued, the provisions are amended to conform to such statutes.

4) ENTIRE CONTRACT – This policy, the declarations page, and any attached endorsement constitutes the entire agreement between you and us.
5) **FREE LOOK PERIOD** - If you are not satisfied with this policy within thirty (30) days of the **Policy Effective Date**, you may cancel your insurance. **We** will refund your premium in full, as long as **you** have not submitted a claim.

V. **DEFINITIONS**

The following defined words or phrases in the policy are printed in bold type and have the following meanings, unless a different meaning is described in a particular coverage or endorsement.

1) **Accident.** An unexpected and unintended event.

2) **Clinical Examination.** A thorough examination performed by a licensed and registered veterinarian encompassing all body systems of the pet. Examination can also be referred to as “full physical, physical consultation, full examination or veterinary examination.”

3) **Clinical Symptoms.** Any manifested anomaly in, or deviation from the regular healthy state or function of a pet, including behavioral traits. Clinical Symptoms include any anomaly that is readily detectible by a thorough and complete clinical examination.

4) **Coinsurance.** Your portion of the cost of insured veterinary treatment for your pet before any deductible is applied. Your pet’s coinsurance amount is shown as “Your Share” on the pet schedule of the declarations page.

5) **Condition.** Any manifestations of clinical symptoms consistent with a diagnosis or diagnoses, regardless of the number of such symptoms or areas of the body affected.

6) **Coverage.** The insurance protection described in this policy form and on the declarations page.

7) **Coverage Term.** A twelve (12) month period that begins with the effective date of coverage and continues for each twelve (12) month period thereafter.

8) **Declarations Page.** A written document comprising part of this policy, which identifies the insured, the policy number, and the insured pet schedule with the coverage options selected and Lifetime Limit provided.

9) **Deductible.** The amount you must first pay with respect to the cost of insured veterinary treatment for your pet after your pet’s coinsurance portion has been applied.

10) **Dental Health Care.** The care required to maintain dental hygiene for your pet. This includes cleaning, brushing, scaling, polishing, extractions and reconstructions.

11) **Diagnostic Tests.** Tests used to determine the overall health of your pet. Diagnostic tests can be used as a way to detect certain abnormalities. It can also validate the current health of your pet, or help to evaluate an older pet more thoroughly before problems surface.

12) **Hospitalization.** Charges for boarding your pet at a veterinary clinic as required by your veterinarian to deliver nursing care, administer medication to or monitor your pet.

13) **Illness.** Sickness, disease or any other changes to your pet’s normal healthy state; or any condition other than your pet’s normal healthy state.

14) **Injury or Injuries.** Physical harm or damage to your pet arising from normal activity or an accident.

15) **Medically Necessary.** Medical services, supplies or treatments provided by a veterinarian to treat covered pets which are:
   a. consistent with symptoms or diagnosis;
   b. appropriate and meet generally accepted veterinary practice standards;
   c. not primarily for the convenience of the pet parent, your veterinarian or other providers; and
   d. consistent with the most appropriate supply or level of services which can safely be provided to the pet.

16) **Medication.** Any veterinary recommended medications prescribed by your veterinarian and approved by the Food and Drug Administration (FDA) for veterinary use.
17) **Neutering.** Orchiectomy, or surgical removal of the testicles.

18) **Pet or Pets.** A domestic cat or dog that is owned for companionship or as a help dog. **Pet or Pets** do not include a domestic cat or dog that is involved in activities other than companionship or helping, including, but not limited to, racing, breeding, law enforcement, guarding or commercial activities.

19) **Pet Parent.** The owner of the **pet**, including owner’s spouse or partner.

20) **Pet Policy Effective Date.** 12:01 a.m. of the day following the date you enroll your **pet**, as shown on the **pet schedule** of the **declarations page**, subject to the waiting periods as defined in II. **EXCLUSIONS & LIMITATIONS** 1) b., 1) c., and 1) d.

21) **Pet Schedule.** The table shown on the **declarations page** that identifies the **pet policy effective date**, policy number and **coverage** options related to a specific insured **pet**.

22) **Policy.** The terms and conditions and most recent **declarations page** that includes any endorsements that apply.

23) **Policy Effective Date.** 12:01 a.m. of the day following the date Shown in the Declarations, subject to the waiting periods as defined in II. **EXCLUSIONS & LIMITATIONS** 1) b., 1) c., and 1) d.

24) **Pre-existing conditions** means:
   a. **Illness** or **condition** which developed or redeveloped prior to the **pet policy effective date**;
   b. an **injury**, or recurrence of an **injury**, as a result of an **accident** that occurred prior to the **pet policy effective date**; or
   c. any **condition** or complication resulting from an **illness** that developed, or any **injury** as a result of an **accident** that occurred prior to the **pet policy effective date**.

25) **Spaying.** Ovariohysterectomy, or resection of the ovaries and uterus.

26) **Supplies.** Any item that is **medically necessary**, as determined by the **veterinarian**, that is safe and effective for its intended use, and that omission would adversely affect the insured **pet**.

27) **Surgery** or **Surgeries.** Any procedure that treats diseases or **injuries** by operative manual and instrumental treatment.

28) **Vaccination.** The administration of an industry-recognized commercial vaccine by a registered licensed **veterinarian**. The vaccine must be in accordance with the manufacturer’s recommendations, following a complete **clinical examination**, for prevention of disease.

29) **Veterinarian.** A properly licensed and registered **veterinarian** in active practice in the area where the **pet** is treated or examined. **Veterinarian** shall not include you or a member of your immediate family.

30) **Veterinary Examinations Fees.** Fees charged for the professional opinion of a **veterinarian**. Also referred to as consultation, examination, referral, and recheck fees.

31) **Veterinary Treatment** means:
   a. X-rays;
   b. Laboratory and **diagnostic tests**;
   c. **Medication**;
   d. **Surgeries**;
   e. **Supplies**;
   f. **Hospitalization**;
   g. Euthanasia; and
   h. Nursing care;

provided by a licensed **veterinarian** and their staff under direct supervision.
32) **Waiting Periods.** 15 days from the *Pet Policy Effective Date* for *accidents* and *illness* and 12 months from the *Pet Policy Effective Date* for *illness* related to hip dysplasia.

33) **Working Pets.** Any *pet* involved in activities other than companionship or helping, including, but not limited to, racing, breeding, law enforcement, guarding or for other commercial use.

34) **Your Pet.** The dog or cat named in the *pet schedule* of the *declarations page*. 