

Excess

Most policies have an 'excess'. This is a sum that the policyholder must pay towards the cost of their insurance claim. Excesses can vary so refer to your policy terms and conditions. For claims made on a repeat basis for the treatment of ongoing conditions most insurers will apply the excess once per year per condition. With Vetsure policies, the excess is only applied once per condition for life.

Insurers also commonly ask for co-payments – where the policy holder pays a percentage of the overall veterinary treatment bill. This commonly applies from eight years of age (as with Vetsure policies) but can be seen in some policies after only one year of age.

The cost of insurance – Premiums

As a pet ages the premium and policy excess are likely to increase because, like humans, the risk of illness increases. With many providers there is a tiered increase in premiums at eight years of age (as with Vetsure policies) but the approach taken by insurers varies widely. Some breeds of dogs and cats are normally more expensive to cover than crossbreeds because many pedigrees have a predisposition to certain medical conditions.

Age of pet

Most policies will exclude cover for pets under eight weeks of age. When a pet reaches a certain age, typically 8-10 years old, pet insurance is more difficult to find, as some companies will not offer new insurance for this age and above (Vetsure policies can be taken out for the first time to cover pets less than 10 years of age but cover will continue for the life of your pet as long as you keep renewing your policy).

REMEMBER

Always read the policy summary or Key Facts document for details of the benefits and significant exclusions of the policy. Shop around for the policy that best meets your needs. Always answer the insurer's questions to the best of your knowledge. If you do not, the insurer may refuse to pay your claim.

Claiming

Normally, payment for treatments to pets is made by the client to the vet at the time of treatment. The treatment costs are then claimed back from the insurer by the client. Most insurers suggest that they will 'allow' direct claims meaning that the client would only have to pay the vet the excess and any co-payments for eligible treatments. However, please understand that vets cannot



in general allow this, as they cannot be sure that the insurer will pay in a timely manner. Vetsure commit to pay Vetsure-affiliated vets within five working days for eligible claims. For this reason, Vetsure-affiliated clinics are happy to allow Vetsure claims to be handled directly.

Please note

You will always remain liable for all fees relating to any treatments. Your vet can never guarantee you will be covered for a particular claim. Claims can be declined by your insurer for a variety of reasons. It is important that you read your policy document and check it for stated exclusions. The pet name, owner name and address on your policy documents must match the pet name, owner name and address of the owner on our records. Insurers will have access to your pet's full clinical records so they will be able to see any and conditions previously showing clinical signs so please make sure these have all been declared to your insurance company to guard against unexpected claim rejections and disappointment. If you want to discuss whether or not you are covered, you will need to speak to your insurers first, ideally before seeking treatment.

*Please refer to Vetsure PetInsurance® leaflets for further information on Vetsure



Pet insurance -
what do I need to know?



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We never want money to be an issue should your pet require treatment but there is also no doubt that the provision of high quality veterinary care can be costly. It is for this reason that we strongly recommend to all our clients that they take out a good quality pet insurance product. Vetsure-affiliated Vet clinics act as Appointed Representatives for Vetsure Pet Insurance® and as such, only recommend this range of pet insurance products*. Staff at your local clinic are able to guide you on the basic features of this policy range and also benefit from active communication channels with the Vetsure team. This means that they can obtain pre-authorisation prior to starting treatment and can help make the claim process as easy as possible should you require any assistance. Unfortunately, for all other insurance companies, with the exception of filling in the claim form, staff at Vetsure-affiliated clinics will only be able to give you minimal assistance in all these processes. We recommend that you take out a Vetsure policy, but should you wish to look elsewhere, please read the information in this leaflet carefully when making your choice.

What types of pet insurance policies are available?

Time and Benefit Limited

A time limited policy provides insurance for each new and unrelated medical condition, up to a set financial limit. Each condition is covered for 12 months, usually from its onset or diagnosis. If the financial limit is reached within the 12 month period, the insurance will stop paying for that condition. Once the time or financial limit has been reached the condition (and related conditions) becomes excluded from future claims even if you change insurance provider. These



are basic insurance policies and are usually amongst the cheapest available.

Benefit Limited/Maximum Benefit

There is a financial limit for each new condition the animal may suffer. Each condition is insured until the financial limit has been reached. As long as the insurance policy remains in force there is no time limit on your claim. Once the financial limit has been reached, the medical condition becomes excluded from future claims even if you change insurance provider.

Cover for Life

All new medical conditions are insured, up to a set financial limit each year. Where the financial limit has been reached, no further claims will be paid until the policy is renewed, at which point the limit may be fully reinstated (check with the insurer). An ongoing condition that has reached the financial limit will continue to be covered by the policy the following year. Vetsure policies are all per condition, cover for life policies.

Why might treatment not be covered?

There are a variety of reasons why treatment might not be covered with any type of policy. The most common exclusions on a pet insurance policy include:

- Anything that relates to a pet's medical history before the policy started. This is known as a pre-existing medical condition.
- Anything related to pregnancy or birth.
- Any routine, preventative and elective treatments. This might include: flea, worm and tick treatments,



vaccinations, grooming, claw clipping, dental maintenance, spaying and castration.

-The purchase price of a pet if it dies after a certain age is likely to be excluded.

-Most policies have an illness claim exclusion applicable at the start of the policy, often called a 'waiting period,' which typically ranges from 10 to 30 days. Claims can only be made for illnesses that begin to show symptoms after this date. Such 'waiting periods' protect the insurer against the possibility of pet owners taking out pet insurance after noticing a potential medical problem.

-Some policies require payment of the full annual premium if a pet dies and a claim is made. For policies paid by monthly installments, the outstanding annual amount may be deducted from the claim settlement.

Changing your insurance

When choosing a policy it is important to check the type of product and the level of vet fees covered to ensure it will meet your needs, now and in the future. If you decide to change your insurance after a medical condition has occurred, that condition will almost certainly be excluded under any new insurance. For this reason it may be unwise to choose a policy solely on price alone or on the basis of generous introductory discounts, free periods etc. Unlike other forms of insurance it may be unfavourable to change at time of renewal due to the likelihood of exclusion of existing medical conditions.

