Southern Cross Pet Insurance

southerncrosspet.co.nz

PetCare

Accidental injury and illness cover (with optional extras)

Effective from 1 March 2025

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Southern Cross Pet Insurance

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)

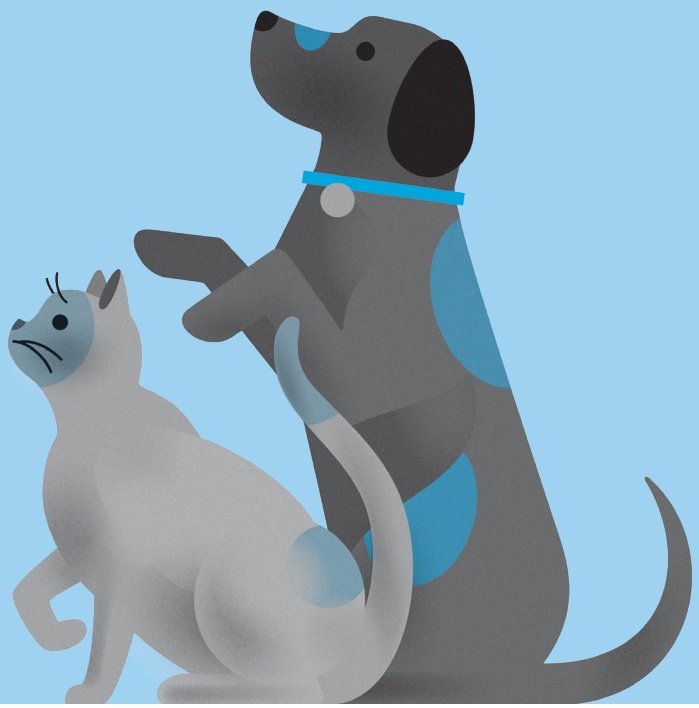
Ratings from 'AA' to 'CCC' may be modified with a plus (+) or minus (-) sign to show relative standing within the major rating categories. Full details of the rating scale are available at **www.spglobal.com/ratings/**

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

WriteMark® Plain Language Standard

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 PetCare 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* and *illnesses*.

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 PetCare 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 level of cover you selected and any optional extras you added, 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, such as the *Supplement* Schedule), 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 36.

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 on page 27 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 PetCare covers and how it works

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

Your pet must be between 8 weeks and 7 years old when your policy begins

Your pet is only eligible for PetCare if its age on the *policy start date* is:

- 8 weeks or older
- younger than 7 years.

We'll continue to renew this policy after your pet turns 7 years old, as long as your PetCare policy started before your pet turned 7.

Your pet must not be a pig hunting dog

We don't cover pets used for pig hunting.

What we'll pay for under PetCare

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

We'll pay up to the annual benefit limit you selected per policy period

In each policy period, you can claim for *qualifying treatment* up to the *annual benefit limit* you selected, as shown on your *certificate of insurance*.

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 cure an *accidental injury* or *illness,* such as:

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

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Point to note

Vet consultations 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 12.

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 a member of the New Zealand Association of Canine Hydrotherapists.

We'll cover eligible *supplements*

We cover the *supplements* set out in the *Supplement* Schedule if they're prescribed by your *vet* as part of a *qualifying treatment*.

To view the latest *Supplement* Schedule:

- visit **southerncrosspet.co.nz/vitamin-and-supplement-schedule**
- call us on **0800 800 836** for more information.

You can choose your annual benefit limit

You can choose the *annual benefit limit* you want. We'll apply the cruciate ligament sub-limit noted beside it in the table below.

Name	Annual benefit limit	Cruciate ligament sub-limit
BlueRibbon	$15,000	$5,000
GoldRibbon	$10,000	$5,000
SilverRibbon	$5,000	$2,500
BronzeRibbon	$2,500	$2,500

!

Point to note

The *annual benefit limit* that you choose is shown on your *certificate of insurance*. This is the maximum amount we'll reimburse you for all claims for *qualifying treatment* received during each policy period.

We apply a sub-limit to cruciate ligament health conditions

We apply a sub-limit to the amount we'll pay 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 is insured under a GoldRibbon policy with a $10,000 *annual benefit limit* and $5,000 cruciate ligament sub-limit, and it ruptures its left cruciate ligament. We would reimburse up to $5,000 for *qualifying treatment* of that rupture in the current policy period. You would be responsible for any costs above $5,000 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

Annual benefit limits and sub-limits apply 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 26.

For example:

Say your pet has ruptured its left cruciate ligament, and we've reimbursed 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 over).

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 27.

!

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 your *extra cover* options if you have them.

You can choose your co-payment

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

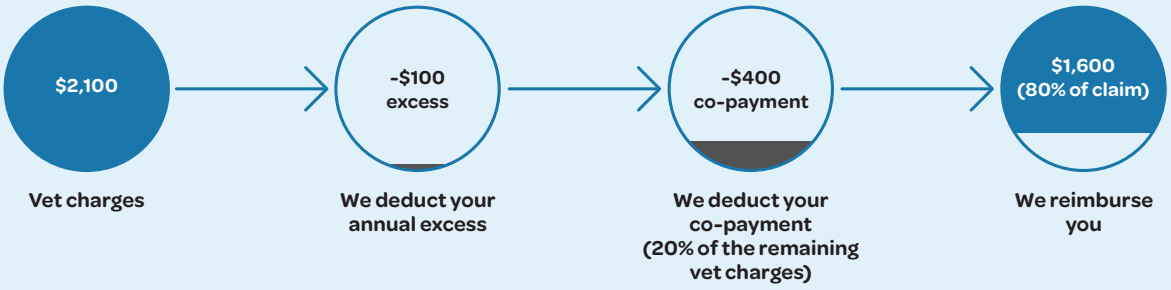
- 10%
- 20%
- 30%

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*, 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 work if the vet charges are higher than your annual benefit limit

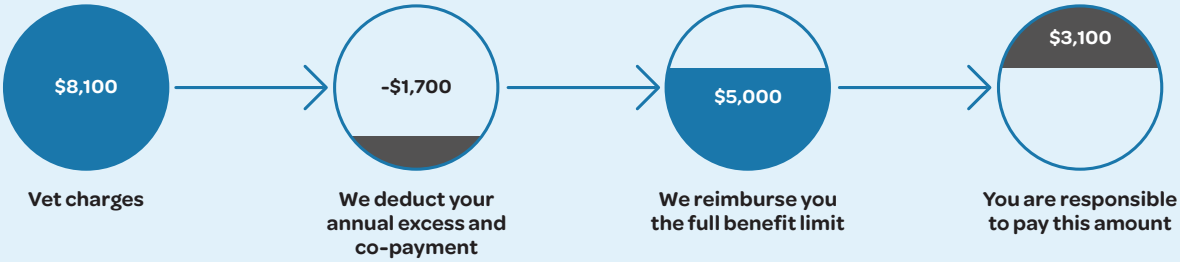
If the *vet charges* for *qualifying treatment* are more than your *annual benefit limit* (after considering your *excess* and *co-payment*), we'll reimburse you up to your *annual benefit limit* and you'll be responsible for the remainder.

For example:

Say your *annual benefit limit* was $5,000, with 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.



How co-payments and excesses work with extra cover you add to your policy

The following *co-payments* apply to any *extra cover* that you choose to add to your policy.

- A 20% *co-payment* will apply to any claims you make under consult care extra.
- A 20% *co-payment* will apply to any claims you make under dental care extra.
- No *co-payment* applies to any claims you make under day-to-day care extra.

Your *excess* will not apply to any *extra cover* that you choose to add to your policy.

> You can read more about *extra cover* on page 12.

You can add extra cover for consultation fees, certain everyday care, and dental treatment

You can choose to add one or more of the following *extra covers* to your policy for an additional premium:

- consult care extra
- day-to-day care extra
- dental care extra.

If you want to add an *extra cover* option after your policy has started, you can change your policy in your *policy renewal period*.

> Read more about changing your policy on page 27.

Consult care extra covers consultation fees charged by your vet

With consult care extra, you can claim 80% of *vet consultation fees*. The consultation 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 a new *illness* or *accidental injury*
- for a follow-up
- in an emergency
- for specialist consultation.

How consult care extra interacts with other extra cover

We'll reimburse you for *consultation fees* related to treatment that we only cover under day-to-day care extra or dental care extra under the terms of that *extra cover*.

> ***For example:***
>
> Say your pet visits a *vet* for dental treatment only. We would cover the *consultation fees* for that treatment under dental care extra (if you have it).

If a claim involves treatment covered under both the base policy and an *extra cover* option, we'll reimburse the *consultation fees* under the base policy. This means:

- if you have consult care extra, we'll reimburse you for 80% of the *consultation fees*
- if you don't have consult care extra, you'll be responsible for the *consultation fees*.

For example:

Say you took your pet to the *vet* for a vaccination and to receive treatment for a skin condition.

- We would reimburse the cost of skin treatments or medicines under your PetCare base policy.
- We would reimburse the vaccination cost under day-to-day care extra if you have it.
- We would reimburse the *consultation fees* under consult care extra if you have it.

If you have added consult care extra, it will appear on your *certificate of insurance*.

Day-to-day care extra covers certain everyday care and alternative treatments

With day-to-day care extra, you can claim up to $75 each time your pet receives day-to-day care as listed below, up to a total of $300 per policy period.

Day-to-day care extra covers the following:

- de-sexing
- microchipping
- flea, tick, or worm control
- *alternative treatments*
- prescription foods
- vaccinations and health checks
- cremation or burial.

If you have added day-to-day care extra, it will appear on your *certificate of insurance.*

Dental care extra covers treatment for your pet's teeth

With dental care extra, you can claim 80% of *vet charges* for dental treatments, up to a maximum of $300 per policy period.

Dental care extra covers the following:

- treatment for gingivitis
- treatment for dental abscesses
- scaling and polishing teeth
- removing teeth where medically necessary due to:
  - dental disease arising from an infection
  - deciduous (baby) teeth not falling out
  - cavities
  - tooth fractures.

If you have added dental care extra, it will appear on your *certificate of insurance*.

C. What PetCare doesn't cover

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

This section describes the *health conditions*, treatments, and other expenses that PetCare excludes, and the stand down periods that apply.

Pre-existing conditions

We won't reimburse *vet charges* or other expenses incurred as a result of, related to, or as a consequence of your pet's pre-existing conditions unless we have agreed to do so in writing.

What is a pre-existing condition

A pre-existing condition is a *health condition* relating to your pet 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 16.

This includes any *health condition*, sign, symptom, or event — whether or not a *vet* has diagnosed it — to which any of the following apply before the *policy start date* or relevant stand down period.

- You have sought advice, or a *vet* has recommended care, treatment, or *medication* for the condition.
- You're awaiting test results or further investigation, treatment, or consultation with a *vet* for the condition.
- The condition requires, may potentially require, or would have caused a reasonable person to seek help from a *vet*.

Here are some examples of what a pre-existing condition under your PetCare policy may be:

- Any ongoing *health condition* that your pet is showing symptom of or has been diagnosed with. For example, skin conditions, allergies, cancer, epilepsy or diabetes.
- Any *health condition* that your pet has suffered that might reoccur. For example, ear infections, urinary tract infections, cruciate ligament ruptures or gastro conditions.
- Any symptom your pet has displayed that could be an early sign of a *health condition*. For example, lameness or limping, vomiting or gastro upsets, skin lesions or masses.
- Any *accidental injury* or *illness* that is present or has arisen from an event that happened prior to you taking out the policy. For example, say your pet was in a car accident prior to your *policy start date* – any injury or *illness* that your pet suffered (or may suffer in the future) as a result of this car accident would be *excluded*.
- Any behaviour that your pet displayed more than once in the year before your first *policy start date* that could result in an *accidental injury* or *illness*. For example, say your pet had more than once in the previous year needed *vet* attention for eating things it shouldn't (like poisons or non-food items), we would exclude any accidental ingestion by your pet after your *policy start date*.

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 that pre-existing condition during your policy period, we may decline cover for that pre-existing condition. We'll also add the pre-existing condition as an *exclusion* on 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 PetCare 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 or an eye. If the same *health condition* occurs in the other body part, 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 listed in your *certificate of insurance* as a pre-existing condition *exclusion*. If your dog then developed a patella dislocation in its right knee during your policy period, we would also exclude it as a pre-existing condition.

Stand down periods

We will apply the stand down periods described below.

Stand down periods apply:

- from your first *policy start date* (when you first buy your policy)
- if you increase or decrease your cover outside your *policy renewal period*.

This means if a *health condition* arises during the stand down period:

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

If you choose to add dental care extra during your *policy renewal period*, we won't apply the 90 day stand down period for dental care extra from the start of your new policy period.

> Read more about changing your policy on page 27.

We'll apply a stand down period if you increase your annual benefit limit at renewal

We'll also apply a stand down period when you increase your *annual benefit limit* during your *policy renewal period*.

We won't treat any *health condition* that arises during this stand down period as a pre-existing condition, however any cover we provide for that *health condition* will be limited to the *annual benefit limit* or relevant *sub-limit* that applied prior to the increase.

> Read more about changing your policy on page 27.

Stand down periods apply to illness, treatment under dental care extra, and certain injuries

We won't cover *qualifying treatment* for the following during the specified stand down periods:

- any *illness*, within the first 21 days
- anything under dental care extra, within the first 90 days
- cruciate ligament and patella luxation *health conditions*, within the first 90 days.

Stand down periods begin at 00:01am on the *policy start date* and end at 11:59pm on the 21st or 90th day after the *policy start date*, as applicable.

How stand down periods work under PetCare if you have FreeCover

Some stand down periods end early if your PetCare policy starts while your FreeCover policy is active. After the 21st day of your FreeCover period, we'll waive the PetCare stand down periods for:

- *illness*
- cruciate ligament and patella luxation *health conditions*.

Only the 90-day stand down for dental care extra will still apply (if you chose to add this *extra cover*).

Other exclusions

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

Additional expenses

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

- grooming and bathing costs, including medicated baths and shampoos (but we will cover *accidental injuries* that happen during grooming)
- 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.

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Point to note

You can add cover for burial or cremation by selecting day-to-day care extra. Check your *certificate of insurance* to see if you have added this *extra cover*.

> Read more about day-to-day care extra on page 13.

Alternative treatment

We don't cover *alternative treatment*.

Alternative treatments are:

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

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Point to note

You can add cover for *alternative treatments* by selecting day-to-day care extra. Check your *certificate of insurance* to see if you have added this *extra cover*.

> Read more about day-to-day care extra on page 13.

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.

Breeding, pregnancy, or giving birth

We don't cover conditions related to breeding or to your pet being pregnant or giving birth.

We also don't cover treatments related to these conditions, like:

- artificial insemination
- caesarean delivery
- contraceptives or contraceptive procedures
- treatment for phantom pregnancy.

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 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.

Congenital conditions

We don't cover congenital conditions.

A congenital condition is an anomaly or developmental defect that is present in your pet at birth, even though signs or symptoms may not appear until later in life.

We maintain a list of conditions that we consider to be congenital conditions. However, this is not a complete list of all congenital conditions. To view the list:

- visit **southerncrosspet.co.nz/questions**
- call us on **0800 800 836** to discuss.

Consultation Fees

We don't cover *vet consultation fees*.

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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 this *extra cover*.

> Read more about consult care extra on page 12.

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.

Dental care

We don't cover treatment for dental care.

Dental care includes things like:

- treating dental and oral diseases such as gingivitis
- cleaning and scaling teeth
- providing orthodontics
- removing deciduous (baby) teeth.

!

Point to note

You can add cover for dental care by selecting dental care extra. Check your *certificate of insurance* to see if you have added this *extra cover*.

> Read more about dental care extra on page 13.

Everyday care

We don't cover treatment for everyday care.

Everyday care means care or treatment that is either:

- a regular cost of having a pet
- intended to prevent future *illness* or *accidental injury*, rather than treating an existing *illness* or *accidental injury*.

Everyday care includes things like:

- vaccinations
- microchipping
- flea, tick, or worm control
- grooming
- de-sexing
- treatment for undescended testes
- nail clipping
- council registration
- over the counter products
- cremation and burial.

!

Point to note

You can add cover for certain everyday care by selecting day-to-day care extra. Check your *certificate of insurance* to see if you have added this *extra cover*.

> Read more about day-to-day care extra on page 13.

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 because you have failed to reasonably protect it from:

- situations that may result in *accidental injury* or *illness*
- anything that worsens a treated *health condition*.

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*.

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

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

!

Point to note

You can add cover for prescription pet foods by selecting day-to-day care extra. Check your *certificate of insurance* to see if you have added this *extra cover*.

> Read more about day-to-day care extra on page 13.

Screening

We don't cover screening.

Screening means any of the following when your pet shows no signs or symptoms of an *illness* or injury:

- diagnostic tests
- investigations
- treatments
- consultations.

Specialised treatments

We don't cover any of the following specialised treatments for your pet:

- organ transplant surgery, joint replacements, artificial limbs, implants, and prosthetics, including all associated costs
- genetic or chromosome testing
- cell-replacement therapies, including stem cell therapy.

Supplements not on our schedule

We don't cover *supplements*, whether or not your *vet* recommends them, except for eligible *supplements* listed in the *Supplements* Schedule.

> Read more about the *Supplement* Schedule on page 7.

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 that treatment is consistent with the typical treatment of a condition this policy excludes.

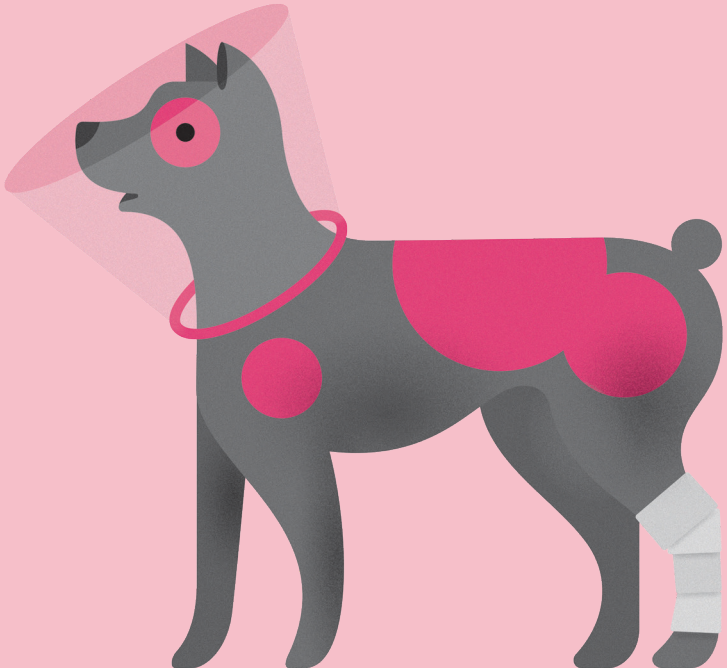
For example:

Say your dog has a pre-existing condition *exclusion* for allergies and you take it to the *vet* because it is suffering from a rash. Your *vet* cannot diagnose the *health condition* that is causing the rash but decides to treat your pet with allergy *medication*. We wouldn't reimburse you for that treatment until or unless a conclusive diagnosis showed the dog's rash was unrelated to its pre-existing allergy *health condition*.

Conditions related to an epidemic or pandemic

We don't cover treatment of any *health condition* that is due to a declared epidemic or pandemic.

D. How to make a claim



If your pet has an *accidental injury* or *illness*, 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*.

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 PetCare 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 PetCare. 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 *health condition*
- 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.

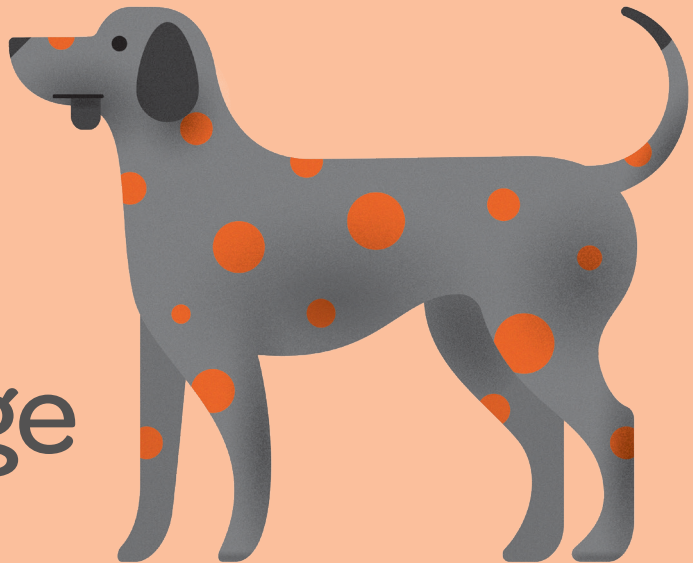
You agree to provide any information we need about third parties who we may recover money from, including in legal proceedings.

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

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 30.

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 at renewal. 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* whenever:

- we renew your policy at the beginning of each 12-month policy period
- you change your plan during the policy period, for example, to increase or decrease your cover (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:

- the *annual benefit limit* you selected
- your *co-payment*
- your *excess*
- any *extra cover* you chose
- 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:

- increasing your a*nnual benefit limit*
- reducing your *co-payment*
- reducing your *excess*.

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

- reducing your *annual benefit limit*
- increasing your *co-payment*
- increasing your *excess*.

Timing and conditions for changing your policy

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. These are the important things you need to know:

- you can decrease your cover when your pet is any age
- you can't increase your cover if your pet is 7 years old or older
- stand down periods apply to any increase in *annual benefit limit*.

> Read more about stand down periods on page 16.

Changing your policy during your policy renewal period

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

Increasing cover during your policy renewal period

If you increase your *annual benefit limit*, the new *annual benefit limit* won't apply to claims you make for *health conditions* you have previously claimed for, knew about, or should reasonably have known about:

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

In these cases, we will limit your cover to the lesser of:

- the *annual benefit limit* and applicable sub-limit, that applied before the change
- the *annual benefit limit* and applicable sub-limit, that applied when you first knew about the *health condition*.

For example:

Say you begin your policy with an *annual benefit limit* of $5,000, and decide to increase the *annual benefit limit* to $15,000. Here's how that would affect your policy:

- cover for any *health condition* your pet had prior to the change would remain limited to $5,000
- cover for any *health condition* that arose in the 21-day stand down period for *illness* would remain limited to $5,000
- if they arose in the 90-day stand down period, cover for cruciate ligament *health conditions* would remain limited to $2,500 (the sub-limit for cruciate ligament *health conditions* for SilverRibbon) and $5,000 for patella luxation *health conditions*
- cover for any new *health condition* that arose after the increase and relevant stand down periods would increase to $15,000
- provided you didn't make changes to any *extra cover*, *excess*, or *co-payment* you hold, your *extra cover*, *excess*, and *co-payment* would remain the same.

If you reduce your *excess* or *co-payment* , the new *excess* or *co-payment* will apply to any claims you make from the renewal date, regardless of when the *health condition* arose.

For example:

Say you begin your policy with an *excess* of $500, and decide to reduce the *excess* to $100. The $100 *excess* would apply to cover for any *health condition* after the renewal date, regardless of whether it arose before or after the change.

Decreasing cover during your policy renewal period

If you reduce your *annual benefit limit* or increase your *co-payment* or *excess*, 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.

Adding or removing extra cover during your renewal period

You can choose to add or remove one or more of the following *extra cover* options to your policy during your *policy renewal period:*

- consult care extra
- day-to-day care extra
- dental care extra.

If you want to add or remove an *extra cover* option during your *policy renewal period*, we'll apply this change from the start of the new policy period.

Changing your policy outside of your policy renewal period

We'll cancel your existing policy and issue you with a new one if you make any of the following changes outside your *policy renewal period.*

- You increase or decrease your *annual benefit limit*.
- You increase or decrease your *co-payment* or *excess*.
- You add or remove an *extra cover* option.

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 pay 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 31.

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.

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. If we do cancel your policy due to unpaid premiums, we'll cancel your policy from the date you have paid up to.

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 *health condition* and add that condition 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 30.

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.

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 27.

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, *annual benefit limits*, 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

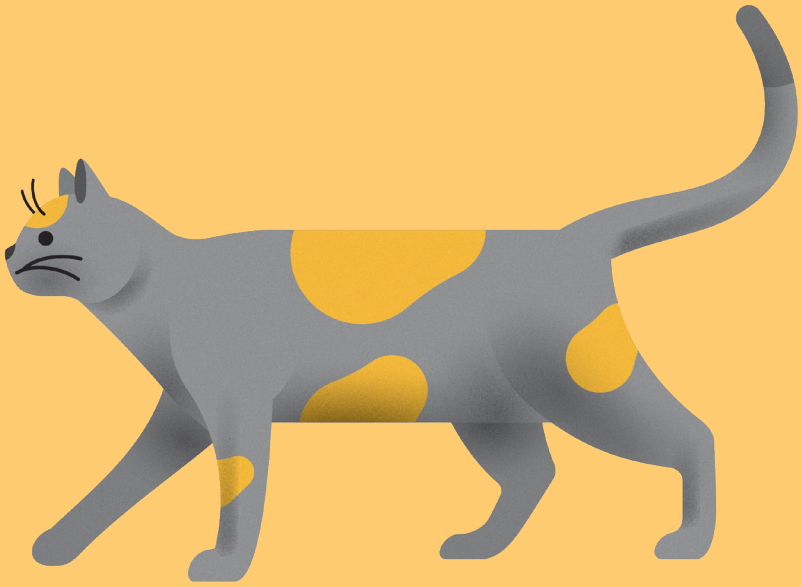
For example, we use the information about you to:

- 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.

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.

Alternative treatment

means these treatments:

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

Annual benefit limit

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

You select which *annual benefit limit* you want from the options on page 8 and this is shown on your *certificate of insurance*.

Any *annual benefit limit* not used in one policy period does not carry over into the next.

Certificate of insurance

means the document we send you which sets out:

- the *annual benefit limit* you selected
- the *excess* you selected
- the *co-payment* you selected
- any *extra cover* you chose
- 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 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.

Extra cover

means consult care extra, day-to-day care extra and dental care extra (see page 12).

Health condition

means any *illness* or *accidental injury*.

We consider any *illness* affecting your pet in multiple ways to be the same *health condition* if it has the same signs or symptoms, the same diagnosis, or results from the same sickness or disease.

> ***For example:***
> We would treat all types and occurrences of dermatitis as the same health condition if your pet had different types of dermatitis affecting different body parts.

Illness

means a sickness or disease.

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:

- laxatives
- pain relief (analgesics)
- antihistamines
- anti-fungal
- antacids
- anti-inflammatory drugs
- steroids
- decongestants
- antidiarrheals/antinauseants.

> ***Point to note***
> *Supplements* are different to medicines. For a definition of *supplement*, see page 39.

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 cure an *accidental injury* or *illness*:

- 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**