

AcciPet

Accidental injury cover

Effective from 1 March 2025



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How to contact us

If you want to get in touch, you can reach us in a few ways:

- enquire online, at **southerncrosspet.co.nz/contact-us**
- phone us, on **0800 800 836** – we're available Monday to Friday from 9:30am to 5:00pm
- send us a letter, to **Southern Cross Pet Insurance, Private Bag 3240, Waikato Mail Centre, 3240.**

Our opening hours are subject to change, please visit our website or call us for our latest hours.

Our financial strength rating is A (Strong)

Southern Cross Pet Insurance Limited is the insurer of this policy.

Standard & Poor's (Australia) Pty Limited has given Southern Cross Pet Insurance Limited an A (Strong) financial strength rating.

The rating scale is:

- AAA (Extremely Strong)
- AA (Very Strong)
- A (Strong)
- BBB (Good)
- BB (Marginal)
- B (Weak)
- CCC (Very Weak)
- CC (Extremely Weak)
- SD or D (Selective Default or Default)

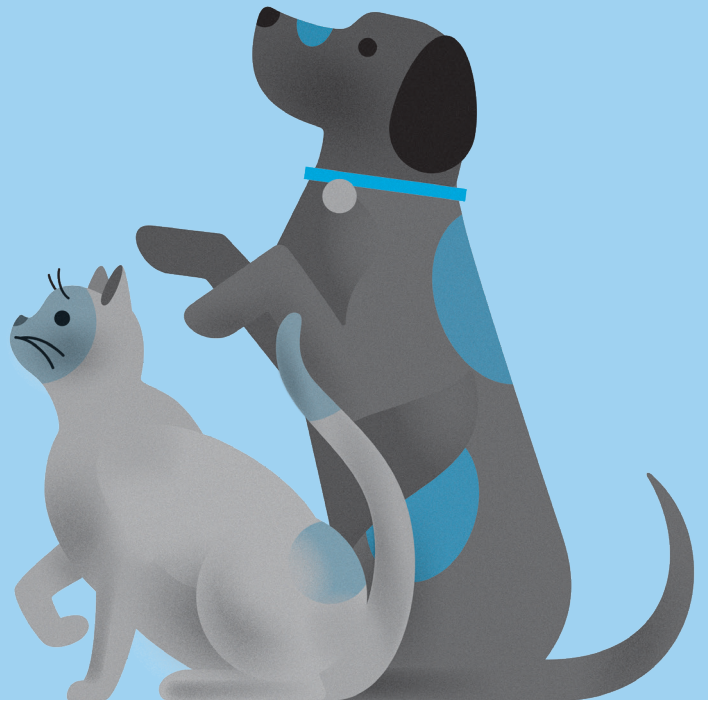
Ratings from 'AA' to 'CCC' may be modified with a plus (+) or minus (-) sign to show relative standing within the major rating categories. Full details of the rating scale are available at **www.spglobal.com/ratings/**.

Standard & Poor's is an approved rating agency under the Insurance (Prudential Supervision) Act 2010.



As part of our commitment to you, this document meets the WriteMark Plain Language Standard. The WriteMark is a quality mark awarded to documents that achieve a high standard of plain language.

A. Welcome to your AcciPet policy



Thank you for choosing Southern Cross Pet Insurance.

We know how important your pets are to you – they're part of the family. We're with you to help your pets live their best lives for longer.

We want you to understand how your pet insurance works

This policy is designed to help you cover unexpected *vet* expenses for treatment of your pet's *accidental injuries*.

Please take the time to read this policy and your *certificate of insurance* so you understand the benefits, terms, conditions and *exclusions* of your policy, as well as your responsibilities.

The next few pages of this policy set out what AcciPet covers, and what it excludes.

Some words in this policy have specific meanings

When we use the following words in this policy, here's what we mean.

- 'You' or 'your' means the person who has purchased this policy and who is named as the policyholder on your *certificate of insurance*.
- 'We', 'our', or 'us' means Southern Cross Pet Insurance Limited.
- 'Pet' means the cat or dog named on your *certificate of insurance*.
- 'Plan' means the type of policy and the *excess* and *co-payment* you selected, as shown on your *certificate of insurance*.

- ‘Policy’ means the contract between us, made up of your application, this policy document (including any document that is incorporated by reference), your *certificate of insurance*, and any variation to any of these that we communicate to you.
- Your ‘policy period’ is the 12-month period between your *policy start date* and *policy end date*, as shown on your *certificate of insurance*.
- ‘Includes’ or ‘including’ means includes without limitation (it does not limit what else is included).
- ‘Welcome pack’ means the pack we send you when you first start a policy with us. It includes your policy document and *certificate of insurance*.
- ‘Renewal pack’ means the pack we send you at your policy renewal. It includes your policy document, *certificate of insurance* and details of any changes we have made to the policy document.

You’ll also notice that some words in this policy are in italics, *like this*. These words also have specific meanings. They are defined on [page 31](#).

Headings in this document are for your convenience only

Headings in this policy document are used for convenience and reference only. They don’t affect the meaning or interpretation of the policy.

We may make changes to this policy

We may make changes or updates to this policy from time to time. These can include changes to:

- what the policy covers
- what the policy excludes
- the policy’s terms and conditions.

If we make any changes, we’ll give you at least one month’s notice in writing. If you’re unhappy with the changes we’re making, you can contact us to cancel this policy.

> **You can read more about changing or cancelling this policy in [section E](#).**

If you would like to make a complaint

If you have a complaint about your policy or the service we have provided, please let us know so we can work with you to resolve your concerns.

> **You can raise complaints directly with us at the contact details on [page 3](#) or visit our website for more information: southerncrosspet.co.nz/complaintsprocedure.**

You can contact the Ombudsman if you are not satisfied

We are a registered financial service provider and a member of the Insurance and Financial Services Ombudsman (IFSO) Scheme. This scheme is an approved free and independent complaints resolution service available to consumers to help investigate or resolve complaints.

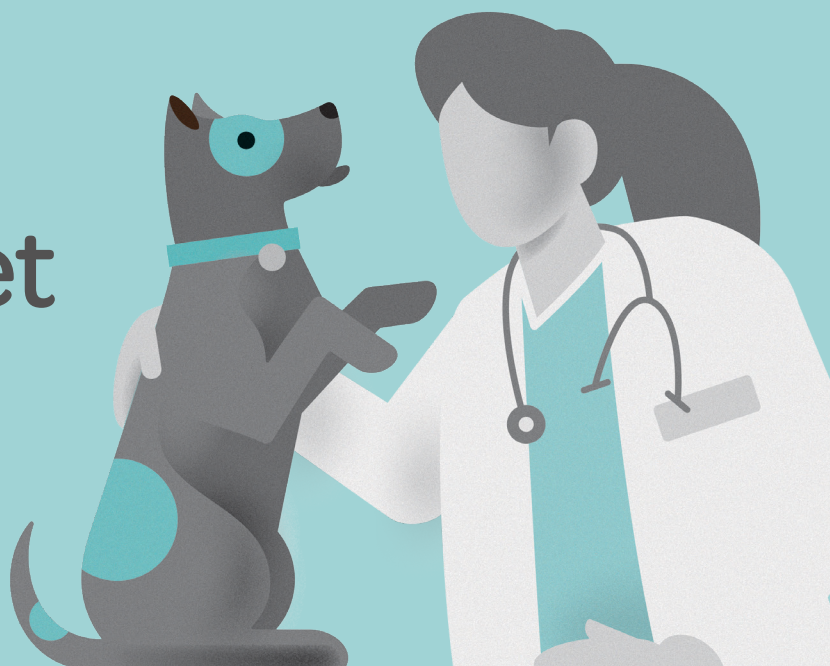
If you’re not satisfied with our response or the complaint is not resolved, you can follow our external dispute resolution process and refer your complaint to IFSO.

> **For more information, or to access the IFSO process, call 0800 888 202 or visit ifso.nz.**

New Zealand law applies to any dispute that arises in relation to this policy.

B.

What AcciPet covers and how it works



This section describes what we'll cover under this AcciPet policy. It sets out your pet's eligibility, the *annual benefit limit* that applies, what kind of treatment is covered, *excess* and *co-payment* options, and extra cover you can add for *consultation fees*.

Your pet must be 8 weeks or older when your policy begins

Your pet is only eligible for AcciPet if it is 8 weeks or older on the *policy start date*.

Your pet must not be a pig hunting dog

We don't cover pets that are used for pig hunting.

What we'll pay for under AcciPet

We'll reimburse you for *vet charges* for *qualifying treatment* provided to your pet to treat an *accidental injury* during the policy period, subject to the terms and conditions of this policy.

We'll pay up to the annual benefit limit of \$5,000

In each policy period, you can claim for *qualifying treatment* up to the *annual benefit limit* of \$5,000.

Your *annual benefit limit* expires on the *policy end date*. You cannot carry forward any unclaimed balance from the end of one policy period into the next policy period.

> [You can read more about your policy period and policy renewals on page 22.](#)

What kinds of treatments qualify for cover

Qualifying treatment means any of the following reasonable, typical, and medically necessary services that a *vet* provides to your pet to relieve or treat an *accidental injury*, such as:

- hospitalisation
- surgery
- x-rays
- *medication*
- diagnostic tests
- nursing
- physiotherapy.



Point to note

Vet consultation fees are not *qualifying treatment*. If you want cover for *vet consultation fees*, you can add consult care extra to your policy. Read more about consult care extra on [page 11](#).

We'll cover dental treatment if it's caused by an accidental injury

We cover dental treatment if your pet requires it because of an *accidental injury*.

However, we won't cover dental treatment from an *accidental injury* that results directly from your pet biting, eating or chewing an object.

We'll cover hydrotherapy

We cover hydrotherapy provided by a *vet* clinic or member of the New Zealand Association of Canine Hydrotherapists.

We'll cover accidental ingestion

We cover *vet* treatment your pet requires if it accidentally ingests or swallows a toxic or non-food item. This includes treatment for poisoning, damage, blockage, or obstruction.

We apply a \$2,500 sub-limit to cruciate ligament health conditions

We apply a \$2,500 sub-limit to the amount we'll reimburse in any one policy period for *qualifying treatment* of cruciate ligament *health conditions* and any related *health condition*.

Your cruciate ligament sub-limit is shown on your *certificate of insurance*.

Once the cruciate ligament sub-limit is reached, we won't reimburse any further claims for treatment of a cruciate ligament or related *health condition* until the next policy period.

For example:

Say your pet ruptures its left cruciate ligament from an *accidental injury*. We would reimburse up to \$2,500 for *qualifying treatment* of that rupture in the current policy period. You would be responsible for any costs above \$2,500 relating to treatment of that injury. Also, for the remainder of that policy period, we would not reimburse you for treatment of any other cruciate ligament or related *health condition*.

What counts as a related health condition

Health conditions related to a cruciate ligament *health condition* can include:

- arthritis or osteoarthritis developing in and around the joint after surgery
- infections resulting from the cruciate ligament treatment
- surgical failures requiring additional treatment.

The annual benefit limit and sub-limit applies in the policy period that treatment takes place

We assess claims for *qualifying treatment* in the policy period that your pet receives the treatment. Your *annual benefit limit* and sub-limit reset in the next policy period.

You can't claim for treatment costs in the following policy period, or carry over any unclaimed balance. You can read more about your policy period and policy renewals on [page 22](#).

For example:

Say your pet has ruptured its left cruciate ligament, and we've reimbursed \$2,500 – the maximum amount of your cruciate ligament sub-limit. Later in the same policy period, your pet then ruptures its right cruciate ligament.

We would decline claims related to that second cruciate ligament rupture because you would have already received the full entitlement of the cruciate ligament sub-limit in your current policy period.

You can choose your annual excess

Your annual excess is the amount you must pay when you claim for *qualifying treatment* before we'll reimburse you under this policy in each policy period.

You can choose from three annual excess options:

- \$100
- \$250
- \$500

For example:

Say you chose a \$100 excess and your pet receives *qualifying treatment* costing \$2,100.

We would reimburse you \$2,000 minus the co-payment you've selected (see below).

You wouldn't need to pay the excess on any further claim you make in the current policy period. The annual excess would then apply again in the next policy period.



Your excess will be stated on your *certificate of insurance*. We'll apply the excess to your claim before we calculate the co-payment.

Increasing your excess will reduce your premium, and decreasing your excess will increase your premium. For more on changing your policy see [page 23](#).



Point to note:

If your first *qualifying treatment* in a policy period is less than your excess, you should still submit a claim. Even if we don't reimburse you for your claim, the amount will still count towards your annual excess, meaning you'll be closer to reimbursement for your next claim. You also may still be reimbursed under consult care extra, if you have it.

You can choose your co-payment

You can choose from three *co-payment* options:

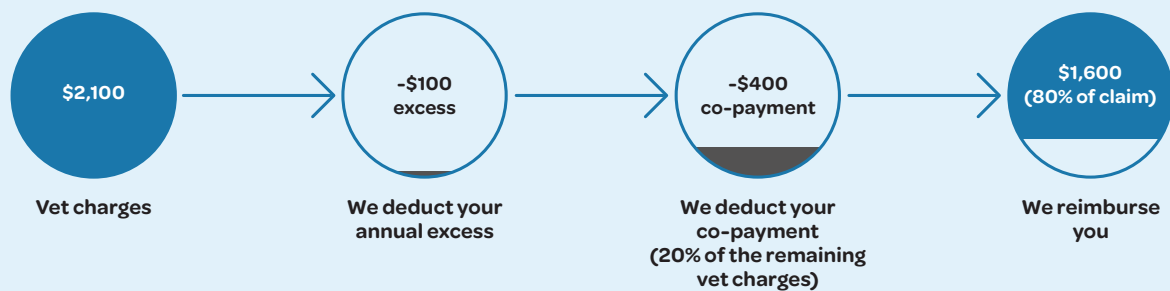
- 10%
- 20%
- 30%

This means we reimburse you the remaining percentage of the vet charges for *qualifying treatment* after deducting your selected *co-payment* (and your annual *excess* – see above). We'll reimburse you up to your *annual benefit limit* of \$5,000, subject to the terms and conditions of this policy.

For example:

Say you had a \$100 annual *excess* and a 20% *co-payment*, and you claimed for \$2,100 in *vet charges*. Here's how we would calculate your reimbursement:

- we would deduct your annual *excess* of \$100 (leaving \$2,000)
- we would deduct \$400 for your *co-payment* (20% of the remaining \$2,000)
- we would reimburse you \$1,600.



The *co-payment* you have chosen will be stated on your *certificate of insurance*.

If you choose a 20% or 30% *co-payment*, it will reduce your premium.

How co-payments and excesses work if the vet charges are higher than your annual benefit limit

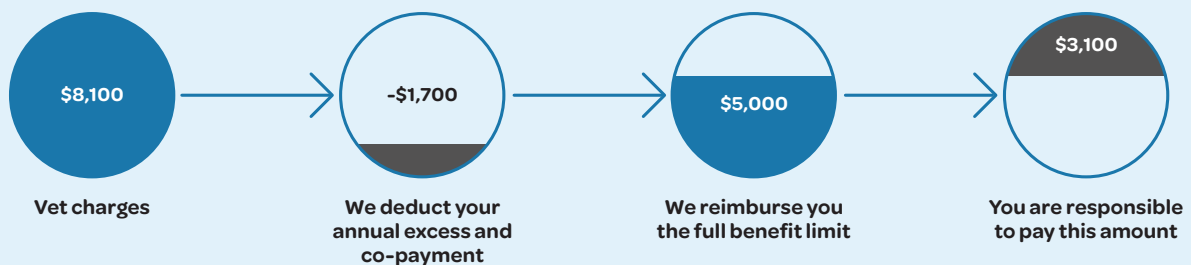
If the *vet charges* for *qualifying treatment* are more than your *annual benefit limit* (after considering your *excess* and *co-payment*), we'll reimburse you up to your *annual benefit limit* and you'll be responsible for the remainder.

For example:

Say you had a \$100 *excess* and a 20% *co-payment* and you claimed for \$8,100 in *vet charges*.

Assuming this was the first claim in your policy period, here's how we would calculate your reimbursement:

- we would reimburse your full *annual benefit limit* of \$5,000 (because \$8,100 less your *excess* is \$8,000, and 80% of \$8,000 is \$6,400, which is above your *annual benefit limit*)
- you would be responsible for paying the remaining amount.



You can add consult care extra for consultation fees

You can choose to add consult care extra to your policy for an additional premium.

With consult care extra, you can claim 80% of *vet consultation fees*. The *consultation fee* must be related to a *health condition* covered by this base policy. We'll reimburse you for *consultation fees* up to a maximum of \$1,000 per policy period.

Under consult care extra, we'll cover *consultation fees* when you visit a *vet*:

- for an *accidental injury*
- for a follow-up
- in an emergency
- for specialist consultation.

You can add consult care extra at policy renewal

If you want to add consult care extra after your policy has started, you can change your policy in your *policy renewal period*.

> [Read more about changing your policy on page 23.](#)

C. What AcciPet doesn't cover



It's important to understand that your policy doesn't cover every *accidental injury* that your pet may suffer, or every type of treatment it may need.

This section describes the *accidental injuries*, treatments, and other expenses that AcciPet excludes, and the stand down periods that apply.

Pre-existing conditions

Unless we have agreed to do so in writing, we won't reimburse you *vet charges* or other expenses you incur for any *accidental injury* related to a pre-existing condition. This includes any *accidental injury* where a pre-existing condition is:

- the underlying cause of the *accidental injury*
- associated with the *accidental injury*
- otherwise related to incurring the *accidental injury*.

What is a pre-existing condition

A pre-existing condition is a *health condition*, behaviour, sign, symptom, or event relating to or resulting from an *accidental injury* that your pet had and that you knew about (or should reasonably have known about) before your *policy start date*, or during the relevant stand down period.

> [Read more about stand down periods on page 14.](#)

Here are some examples of possible pre-existing conditions under your AcciPet policy:

- Any *accidental injury* that exists or has arisen from an event prior to you purchasing the policy. For example, say your pet was in a car accident prior to your *policy start date* – any injury that your pet suffered (or may suffer in the future) as a result of this car accident would be *excluded*.
- Any behaviour your pet displayed more than once in the year before your first *policy start date* that could result in an *accidental injury*. For example, say your pet had needed *vet* attention for eating things it shouldn't have more than once in the previous year (like poisons or non-food items) – we would exclude any accidental ingestion by your pet after your *policy start date*.
- Any *accidental injury* that happened before your first *policy start date* or in a stand down period that is likely to happen again due to the nature of the injury. For example, say your pet had a cruciate ligament injury prior to you purchasing the policy – we would exclude all future cruciate ligament *health conditions* as a pre-existing condition.

You must declare your pet's pre-existing conditions

If you don't declare a pre-existing condition on your application form, and your pet then requires treatment for an *accidental injury* related to that pre-existing condition during your policy period, we may decline cover for that *accidental injury*. We'll also add an *exclusion* for the pre-existing condition to your *certificate of insurance*.

We may check if your pet has any pre-existing conditions when you claim

When you make a claim under your AcciPet policy, we may request your pet's medical history from your *vet* (and any previous *vet*). If we discover your pet has a pre-existing condition, we'll do all of the following:

- Decline the claim if it is related to a pre-existing condition.
- Note the pre-existing conditions we discover as an *exclusion* on your *certificate of insurance*.
- Exclude all pre-existing conditions identified from any future claim you may make.

We'll treat a health condition that affects more than one of the same body part as a pre-existing condition

This applies if your pet has a pre-existing condition that affects a body part that it has more than one of, like a leg, and it increases the risk of the other body part being injured. If the other body part has the same *accidental injury*, we'll treat it as a pre-existing condition and exclude it from cover under your policy.

We'll do this even if the condition occurs in the other body part after the *policy start date*.

For example:

Say you declared that your dog had a patella (kneecap) dislocation in its left knee before the *policy start date*, and it was *excluded* on your *certificate of insurance* as a pre-existing condition.

If your dog then suffered a dislocation in its right patella during your policy period, we would also exclude this as a pre-existing condition. This is because dogs who have had a patella dislocation are more likely to suffer the same injury in another leg.

This *exclusion* only applies if the pre-existing *health condition* increases the risk of another injury in future. It does not apply to *accidental injuries* that are isolated incidents and which don't increase the risk of the same injury occurring in another body part.

For example:

If your pet had torn the skin of its left ear in an accident, we would not exclude an unrelated wound to the right ear.

A stand down period applies for certain accidental injuries

We won't cover treatment of *accidental injuries* in the first 90 days of your policy related to:

- cruciate ligaments
- patella luxation.

The 90-day stand down period applies:

- from your first *policy start date* (when you first buy your policy)
- if you make changes to your *excess* or *co-payment* outside your *policy renewal period*.

Stand down periods begin at 00:01am on the *policy start date* and end at 11:59pm on the 90th day after the *policy start date*.

This means if your pet suffers a cruciate ligament or patella luxation *accidental injury* during the stand down period:

- we won't cover any *qualifying treatment* provided to your pet for that *accidental injury*
- we'll treat the *accidental injury* as a pre-existing condition, exclude it from cover, and add it to your *certificate of insurance*.

How stand down periods work under AcciPet if you have FreeCover

Stand down periods end early if your AcciPet policy starts while your FreeCover policy is active.

After the 21st day of your FreeCover period, we'll waive the AcciPet stand down periods for cruciate ligament and patella luxation *accidental injuries*.

Other exclusions

We won't reimburse *vet charges* or other expenses you incur as a result of, or related to any *accidental injury*, treatments, and circumstances set out in this section.

Additional expenses

We don't cover any of the following additional expenses related to your pet:

- transport and boarding (such as in a kennel or cattery)
- cages, equipment, and devices, except dog or cat cones (Elizabethan collars)
- voluntary euthanasia of your pet (where you choose to have your pet put down for non-medical reasons or due to behavioural or psychological conditions), or euthanasia due to any pandemic disease
- disposal, post-mortem, burial or cremation.

Alternative treatment

We don't cover alternative treatment.

Alternative treatments are:

- acupuncture
- homeopathy
- chiropractic manipulation
- massage therapy
- osteopathy (or treatments of a similar nature).

Behavioural or psychological conditions

We don't cover any behavioural or psychological conditions, which are things like:

- anxiety disorders
- depression
- aggression
- excessive barking.

We also don't cover treatment related to behavioural or psychological conditions, such as:

- products or *medications*
- training
- socialisation
- behavioural therapy
- psychological therapy.

Complications from treatment we don't cover

We don't cover complications that arise from your pet receiving treatment that is not covered.

For example:

Say your cat undergoes surgery to treat an *accidental injury* that relates to a pre-existing condition that is *excluded* from cover. After the surgery, the cat needs additional treatment due to a complication from the surgery. In this case, we wouldn't cover any costs related to treating the complication.

Consultation Fees

We don't cover *vet consultation fees*.



Point to note

You can add cover for *vet consultation fees* by selecting consult care extra. Check your *certificate of insurance* to see if you have added consult care extra.

> **Read more about consult care extra on [page 11](#).**

Cosmetic treatment

We don't cover cosmetic treatment.

Cosmetic treatment is any surgery, procedure, or treatment that improves, alters, or enhances your pet's appearance, whether it's for medical, physical, functional, psychological, or emotional reasons.

Cosmetic treatments are things like:

- tail docking
- ear cropping
- tattooing.

Degenerative injury

We don't cover degenerative injuries, such as injuries caused by arthritis or osteoporosis.

Degenerative injuries which are gradual, or which result from a gradual decline in health or other contributing factors, are not considered to be *accidental injuries* and therefore not covered under this policy.

Dental care

We don't cover treatment for dental care.

Extended hospitalisation

We don't cover your pet being hospitalised for longer than is medically necessary, including for convenience.

Extra fees your vet charges

We don't cover any fees your *vet* charges for:

- information required to administer or implement this policy
- assistance or information related to this policy and any claim you make under it
- administration or account fees
- postage or couriers.

Failure to protect your pet

We don't cover treatment that your pet requires due to an *accidental injury* that occurred because you have failed to reasonably protect it from:

- situations that may result in *accidental injury*
- anything that worsens a treated *accidental injury*.

Failing to reasonably protect your pet includes you, any member of your family, or anyone living with you treating your pet:

- cruelly or violently
- with reckless disregard for its wellbeing.

Fighting, if your pet has a history

We don't cover the costs of treatment for your pet fighting with another animal if it has a history of fighting before your *policy start date*.

Illness

We don't cover illness, sickness or disease, including degenerative disease.



Point to note

This policy is designed to cover treatment of *accidental injuries* and related *health conditions* only. For more comprehensive cover for your pet, including illness cover, please consider our PetCare product: southerncrosspet.co.nz/compare-pet-insurance

International treatment

We don't cover the costs of any treatment your pet receives outside New Zealand, including web services. We will cover international services used as part of *qualifying treatment* carried out by a New Zealand vet (such as diagnostic reporting services) as long as the local vet is the person who administers and invoices for these services.

Medication after your policy ends

We don't cover *medication* for your pet that covers a period more than 40 days after your policy ends.

Parasites inside or outside your pet

We don't cover treatment of the following preventable parasites:

- fleas
- ticks
- mites
- worms

We don't cover treatment of any *health conditions* resulting from these parasites, including:

- flea allergy dermatitis
- Lyme disease.

Prescription pet foods and supplements

We don't cover pet foods or *supplements*, whether or not your *vet* recommends or prescribes them.

Specialised treatments

We don't cover any of the following specialised treatments for your pet, including all associated costs:

- organ transplant surgery
- joint replacements
- cell replacement therapies, including stem-cell therapy
- artificial limbs, implants, and prosthetics.

Treating your own pet

We don't cover any treatment you provide to your pet, unless you are a *vet* or *vet* nurse.

If you're a *vet* or *vet* nurse, we'll reimburse the cost of *qualifying treatment* that you're qualified to perform, except we won't cover *consultation fees* where you perform the consultation.

Treatment of an undiagnosed health condition that is similar to an excluded health condition

We don't cover treatment of a *health condition* that a *vet* has not or cannot conclusively diagnose if the treatment is consistent with the typical treatment of a condition this policy excludes.

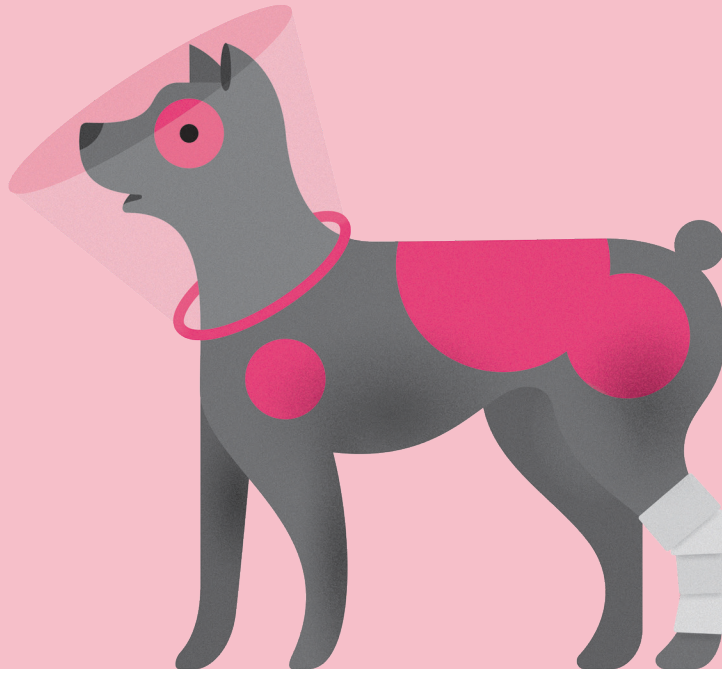
For example:

Say your dog is limping after a walk. You take it to the *vet*, thinking it may have accidentally injured itself. Your *vet* is unable to diagnose the limp, but treats your dog for arthritis – we would not reimburse you for this treatment as arthritis is an illness, and therefore *excluded* under AcciPet.

If your *vet* later confirmed the limping was due to an *accidental injury* (and not arthritis) we would re-consider your claim.

D.

How to make a claim



If your pet has an *accidental injury*, you can claim for the *vet charges* for *qualifying treatment* provided to your pet.

If we accept your claim, we'll reimburse you the approved amount, up to the *annual benefit limit* of \$5,000.

Your *annual benefit limit* is reduced by any claims we have already reimbursed in the current policy period.

We want to make claiming as simple as possible. This section sets out everything you need to know to make a claim.

Claim online or send us your completed form

To make a claim, you'll need to provide us:

- your details
- your pet's name
- your policy number
- details of the treatment you're claiming for
- tax invoices listing each expense your vet has charged you
- records of the diagnosis and treatment from your vet
- evidence to show you've paid the *vet charges*
- any other relevant documents.

If we need any further information, we'll advise you or contact your *vet* directly. We'll normally do this if information is missing, or if we need additional information to process your claim.

You can submit a claim to us in two ways:

- visit our website to claim online, at southerncrosspet.co.nz/make-a-claim
- post a claim form, along with any other documents, to the address on [page 3](#).

> **You can download a claim form at the web page above, or call us on 0800 800 836 and we'll send you one.**



Point to note

You must complete our claim form fully, accurately and truthfully. We may examine any claim and, where appropriate, investigate to ensure the claim is valid and correct.

Please submit your claim as soon as possible

To help us process your claim quickly, please submit it to us as soon as possible after your pet has received the *qualifying treatment*.

We will pay claims to you, not to your vet

If we accept your claim, we'll pay you, not your *vet*, unless we agree otherwise.

We'll also email or post you confirmation when we have settled your claim.

What happens if you claim for treatment when both AcciPet and FreeCover are active

We'll assess any claims you submit for treatment your pet receives while both policies are active under both FreeCover and AcciPet. We'll reimburse your claim based on the most favourable outcome to you at the time of your claim.

For more about how we assess claims under both policies, check your FreeCover policy document.

FreeCover is a separate product we offer for puppies or kittens aged between 6 and 26 weeks.

> **Visit our website to learn more or apply:** southerncrosspet.co.nz/freecover

Other things you should know about making a claim

These terms and conditions apply to any claim you make under this policy.

You must first claim any money you're entitled to from other sources

When you submit a claim, you must let us know if you're entitled to receive money that covers all or part of that claim from any:

- other insurer or third party
- refunds, credits, rebates, or discounts.

If you can claim from anyone else, you must do this first, and we'll only pay the difference remaining.

You must authorise us to collect information related to your claim

When you make a claim, you agree to us exchanging information with the *vet* or business who provided the treatment you are claiming for.

We'll ask your permission if we need to collect information from any other third parties. However, we may be unable to process your claim if you refuse permission for us to collect the information we need.

We may recover any amount that we overpay you

If we overpay you on any claim, we may choose to recover the overpaid amount from you, or deduct it from any other claim you make.

We may deduct any money you owe us

If we're entitled to recover money from you at any time, we may offset or deduct the amount owed from any claim or other payment we are due to make to you. We may also withhold payment of a claim if your premium is overdue, until your premium is paid in full and up to date.

We may seek a second opinion on your vet charges

We may request a second opinion from a *vet* we choose at our own cost if we consider the *vet charges* in your claim to be:

- unreasonable
- higher than typical *vet charges* for the same or similar treatment of your pet's *accidental injury*
- unnecessary, as your pet didn't require treatment.

If the *vet* we ask finds that the treatment or *vet charges* in your claim were unreasonable or unnecessary, we may reduce the amount we reimburse for that treatment, to the amount that we establish as reasonable.

We may take action to recover a claim in your name

After we accept a claim and reimburse you, we may take any action available to us to recover the amount we have paid you from a third party.

You agree to provide any information we need about third parties who we may recover money from, including in legal proceedings.

It will be our decision whether we take any such action.

For example:

Say your dog was attacked by another dog at the park. The owners of the attacking dog may be liable for some of your *vet costs*. We may ask you for details about the attack, contact details of the owners, and any details of ongoing investigations or legal proceedings relating to the attack.

E.

When your policy starts, ends, renews and can change



This section sets out the duration of your policy and how renewing and cancelling it works. It also sets out how to make changes to your policy.

Your policy provides cover for 12 months at a time

This policy starts on the *policy start date* and continues for 12 months from that date. This is called your policy period. It renews each year for a further 12 months, as described below.

The policy will end early if either you or we cancel it in the circumstances we outline on [page 24](#).

Renewing your policy

At the end of each policy period, before the *policy end date*, we'll notify you if we are renewing your policy for a further policy period. If we are, we'll also tell you what your premium will be for the next 12 months.

We'll renew your policy on the same terms, unless we specifically notify you of a change in your renewal pack. We'll tell you if we decide not to renew your policy.

If you choose not to renew your policy, you must tell us in writing or by calling us on **0800 800 836**.

> [For more information about changes we might make to your policy see page 5](#)

We'll send you a certificate of insurance for each policy period and whenever a change is made

We'll send you a new *certificate of insurance* when:

- we renew your policy at the beginning of each 12-month policy period
- you change your plan (see [below](#))
- we become aware of a *pre-existing condition* that you haven't disclosed and we add this to your *certificate of insurance*.

Your *certificate of insurance* forms part of your policy. It sets out:

- your *annual benefit limit*
- your *co-payment*
- your *excess*
- whether you have added consult care extra
- your *policy start date* and *policy end date*
- any *pre-existing conditions* you have told us about
- any specific conditions applying to your policy.

Changing your policy

You may choose to increase or decrease your cover. If you do, we'll send you a new *certificate of insurance* showing the updated cover.

Options to increase your cover (which will increase your premium) include:

- reducing your *co-payment*
- reducing your *excess*
- adding consult care extra to your policy.

Changes to decrease your cover (which will reduce your premium) include:

- increasing your *co-payment*
- increasing your *excess*
- removing consult care extra from your policy.

Timing and conditions for changing your policy

You can increase or decrease your cover at any time.

The best time to make a change is during your *policy renewal period*. We recommend you contact us to discuss what you want before you make any change.

Changing your policy during your policy renewal period

These terms apply to changes you make in your *policy renewal period*.

If you increase or decrease your *co-payment* or *excess*, or add or remove consult care extra during your *policy renewal period*, we'll apply this change to all claims from the start of the new policy period.

We will assess claims for *qualifying treatment* that took place before your policy renewal under the policy terms that applied at the time the treatment took place.

Changing your policy outside of your policy renewal period

If you increase or decrease a *co-payment* or *excess*, or add or remove consult care extra outside your *policy renewal period*, we'll cancel your existing policy and issue you with a new one.

This means we won't cover any *health conditions* (including signs, symptoms, or events) you first knew about, or should reasonably have known about:

- before the new policy starts or
- during your new policy's stand down period.

The only exception is if we agree to cover these *health conditions* and they are listed in your new *certificate of insurance*. Additionally, if we issue you with a new policy, your *excess* will begin again – regardless of any claims you have made on your previous policy. That's why the best time to make changes is during your *policy renewal period*.

Cancelling this policy

You or we can cancel this policy outside the *policy renewal period* as set out in this section.

We'll refund your premium if you cancel within 14 days

If you're not satisfied with your policy, you can cancel it within 14 days of receiving your first welcome pack and we'll refund any premium you have paid in full, as long as we haven't paid any claims.

We won't reimburse any claims you have made if you cancel your policy during that 14-day window.

You can cancel this policy by notifying us

You can cancel this policy at any time by notifying us in writing or calling us.

If you've paid your premium in advance (annually, half yearly, or quarterly), we'll cancel your policy from the date that we receive your request to cancel. We'll refund the portion of your paid premium that remains for the period past the cancellation date.

For example:

If you have paid your whole annual premium and you cancel at the end of the third month, we'll refund nine months of the premium you have paid.

If you pay your premiums monthly, we'll cancel from the date you have paid up to.

If you have claims in a period you haven't yet paid for, we'll collect your next premium and cancel from the new date you've paid up to.

For example:

Say you call us to cancel on 10 December, before your next premium payment on 15 December which covers 1 to 31 December. But you've previously claimed for treatment your pet received on 5 December. To ensure your policy remains active in December, so that we can reimburse the claim, we would take your premium payment on 15 December.

You could then make claims for any further *qualifying treatment* your pet received until 31 December.

We can cancel this policy

We can cancel your policy on written notice to you for:

- non-disclosure not relating to a pre-existing condition
- misrepresentation
- fraud
- material breach of the terms of this policy.

If we cancel your policy for any of these reasons, we won't refund any premium you have paid.

We may recover any money you owe us and take any legal action against you.

Before we cancel your policy for any of the above reasons, we will notify you in writing of the reasons why we are considering cancelling your policy. You will have at least 7 working days to provide a written explanation (including any relevant evidence) that you wish us to consider, and we will reasonably consider your explanation.

> **We can also cancel your policy if you don't pay your premium. See [page 26](#).**

F. Your responsibilities



This section sets out the things you are required to do.

You must pay your premium on time

You must pay your premium to us in full using the payment method you have chosen on each due date.

You'll find the amount of premium you need to pay each policy period on the tax invoice in your welcome pack, and in each renewal pack.

You may be eligible for a discount on your premium

You may be eligible for one or more discounts on your premium. Discount offers include:

- 5% additional pet discount
- 2.5% Southern Cross Health Society Member discount
- 2.5% direct debit discount.

> **You can read more about the discounts we offer and how we apply them at:**
southerncrosspet.co.nz/discounts-terms-conditions

Discounts on your policy are noted on your tax invoice, which forms part of your welcome pack or renewal pack.

If you fail to pay your premium on time

We won't pay any claims until you have paid us the premium you owe in full. We can deduct any premium you owe us from any claim we are due to pay you.

If we don't receive your premium for 45 days or more past the due date, we may cancel your policy by giving you notice.

You must live with your pet and take good care of it

You must provide your pet with proper care and attention at all times, including being up to date with your pet's vaccinations.

For example:

We may request vaccination records, and decline claims if your pet is not up to date with vaccinations. This includes for conditions like parvovirus, kennel cough, cat flu or leptospirosis.

To be covered under this policy, your pet must live with you and be under your care and supervision.

You must give us truthful, complete and up to date information

You have a duty of disclosure, which means you must give us complete, accurate and up to date information if we need it or if it's relevant to your policy.

We'll ask you questions whenever you apply for a policy, change your cover, or make a claim. You must provide all the information you know when answering these questions. We'll use this information to decide:

- whether to insure you
- how much premium to charge
- if we need to apply any special conditions to your policy
- whether a claim you make is eligible for payment.

You must also let us know about anything else that might affect your cover or your policy.

Also, if you forgot to tell us about a *health condition* your pet had before purchasing your policy, you still need to tell us about it as soon as possible once you remember.

We may take action if you don't fulfil your duty of disclosure

If you don't tell us about a pre-existing condition when you apply for your policy, we may decline any claim that relates to that pre-existing condition and add it as an *exclusion* to your *certificate of insurance*.

We may also:

- change the terms of your policy, including the premium
- decline a claim where we reasonably believe you have lied to us or given us false information about that claim.

Before we do so, we will give you a reasonable opportunity to explain.

In addition, we may cancel this policy on written notice to you for the reasons set out on [page 25](#).

G.

Other terms, conditions, and privacy



This section sets out additional terms and conditions that apply to your policy. It also includes a summary of how we collect and use your personal information.

If any additional conditions apply to your policy, we'll notify you of these in writing and they will apply in addition to the terms and conditions set out in this policy.

Changes to the terms and conditions can only be made in writing

If we make changes to the terms and conditions of your policy, we'll notify you in writing. This includes changes to the premium you must pay.

If you're unhappy with any changes we make, you can contact us to discuss your options or you can cancel this policy.

> **For more information about changes we might make to your policy see [page 5](#).**

> **For more information about changing or cancelling this policy see [page 23](#).**

We'll notify you by email wherever possible

Any time we need to notify you in writing about this policy, we'll contact you by email, as long as you've given us a current working email address. Email is our preferred way to communicate with you as it ensures you receive important information quickly.

If we don't have a current working email address for you, or if emails we send bounce back, we'll attempt to contact you using other contact details we have for you, such as your phone number or last known postal address.

You can choose to receive notifications from us by post. We will send any communication to you at the last postal address you provided us. Post is our least preferred option because it takes longer for us to send information and for you to receive it.

All currency in this policy is in New Zealand dollars

Whenever we mention money in this policy, we are referring to New Zealand dollars.

All premiums, the *annual benefit limit*, and claim payments include GST and any other taxes or duties that apply.

You authorise us to debit your bank account or credit card for the premium

By completing and signing a direct debit authority or a recurring credit card authority (or providing verbal authorisation) when you sign up for this policy (or at another time), you are instructing us to directly debit the applicable premium from your bank account or credit card.

This means you authorise us to charge your bank account or credit card for the premium due for the duration of each policy period.

If the premium payable changes, we'll let you know before we deduct it from your account

We'll notify you if your premium changes and automatically adjust the deduction amount to the correct premium. You don't need to complete another form.

Contact us if you have any concerns

If you have concerns about the direct debit authority or recurring credit card authority, or you need to change any aspects of the authority, please contact us.

If any part of this policy is considered void, the other parts still apply

If any court or administrative body (including the Ombudsman) finds any section (or part of a section) of this policy to be illegal, void, or unenforceable, the rest of the policy remains in full force and effect.

How we handle your personal information

Our privacy statement explains when and how we collect, hold, use and disclose your personal information.

> You can find our privacy statement at: southerncrosspet.co.nz/privacy-statement

For example, we use the information about you to:

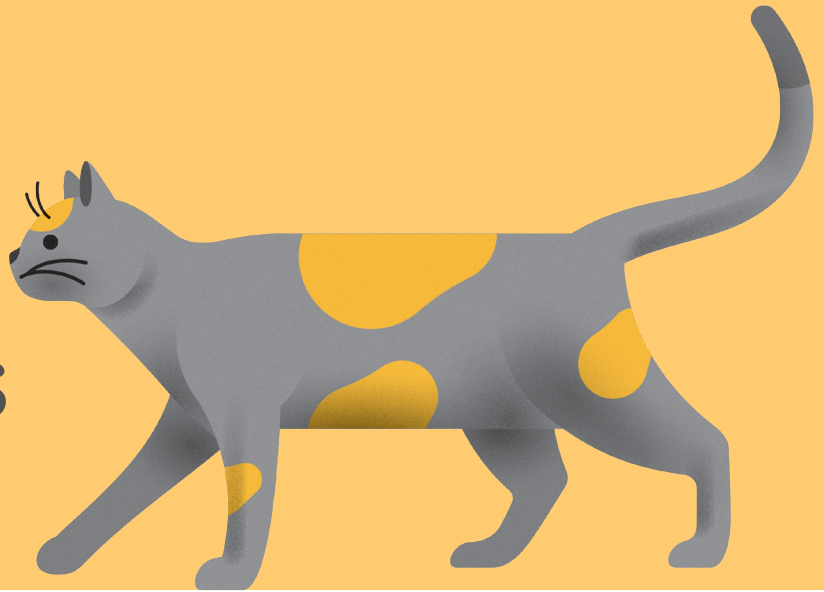
- decide whether we can cover your pet and any conditions that may apply
- help administer your policy and products you have with other Southern Cross branded businesses
- process your claims.

Our privacy statement also includes details about how to access and correct your information.

We won't rent or sell your personal information to other companies.

H.

How we define key terms



This section sets out what we mean when we use the terms set out in *italics* throughout this policy.

Accidental injury

means a physical harm or injury to your pet that is:

- sudden
- unforeseen
- not gradual.

This includes accidental ingestion.

> [Read more about accidental ingestion on page 7.](#)

An *accidental injury* arises from a single event that occurs at a time and in a place you can identify, and is not related to any other cause or condition.

Annual benefit limit

means the maximum amount we'll reimburse you for *qualifying treatment* during one policy period under this policy.

The *annual benefit limit* is \$5,000.

Certificate of insurance

means the document we send you which sets out:

- your *annual benefit limit*
- your *excess*
- your *co-payment*
- whether you have added consult care extra
- your *policy start date* and *policy end date*
- any *pre-existing conditions* you have told us about
- any specific conditions applying to your policy.

Your *certificate of insurance* forms part of your policy.

Consultation fee

means the fee your vet charges for a consultation, appointment, or initial assessment of a health concern.

This may be described on your invoice as a fee for a:

- consultation
- examination
- check-up
- progress exam
- another similar name.

Co-payment

means the percentage of each eligible claim that we'll deduct from your reimbursement.

Your *co-payment* will be stated on your *certificate of insurance*.

Excess

means the amount we'll deduct when you claim for *qualifying treatment* before we'll reimburse you under this policy in each policy period.

Your *excess* will be stated on your *certificate of insurance*.

Exclusion or excluded

means any condition, treatment, or event that this policy doesn't cover.

Health condition

means any *accidental injury* or ongoing complications because of that *accidental injury*.

We consider any *accidental injury* that affects your pet in multiple ways to be the same *health condition* if it is related to the same accident or incident.

For example:

If your pet was hit by a car and required treatment for multiple injuries from this accident, we would consider these to be one *health condition*.

Medication

means any drug or other form of medicine provided or prescribed by a vet to treat or cure an illness or injury. This includes all prescription only and restricted veterinary medicines, and some over-the-counter medicines including:

- pain relief (analgesics)
- anti-inflammatory drugs
- steroids
- antidiarrheals/antinauseants.



Point to note

Supplements are different to medicines. For a definition of *supplement*, see [page 34](#).

Policy end date

means 11:59pm on the date that your policy ends, as shown on your *certificate of insurance*.

Policy renewal period

means the 6-week period prior to your *policy end date* where we recommend you make changes to your plan for the following policy period.

Policy start date

means 00:01am on the date that your policy begins, as shown on your *certificate of insurance*.

Qualifying treatment

means any of the following reasonable, typical, and medically necessary services that a *vet* provides to your pet to relieve or treat an *accidental injury*:

- hospitalisation
- surgery
- x-rays
- *medication*
- diagnostic tests
- nursing
- physiotherapy.

Supplement

means an over-the-counter health improver intended to supplement your pet's diet or wellness, including:

- vitamins and minerals
- probiotics
- nutraceuticals
- oil supplements
- amino acids
- botanicals and herbals.

Vet

means an expert currently registered and licensed to practise in New Zealand, including:

- veterinarians
- specialist veterinarians
- *vet* practices
- animal hospitals
- animal clinics
- animal surgeries.

Vet charges

means the reasonable, typical, and essential charges that you incur and pay for *qualifying treatment* that a *vet* provides to your pet.



**Southern Cross
Pet Insurance**

Call us on **0800 800 836**
or visit **southerncrosspet.co.nz**