

Look after them, protect yourself

Best in Show: Silver Cover

Combined Financial Services Guide and
Product Disclosure Statement



pet insurance com.au

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1 INTRODUCING YOUR PET INSURANCE

Petinsurance.com.au offers the following plan in this booklet:

Plan name	Type of cover
Silver Cover	<i>Specified accidental injury and specified illness cover with optional additional dental illness benefit and optional non-insurance benefit for routine care.</i>

In addition to the Silver Cover plan, Petinsurance.com.au offers other products with different levels of cover and coverage options for you to choose from. Please visit our website to view other options.

Your *certificate of insurance*, which is issued to you when we accept your application for cover under your policy, tells you which plan you have. Your *certificate of insurance* is reissued when you renew your policy each year, if you change your details (for example your address) and if you change your cover (for example if you change your level of cover).

Whether you've already bought this policy or you're still deciding whether you'd like to, please be sure to read through this booklet.

We've kept it as simple as we can, but there are things we need to tell you about that are a bit more detailed. This is because your policy is a legal contract between us and you.



Words in *italics* have a special meaning and these can be found at the end of this booklet under [“Definitions of important terms”](#)

When reading this booklet, unless specified otherwise, references to:

- ‘we’, ‘us’ or ‘our’ for renewals of policies first issued before 7 November 2023 includes PIPL, PetSure or Hollard.
- ‘we’, ‘us’ or ‘our’ for all other policies includes PIPL or PetSure.
- ‘you’ or ‘your’ means the applicant for a Petinsurance.com.au policy and if a policy is issued, the named insured on the *certificate of insurance*.
- any legislation contained in the policy includes any amendment, replacement, re-enactment or successor legislation.
- singular include the plural and vice versa, and to the masculine include the feminine and vice versa.
- dollar amounts are to Australian dollars.
- ‘times’ are to the time and business days in Sydney, NSW, Australia.

How this booklet works

This booklet contains:

- A Product Disclosure Statement, or PDS
- A Financial Services Guide, or FSG
- Definitions of important terms

As well as reading through this information, you should also check your *certificate of insurance*, along with any other correspondence from us.

Note: From time to time, we may also update this booklet with a supplementary version that contains recent changes or advise you of changes on our website. This is outlined in the section about how we make [“Updates to the PDS”](#).

What to do first

1

Read through this booklet to make sure you understand everything.

We know you're interested in how to make claims, what your policy covers (or doesn't), how to pay your premiums or change your cover.

That's why we've included quick overviews of these things in this first part. There are more detailed sections about these later in the booklet. You should also read the detailed sections to fully understand the terms and information you need to know.

Any information contained in this booklet is general information only and does not take into account your individual objectives, financial situation or needs. Before acting on this general information or buying this product, you should carefully read this booklet and consider the appropriateness of the general information having regard to your individual objectives, financial situation and needs.

2

Check that all the information you've given us is correct.

Check the details in your *certificate of insurance* and contact us straight away if any of these details have changed or need correcting (like if you've moved house). Our ["Contact details"](#) are on the last page of this booklet. It's important to ensure that you haven't misrepresented anything, even if by mistake. There's a section in the PDS about ["Your duty to take reasonable care not to make a misrepresentation"](#).

3

Keep your insurance documents together and in a safe place.

To make it easy for you to access your policy documents when you need them, file them all together, where you keep your other important paperwork or electronic documents.

Insurance cover overview

The basics

For this particular cover, the only pets we insure are dogs (and cats, for policies that were first inception prior to 5 July 2022). They must be older than eight weeks and younger than 15 years when you first apply. Your *pet* also needs to live with you and be under your regular care and supervision at the address you have provided to us.

You'll receive a *certificate of insurance* when you take out a policy with us, when you renew your policy each year, if you change your details (for example your address) and if you change your *cover*. Your policy will continue for 12 months from its *commencement date* unless it is cancelled by you or by us.

Your policy is made up of the *certificate of insurance*, PDS, FSG and any supplementary disclosure documentation issued by us from time to time.

Summary of your benefits

Your pet insurance policy provides financial assistance to you for certain costs and expenses that you incur in relation to your *pet* during your *policy period*, such as:

- eligible *vet expenses* for the *treatment* of a *condition* you have cover for; and
- other benefits listed on your *certificate of insurance*, for example emergency boarding.

Noting that:

- these *conditions*, their *treatment* and other benefits need to be covered by your specific level of *cover* and must occur during the *policy period*;
- the amount we *cover* is referred to as your *benefit percentage*; and
- some *conditions* and benefits are subject to a *benefit limit*, *sub-limit* or other applicable limit.

Finally, you'll be responsible for any *excess* you have selected, which is shown on your *certificate of insurance*.

This is a summary only. You can find out more about the details and terms of your policy and your *cover* throughout this booklet and more specifically in the following sections:

- ["Specified accidental injury cover"](#)
- ["Specified Illness cover"](#)
- ["Additional and optional benefits"](#)

You should also know that there are exclusions within your policy, where we don't provide *cover* or provide payment of benefits. For example, *pre-existing conditions*, breeding related expenses and pet grooming. These, along with all other exclusions, are outlined in the [“General exclusions”](#) section and the [“Your cover”](#) section.

Waiting periods

When you take out *cover* with us for the first time, we set *waiting periods* for different *conditions* and benefits. *Waiting periods* also apply after a break or lapse in your *cover*. If you change the Petinsurance.com.au product you have for your *pet*, with a different level of *cover*, *waiting periods* will only apply to any *conditions* and benefits covered by the new product that weren't covered under your previous product.

If your *pet* shows signs or symptoms during the *waiting period* for a *condition* that may or may not need *treatment*, the following will happen:

- your *pet* won't be covered for any *vet expenses* incurred in relation to the *condition*; and
- the *condition* may be excluded from your *cover* in the future as a *pre-existing condition*.

You can read more about this in the section about [“Waiting periods”](#).

Premiums overview

This is a summary only, not the full story. For the details, read the [“Paying your premium”](#) section.

Your premium is the amount of money you agree to pay us for your policy. You can pay the premium we calculate in a single annual payment or by regular instalments, e.g. fortnightly or monthly.

Premiums must be paid on or before the due date. If you have a direct debit arrangement for regular payments, you'll need to keep enough money in your account to avoid any dishonour fees from your bank.

Please also read the [“Renewals, cancellations & changes”](#) section.

Claims overview

Making a claim is simple with these four steps. To read the full details, go to the section about [“Making a claim”](#).

Via the secure Pet Portal or your vet

Via your GapOnly® enabled vet

1

Get your *pet* the *treatment(s)* it needs by visiting any registered vet in Australia.

2

Pay for the *treatment(s)* and keep the itemised invoice(s) and veterinary notes (if provided to you) to use when you make your claim.

If your vet is GapOnly® enabled, let them know you'd like to submit a GapOnly® claim for your *pet's treatment*.

3

Many vets are happy to lodge the claim digitally on your behalf, provided you authorise them and they are able to do so. Otherwise, simply sign up and log into the secure [Pet Portal](#) to submit and track your claim.

The vet lodges the GapOnly® claim, and it's normally assessed by us within 10 minutes, where available.

4

Once we have all required information, we'll assess your claim and notify you of the outcome. If we need more information before we can finish your assessment, you'll hear from us.

Once the claim has been processed and if approved, you simply pay the gap (the difference between the vet's invoice and the calculated benefit) and go. You can find out more about GapOnly® here: www.gaponly.com.au

Note: We'll notify you of the basis of our final decision, so you know how we've assessed your claim.

PRODUCT DISCLOSURE STATEMENT

Please read this PDS carefully to understand your cover as it contains important information such as:

- significant features, benefits and limitations of your Petinsurance.com.au policy;
- our internal and external procedures for resolving disputes; and
- your cooling off period and rights when you purchase a Petinsurance.com.au policy.

This PDS was prepared by both insurers, Hollard and PetSure who are jointly responsible for the entire PDS.

Each insurer is also wholly responsible for their own product in respect of the described benefits, features, options, limitations, fees and costs of such products which they issue.

PIPL has given its consent to all statements by or about them in the form and context in which they are included and have not withdrawn that consent as at the date of the PDS. These statements appear throughout the PDS. Your insurer will be different, depending on the date when you first purchased your policy.

Renewals of policies first issued before 7 November 2023

Hollard is the issuer and the insurer of each Petinsurance.com.au policy. PetSure has been given a binding authority by Hollard which authorises it to enter into, vary and cancel policies on behalf of Hollard as if it were Hollard, as well as manage, administer and settle claims subject to the limits of authority agreed with Hollard. Neither Hollard nor PetSure act for you. PIPL is authorised to arrange, distribute and promote Petinsurance.com.au policies but is not involved in the assessment or payment of claims. PIPL does not act for you.

All other policies

PetSure is the issuer and the insurer of each Petinsurance.com.au policy. PetSure does not act for you. PIPL is authorised to arrange, distribute and promote Petinsurance.com.au policies, but is not involved in the assessment or payment of claims. PIPL does not act for you.

1 YOUR COVER

This section is about the range of *specified accidental injuries* and *specified illnesses* that are covered and not covered for your *pet*.

Your *cover* will be shown on your *certificate of insurance*, along with other key information like the *benefit percentage*, *benefit limit*, *sub-limits* and more. Your *certificate of insurance* will also state your selected plan, including any additional benefits you're eligible for, depending on the *cover* you've chosen.

Keep reading, you're just getting to the good stuff...



Specified accidental injury cover

What we cover

If your *pet* suffers a *specified accidental injury* during the *policy period*, we'll provide cover for eligible *vet expenses* incurred by you in relation to the *specified accidental injury* during the *policy period* subject to:

- the *benefit percentage*, *benefit limit* and *sub-limits* stated on your *certificate of insurance*;
- the *excess amount* (if any) stated on your *certificate of insurance*; and
- the terms and conditions in this policy, for example *waiting periods* and exclusions.

The *specified accidental injury* must be a direct consequence of at least one of the following:

- ✓ a motor vehicle incident;
- ✓ a burn or electrocution;
- ✓ a reaction to a bite from an insect, spider or scorpion (excluding fleas);
- ✓ a near drowning incident;

OR

the *specified accidental injury* must be one of the following:

- ✓ a bone fracture;
- ✓ a traumatic tooth fracture;
- ✓ snake bite toxicity;
- ✓ ingestion of a foreign object;
- ✓ poisoning;
- ✓ a traumatic ligament or tendon injury;
- ✓ a bite wound or fight wound abscesses;
- ✓ lacerations or abrasion of tissue, skin or mucous membrane due to external trauma; or
- ✓ a *cruciate ligament condition* (subject to a *waiting period*, see the [“Waiting periods”](#) section for more information).

Note: The following *conditions* are not considered *specified accidental injuries* no matter how the *condition* arises or occurs: patella luxations (dislocating kneecap), hip dysplasia, elbow dysplasia, intervertebral disc disease (IVDD), desexing procedure complications, and *conditions* caused by external parasites such as ticks, fleas or skin/ear mites.

What we don't cover

Specified accidental injury cover does not cover *vet expenses* that are attributable to or result from the following, no matter how the item or *condition* arises:

- ✗ any tooth fracture resulting from dental disease or where the treatment for the tooth fracture involves root canal therapy or dental crowns;
- ✗ anything which is not a *specified accidental injury* as listed in the [“What we cover”](#) section; or
- ✗ anything listed in the [“General exclusions”](#) section.

Note: *Specified dental conditions* are eligible for cover under the *dental illness benefit* (if you have this). See the [“Additional and optional benefits”](#) section for more information.

Specified illness cover

What we cover

If your *pet* suffers a *specified illness* during the *policy period*, we'll provide *cover* for eligible *vet expenses* incurred by you in relation to the *specified illness* during the *policy period* subject to:

- the *benefit percentage*, *benefit limit* and *sub-limits* stated on your *certificate of insurance*;
- the *excess amount* (if any) stated on your *certificate of insurance*; and
- the terms and conditions in this policy, for example *waiting periods* and exclusions.

The *specified illness* must be one of the following:

- ✓ tick paralysis;
- ✓ heat stroke;
- ✓ gastric dilatation-volvulus (GDV);
- ✓ trauma induced respiratory impairment (for example, if your *pet* chokes or experiences near-drowning);
- ✓ intervertebral disc disease (IVDD) or a traumatic spinal disc rupture;
- ✓ torn nail;
- ✓ embedded gras seed;
- ✓ soft tissue injury; or
- ✓ eye trauma.

What we don't cover

Specified illness cover does not cover *vet expenses* that are attributable to or result from the following, no matter how the item or *condition* arises:

- ✘ anything which is not a *specified illness* as listed in the [“What we cover”](#) section; or
- ✘ anything listed in the [“General exclusions”](#) section.

2 ADDITIONAL AND OPTIONAL BENEFITS

This section is about additional things that may be included or optional benefits you have access to, depending on the *cover* you have chosen. Your *certificate of insurance* will list which (if any) of these apply to you. Additional and optional benefits are subject to your policy terms and conditions, including policy exclusions.

Emergency pet boarding

If you require hospitalisation or emergency accommodation at some time during your *policy period*, there are circumstances where we'll provide *cover* for your *pet's* boarding costs incurred by you at a licensed kennel or cattery.

It is important to note that you'll need to be the sole carer of your *pet*, and not have someone else living with you who can reasonably be expected to look after your *pet*.

We'll then *cover* the *benefit percentage* for boarding costs incurred, up to the *sub-limit* shown on your *certificate of insurance* (and subject to your overall annual *benefit limit*) in the following situations:

- ✓ you require emergency accommodation due to family violence; and/or
- ✓ you are hospitalised for one or more consecutive days during the *policy period*, and it doesn't relate to cosmetic or other kinds of elective surgery, or for pregnancy (unless it's due to an unexpected complication).

You're responsible for the *excess amount* (if any) that appears on your *certificate of insurance*.

Routine care (non-insurance benefit)

If you have the *routine care* benefit option, we'll contribute towards the cost(s) of any of the specified *routine care* items shown on your *certificate of insurance* that you have incurred during the *policy period*, up to your applicable *routine care* limit(s) and *sub-limits*.

Your *certificate of insurance* will show if you have the *routine care* benefit option, and will also show:

- exactly which *routine care* items you are eligible to receive benefits for; and
- your annual maximum limits for *routine care* (overall, and for each item).

Note: The *benefit percentage* and *excess* does not apply to *routine care* items.

Dental illness benefit

Your *certificate of insurance* will show if you have selected the *dental illness benefit* which is an optional benefit under this plan. If you have this option the *dental illness limit* will be specified on your *certificate of insurance* which is additional to your policy's *benefit limit*.

What we cover

If you have the *dental illness benefit* and your *pet* suffers a *specified dental condition* during the *policy period*, we'll provide cover for eligible *vet expenses* incurred by you in relation to that *specified dental condition* during the *policy period* subject to:

- the *benefit percentage* and *dental illness limit* stated on your *certificate of insurance*;
- the *excess* amount (if any) stated on your *certificate of insurance*; and
- the terms and conditions in this policy, for example *waiting periods* and *exclusions*.

Cover under this section of the policy is restricted to *treatment* for the following *specified dental conditions* only:

- ✓ gingivitis;
- ✓ abscesses; or
- ✓ removal of teeth where medically necessary due to:
 - dental disease arising from infection;
 - retained deciduous teeth;
 - cavities; or
 - fractured teeth.

What we don't cover

- ✘ anything which is not listed as a *specified dental condition*;
- ✘ any *treatment* for *specified dental conditions*, unless there is a history of annual routine dental check-ups by a vet; or
- ✘ anything listed in the [“General exclusions”](#) section.

Note: *Specified dental conditions* are subject to a *waiting period*. Please refer to the [“Waiting periods”](#) section for more information.

3 WAITING PERIODS

When you take out *cover* with us for the first time, we set *waiting periods* for different *conditions* and benefits. *Waiting periods* also apply after a break or lapse in *cover*. If you change the Petinsurance.com.au product you have for your *pet*, with a different level of *cover*, *waiting periods* will only apply to any *conditions* or benefits covered by the new product that weren't covered under your previous product.

If a *condition* exists or occurs that may or may not need *treatment* during any applicable *waiting period*, you will not be covered for the *vet expenses* incurred in relation to the *condition*, irrespective of whether it's a *pre-existing condition*, a *previous condition*, a *new condition* or a *temporary condition*.







Also, the *condition* may be excluded from your *cover* in the future, as a *pre-existing condition*.

Don't paws... there's more on the next page



About waiting periods

Below are our *waiting periods*. The *waiting period* starts from 11:59PM on the *commencement date* of the *first policy period* in which you obtained cover for the applicable *condition* or benefit as described below.

Item	Waiting period
	<i>Specified accidental injuries</i> None
	<i>Specified illnesses</i> 21 days
	<i>Cruciate ligament conditions</i> (and <i>conditions</i> arising from this, irrespective of their cause or origin) 6 months
	<i>Specified dental conditions</i> 6 months
	<i>Routine care items</i> (non-insurance benefit) None
	Emergency boarding None

Cruciate ligament condition waiting period waiver:

We will agree to waive the *cruciate ligament condition waiting period* if:

- your *vet* sends us a completed and signed Cruciate Ligament Exam Form within 14 calendar days of the cruciate examination date, certifying that your *pet* was examined by your *vet* at your expense on or after the *commencement date* of the *first policy period*; and
- the evidence from your *vet* meets our assessment criteria as set out in the above form and we confirm this in writing to you.

Note: You can find the Cruciate Ligament Exam Form at: www.petinsurance.com.au/pds-forms-and-faqs or contact us for assistance.

4 GENERAL EXCLUSIONS

This part of the booklet details what we don't *cover* or pay benefits for under your Petinsurance.com.au policy, plus a few things that we only *cover* in specific circumstances.

These general exclusions are in addition to the items listed in the ["Your cover"](#) section.

Pre-existing conditions

We do not provide *cover* or pay benefits for *pre-existing conditions*, unless they meet the requirements of a *temporary condition*, as outlined below (see ["Pre-existing conditions which are temporary conditions"](#)).

A *pre-existing condition* is a *condition* that first existed or occurred:

- prior to the *commencement date* of your *first policy period*; or
- within any applicable *waiting period*;

AND

- is a *condition* that you were aware of, or a reasonable person in your circumstances would have been aware of, irrespective of whether the underlying or causative *condition* has been diagnosed.

A *pre-existing condition* also includes a *related condition* or *bilateral condition* of a *pre-existing condition*. We suggest you read more about this, including examples, in the ["Definitions of important terms"](#) part of this booklet.

Note: *Pre-existing conditions* which are *temporary conditions* are treated differently.

Pre-existing conditions which are temporary conditions

If, after any applicable *waiting period*, your *pet* has a *pre-existing condition* that is a *temporary condition* which hasn't existed, occurred or shown noticeable signs, symptoms or an abnormality in the 18-month period immediately prior to your claim *treatment date*, it won't be excluded from *cover* as a *pre-existing condition*.

Note: Where there is a *temporary condition*, it will need to be a *specified accidental injury*, *specified illness condition* or *specified dental condition* (where covered under the *dental illness benefit*) in order to be eligible for cover under your policy.

Hereditary conditions and congenital conditions

Hereditary *conditions* and congenital *conditions* won't be considered a *pre-existing condition* if they have not shown noticeable signs, symptoms or an abnormality at any time before the *commencement date* of the *first policy period* or during any applicable *waiting period*.

Note: Where a hereditary *condition* or congenital *condition* is not considered a *pre-existing condition*, it will need to be a *specified accidental injury*, *specified illness condition* or *specified dental condition* (where covered under the *dental illness benefit*) in order to be eligible for cover under your policy.

Chronic conditions

If your *pet* has a *chronic condition* that existed or occurred before the *commencement date* of the *first policy period* or during any applicable *waiting period*, and otherwise falls within the definition of *pre-existing condition*, that *condition* will always be excluded from your policy and will never be considered a *temporary condition*.

Pre-existing condition review

If at any time you'd like us to check whether a *temporary condition(s)* is excluded from cover as a *pre-existing condition*, based on the terms of the "[Pre-existing conditions which are temporary conditions](#)" section above, you can apply to us to check this, using the *pre-existing condition* review form, which is available here: www.petinsurance.com.au/pds-forms-and-faqs/ or contact us for assistance.

Your *vet* will need to certify and provide veterinary records verifying that the *condition* is a *temporary condition* and hasn't existed, occurred or shown noticeable signs, symptoms or an abnormality for a period of 18 months. We'll let you know in writing whether or not the exclusion still applies.

Specific treatments and conditions

Unless the relevant item appears on your *certificate of insurance*, we don't provide *cover* or pay benefits for the following, even if they are in relation to a *condition*:

- regular nail clipping or preventative dew claw removal;
- behavioural conditions such as anxiety disorders, phobias or chemical imbalances;
- medicated baths and shampoos, unless your *vet* says they are medically necessary to treat a *condition* covered by your policy;
- accessories, including but not limited to pill poppers, cage hire, crates, bedding and collars;
- medication not approved or listed by the Australian Pesticides and Veterinary Medicines Authority;
- the provision of medication(s) that covers a period of more than 30 days beyond your policy *end date*;
- chemical castration, suprelorin implants or other desexing procedures, unless required to treat the eligible *condition* affecting your *pet's* reproductive organs;
- breeding or obstetrics;
- cancer;
- orthodontic treatment, crowns, root canal, cosmetic dental surgery or corrective treatment and odontoclastic resorptive lesions;
- any disease that affects dogs that is subject of a biosecurity emergency declaration under the *Biosecurity Act 2015* (Cth);
- any flea/tick/worm preventative treatments or measures, including but not limited to tick baths, sprays, intestinal worming products whether recommended by your *vet* or not; or
- cell-replacement therapies including but not limited to stem cell therapy and platelet rich plasma.

Specific services and procedures

Unless the relevant item appears on your *certificate of insurance*, we don't provide *cover* or pay benefits for the following, even if they are in relation to a *condition*:

- transport or boarding expenses other than those for emergency pet boarding;
- shipping or freight costs;
- ambulance fees and non-essential hospitalisation;
- training and socialisation;
- genetic/chromosome testing; or
- these items and any associated expenses:
 - any trial or experimental procedures and treatments;
 - organ transplant surgery, open heart surgery, artificial limbs, mitral valve and chordae tendineae replacement surgery and pacemakers;
 - external fixtures such as wheelchairs;
 - prosthetics (with the exception of total hip replacements);
 - 3D printing; or
 - an autopsy, disposal, burial or cremation of a deceased *pet*.

Elective treatments and procedures

We don't provide *cover* or pay benefits for *elective treatment* including but not limited to cosmetic procedures, declawing, devocalisation (debarking or demeowing), ear cropping, tail docking, elbow/hip scoring or voluntary euthanasia.

Note: Essential euthanasia is covered under this policy. It is the humane and necessary euthanasia of a *pet* which is required as a result of a covered *condition*.

Lack of protection for your pet

If you neglect your *pet* or fail to take all reasonable precautions to protect your *pet* from situations that may result in injury or illness, for example participating in organised fighting or hunting activities, we won't provide *cover* or pay benefits for those resulting *vet expenses*.

Consequential losses

We don't *cover* you for any consequential loss, including but not limited to economic loss, loss of enjoyment or any other loss that's not specifically covered in your policy.

Expenses related to an exclusion

We don't provide *cover* or pay benefits for any expenses relating to policy exclusions. This includes when a diagnosis is inconclusive, but the treatment protocol is consistent with an excluded *condition*, e.g., treatment for potential miscarriage, as expenses associated with breeding and obstetrics are excluded on your policy.

We also don't provide *cover* or pay benefits for any complications of, or adverse reactions to a policy exclusion. For example, if your *pet* requires surgery for a patella luxation condition, any complications of that procedure would be excluded from *cover*.

Dental, preventative and alternative care

Unless these items are stated on your *certificate of insurance*, we don't provide *cover* or pay benefits for the following:

- **Dental care** - dental procedures, dental diseases, gingivitis, teeth cleaning/scaling, orthodontics, root canal therapy, crowns, removal of deciduous teeth and any oral disease (with the exception of traumatic tooth fractures where covered under *specified accidental injury cover*);
Note: *Specified dental conditions* are eligible for *cover* if the *dental illness benefit* is shown as selected on your *certificate of insurance*. See the [“Additional and optional benefits”](#) section for more information.
- **Preventative/routine items** - preventive and routine items for your *pet*, including but not limited to food (regular or prescription), vitamins / nutraceuticals / supplements, vaccinations, microchipping, flea/tick/worm control, grooming and bathing of your *pet*, and non-medicated grooming products; or
- **Alternative and complementary items** - acupuncture, physiotherapy or physical therapy, hydrotherapy, homeopathic remedies, laser therapy and chiropractic treatment.

5 MAKING A CLAIM

In this section we tell you everything you need to know about making a claim for the *treatment* of your beloved *pet*. It covers the claim process and how we settle a claim, along with your responsibilities and our processes for fraud detection.

There's also information in the introduction to this booklet about ["Making a claim in four easy steps"](#).

Asking for a claim pre-approval

If your *pet* requires *treatment*, you can seek pre-approval for the expected costs. Your *vet* may also be able to request a pre-approval on your behalf. Pre-approvals aren't mandatory, but they can provide you with reassurance as to whether you'll be covered and if so, what benefits will be provided for an upcoming *treatment*.

You (or your *vet* if they are submitting on your behalf) will need to provide us with the itemised estimate of costs from your *vet*, along with the *treatment* required and relevant clinical records and/or veterinary history. We'll then respond to you (and your *vet* if submitted on your behalf) in writing with the outcome. A pre-approval isn't valid unless we've agreed to it in writing.

Note: If we agree to a pre-approval but the *treatment* provided by your *vet* differs from the *treatment* request in the pre-approval, then our assessment of the amount we cover under your claim may vary from the notified pre-approval amount. A variation in the amount we cover may also occur if you have reached your *benefit limit*, *sub-limit* or other applicable limit on the claim.

Making a claim through your vet

Your *vet* may be able to submit your claim electronically at the time of your visit. If they agree and are able to do this, you're authorising us to receive each claim submitted by your *vet* on your behalf. All accounts must be paid to your *vet* in full before making a claim.

Your *vet* may also be able to submit your claim via the GapOnly® service.

GapOnly® claims

GapOnly® is available at participating *vet*s. GapOnly® reviews and calculates your pet insurance claim benefits while you're still at the *vet*. If your *vet* is GapOnly® enabled, you don't need to pay your *vet* in full prior to the submission of your claim. Instead, your *vet* submits the claim to us electronically on your behalf and you agree to pay the 'gap' (the difference between the *vet*'s invoice and the claim benefit calculated, if any, under your policy).

You must pay the gap to your treating *vet* at the time you make a GapOnly® claim. We'll then pay the claim benefit (if any) directly to your *vet*.

You can find more information on GapOnly® here: www.gaponly.com.au.

Making a claim yourself

You can submit your claims online through the secure Pet Portal at <https://petportal.petinsurance.com.au>. Simply upload your documentation and click submit (from your computer or mobile device).

You can also submit your claim to us by post. If you do this, please ensure your posted claim documentation is accompanied by a completed claim form. Claim forms are available on request by calling 1300 855 663 or can be downloaded from www.petinsurance.com.au/pds-forms-and-faqs/.

If you choose to claim via post, the attending *vet* must complete all designated sections on the claim form. Both you and the *vet* must sign the claim form.

When you submit a claim, please include all relevant invoices and clinical records from your *vet*. All accounts must be paid to your *vet* in full before submitting your claim.

Please take care and be honest in the preparation and submission of your claims. This helps us process your claim without undue delay.

Processing your claim

We'll deal directly with you regarding settlement of the claim. Unless we specify otherwise and unless it is a GapOnly® claim, we'll pay the claim benefits to you, not your *vet*.

You agree that we're authorised to discuss with your *vet*, the details relating to your claim or the *treatment* provided to your *pet* in relation to a claim made under your policy. You also agree that your *vet* is authorised to view the outcome of your claim, including the amount of claims benefits.

Please note that:

- in some instances, we may require more information to process your claim, such as previous medical history or pathology/laboratory results. We'll contact you or your *vet* if required;
- there may be situations where we request additional veterinary history from current or previous *vets*, e.g. if there's a large history gap, to ensure we have all relevant clinical information for your *pet*;
- for adopted *pets*, veterinary history is only required from when you took ownership. You'll need to provide us with proof of adoption or transfer of ownership papers;
- if you're making an emergency boarding claim, we may require supporting documentation;
- unless we agree otherwise, all of your claims must include itemised tax invoice(s), payment receipt(s) and *vet consultation* notes if applicable;
- incomplete claim forms may result in a processing delay. We recommend that you retain copies of all documentation for your records;
- you also agree that your current or previous *vet* or any other service provider that provided *treatments* to your *pet* is authorised to release information and/or records to us about your *pet*; and
- you're responsible for any fees and expenses that may be charged to you by any third parties relating to the purchase and administration of your policy, assistance provided to you to complete any forms and in relation to claims.

Adjustment of claim payments

If the *vet expenses* incurred by you exceed what is reasonable and essential, having regard to other *vet expenses* in a similar situation, your claim payments may be adjusted and paid based on the reasonable and essential *treatment* or fees typically charged for the *treatment*, for a *pet* in similar circumstances.

Settlement of your claim

We'll send you a remittance advice regarding the settlement of your claim, either by email or letter, depending on your chosen means to communicate with us. This advice provides details of your claim outcome and how your claim has been processed. For Hollard issued policies, all approved benefits will be paid into your nominated bank account or by cheque. For PetSure issued policies, we'll pay all approved benefits into your nominated bank account.

We reserve the right to deduct from the benefit amount any amount due to us, for example for any overdue premium payments.

Note: In the event that we pay a benefit contrary to the policy terms and conditions for whatever reason, this won't constitute a waiver of our rights to apply the policy terms and conditions retrospectively to any paid claims or to any future claims for that or any *related condition*.

We also reserve our right to recover from you any benefit amount received by you as a result of such error.

Declining to process your claim

If you or your *vet* refuse to or are unable to provide information reasonably requested by us to process your claim, we may decline or reduce the amount payable for your claim, in accordance with relevant law.

Fraudulent claims

If you submit a fraudulent claim or entice your *vet* to behave in a fraudulent manner regarding a claim, then the claim may be denied or reduced in accordance with relevant law, and we may cancel your policy altogether in the event you make a fraudulent claim. We may also be entitled to reclaim any payments already made to you in respect of such claims.

For more details, see the [“How we prevent or handle fraud”](#) section.

How we settle your claim

The best way to show you how we work out how much we pay after you make a claim is with a couple of examples. These are examples only and include *GST*.

Example 1

This is a simple case showing how the policy *benefit percentage* and *excess* is applied.

80% <i>benefit percentage</i> and \$250 <i>excess</i> option selected	
The eligible invoice amount from your vet for <i>treatment</i>	\$6,000
The amount you can claim after applying your <i>benefit percentage</i>	\$4,800
Less \$250 <i>excess</i>	(\$250)
How much we pay	\$4,550
Your total out-of-pocket expense including your <i>excess</i>	\$1,450

Example 2

This one shows how a claim is paid for a policy item where a *sub-limit* and *excess* applies.

Claim for emergency boarding. 80% <i>benefit percentage</i> with a \$1,000 emergency boarding <i>sub-limit</i> per <i>policy period</i> and \$250 <i>excess</i> option selected	
The eligible invoice amount for emergency boarding	\$1,400
The amount you can claim after applying your <i>benefit percentage</i> and emergency boarding <i>sub-limit</i>	\$1,000
Less \$250 <i>excess</i>	(\$250)
How much we pay	\$750
Your total out-of-pocket expense including your <i>excess</i>	\$650

Our right to recover other amounts payable

If we have the right to recover any amount payable under your policy in relation to a claim from any other person, you must provide reasonable cooperation with us in any action we may take.

Telling us about other insurance you have

If you hold other insurance under which you may be entitled to make a claim in relation to eligible *vet expenses*, you must advise us of this at the time you submit your claim. Total benefits paid to you across all insurance cannot exceed your actual expenses.

How we prevent or handle fraud

Unfortunately, fraud and attempted fraud can occur. We employ sophisticated fraud detection and prevention techniques to ensure we only pay genuine claims. By doing this we're protecting you and all our policyholders.

You must not act in a fraudulent manner. If you or anyone acting for you:

- makes a claim, submits a document, or makes a statement in support of a claim under the policy knowing the claim, document or statement to be false or fraudulently exaggerated in any respect;
- works with your *vet* to behave in a fraudulent manner regarding a claim, e.g. pressuring your *vet* to note incorrect information; or
- makes a claim in respect of any loss or damage caused by your willful act or by colluding with another person;

Then:

- we may be entitled to refuse to pay all or part of the claim, to the extent permitted by law;
- we may cancel your policy and any other insurance policies you hold with us;
- we may be entitled to reclaim any payments already made to you in respect of such claims;
- we may not refund a premium already paid; or
- we may inform the police of the circumstances and we may take legal action.

6 PAYING YOUR PREMIUM

Your insurance policy cover is provided on the basis that you've paid or agreed to pay us the premium for that cover. The amount you pay is shown on your *certificate of insurance*. It includes all premium, administration fees and any applicable discounts, government taxes, fees and/or charges.

We like to think we don't miss a thing, but if you have a question about anything on your *certificate of insurance*, please contact us.

How to pay

Your pet insurance premium is payable when you take out a new policy and subsequently when your policy is renewed. Premiums can be paid via direct debit through a credit card or bank account:

- annually;

OR

- in monthly or fortnightly instalments.

When premiums are paid in monthly or fortnightly instalments, you'll be charged a collection fee per instalment, the amount of which will be displayed on your *certificate of insurance*.

If we accept and pay a claim under your policy, we may deduct the balance of any outstanding premium from the claim payment.

Paying on time

You need to make sure your premium payment(s) are up to date. If you have a policy that you're paying by instalments and we haven't received an instalment payment by its due date, we'll send you a notice in writing by mail, email or text message about your non-payment.

This will be at least 14 calendar days before any cancellation of your policy for non-payment.

If we don't receive the instalment payment after sending this notice, we'll send you a second notice in writing, again by mail, email or text message.

This will happen either:

- prior to cancellation of your policy, informing you that your instalment policy is being cancelled for non-payment if the unpaid premium remains in arrears for more than one month;

OR

- within 14 calendar days after cancellation by us, confirming our cancellation of your instalment policy after the unpaid premium was in arrears for at least one month.

If one or more instalments has remained unpaid for a period of at least 14 calendar days, then we reserve the right to reduce any claim made on the policy by the amount of any outstanding premium.

Cancellation consequences

If we cancel your policy due to non-payment of an instalment premium, please be aware that:

- no benefits or entitlements can be paid under the policy for *vet expenses* or other claims expenses incurred after the cancellation date;
- you may be refused *cover* in the future under any policy administered by PetSure; and
- any application for general insurance products (with any provider) in the future may be affected because you had a policy cancelled because of unpaid premiums.

Your payment account

When you provide us with your nominated credit card or bank account details, we use these to directly debit the premium calculated by us from that card or account.

Unless you opt out of automatic renewals or tell us that you don't want to renew your policy, we'll deduct/charge the renewal premium from your nominated credit card or bank account.

If your premium can't be paid, e.g. there isn't enough money in your nominated account, you may be charged a fee by your bank. It's important that you know that neither Hollard nor PetSure will be responsible for fees charged by your bank or financial institution.

If your direct debit fails, we'll notify you of this and automatically retry for the outstanding amount within 14 calendar days. Should this second attempt fail, we'll try again after 14 calendar days and, depending on your payment frequency, we'll deduct either the outstanding amount, or the outstanding amount together with your regular instalment.

If you'd like to make a real-time payment of your outstanding balance before we reattempt a direct debit, just call us to do this.

For payments by direct debit

For Hollard issued policies, if the direct debit bank account is not yours, you confirm you have the authority of the account holder to use it and that they've agreed to these terms.

For PetSure issued policies, you must have the sole authority as the account holder of the direct debit bank account and agree to the Direct Debit Request Service Agreement.

For payments by credit card

If the credit card is not yours, you confirm you have the authority of the credit card account holder to use it and that they've agreed to these terms.

Should you have questions about the operation of the direct debit authority or you need to change any aspects of the authority, please contact us.

7 RENEWALS, CANCELLATIONS & CHANGES

This part of the booklet explains your options for renewing, cancelling or changing the *cover* for your pet insurance policy.

Annual renewal of your insurance policy

As long as we continue to provide the product, we'll offer renewal of your policy every year. This will be subject to the applicable terms and conditions of the policy for each *policy period*. We'll change the premium and may change the terms and conditions of the policy at the time of renewal, based on a combination of factors, including the risk associated with insuring pets like yours.

Renewal procedure

Where we offer renewal of your policy, at least 14 days before your current policy expires, we'll send you an offer of renewal confirming the expiry date of your policy, and the premium and terms on which we'll offer to renew your insurance for the next *policy period*.

Unless you've chosen not to automatically renew your policy, your policy will automatically renew on those terms. Where you have opted-out of automatic renewal, you'll need to contact us after you've received your offer of renewal if you'd like to renew your policy.

The notice will also remind you:

- that you can opt out of the automatic renewal process at any time in the future;
- to check the information we have on your *certificate of insurance* is correct; and
- to review your insurance *cover* to consider if the policy limits and level of *cover* are still right for you.

Unless you opt out of automatic renewals or tell us that you don't want to renew your policy, we'll deduct/charge the renewal premium from your nominated account or credit card. See the "[Your payment account](#)" section for more information.

Your premium

Every year, we'll notify you of the changes to your annual premium. We review the cost of everyone's insurance, taking account of a range of factors. These are set out under the "[How we calculate your premium](#)" section.

Cancellation by you

You can cancel your policy with us at any time by contacting our customer service team. Our "[Contact details](#)" are on the last page of this booklet.

The cancellation will be effective once we provide you with a written confirmation of your request, either by email or letter.

Paying annually?

If you've been paying your premiums annually, we'll retain a portion of the premium that relates to the period that you've been insured. We'll refund you the residual premium for the unexpired period (less any government or statutory charges that apply). We call this providing you a pro-rata refund, based on the number of days we insured you.

Paying by instalment?

If you've been paying your premiums by instalment, there's no premium refund for any remaining days of a current instalment period. No further premium instalments will be deducted.

If your pet passes away

We know there is a lot going on when your *pet* passes away, but we're here to help. Please contact us as soon as possible and we'll cancel your policy from the date of your *pet* passing. We'll adjust the premium, as outlined above.

Your cancellation rights during the cooling off period

Your cooling off cancellation rights apply when you buy your policy and also exist when your policy renews or is reissued following a change in your *cover*. You can find more information in the "[Cooling off period](#)" section.

Cancellation by us

We may cancel your policy where permitted by and in accordance with the law. We'll give you notice in writing before exercising any right to cancel your policy. For example, if you:

- do not comply with the policy terms and conditions;
- do not pay your premium as agreed;
- make a fraudulent claim; or
- did not comply with your duty to take reasonable care not to make a misrepresentation.

If we cancel your policy, we'll retain and/or refund any premium as the law allows us to do so.

Changing your cover

You can change the *cover* for your *pet* by choosing cover with different or additional benefits, where eligible and available to you. You may, for example, want a different *benefit percentage* or *benefit limit*, or to upgrade your coverage.

If you haven't had a claim paid and want to change your *cover*, just contact us and we'll issue you a new policy number and *certificate of insurance* outlining your new premium and your previous policy number will be cancelled.

However, you can't change your *cover* if a claim has been paid during your current *policy period*. You'll need to wait until your next policy renewal.

Waiting periods already completed won't be reapplied unless there has been a break or lapse in your *cover*. If you change the Petinsurance.com.au product you have for your *pet*, with a different level of *cover*, *waiting periods* will only apply to any *conditions* covered by the new product that weren't covered under your previous product.

8 OTHER IMPORTANT INFORMATION

This section includes other important information on how we communicate with you, your duty to take reasonable care not to make a misrepresentation, how we calculate your premium and more.

Delivery of your policy documents

Unless you instruct us otherwise, we prefer to send your policy documents and communicate with you electronically. Where you've agreed to receive electronic communications, you'll need to provide us with your email address and mobile number.

When we send your policy documents by email, we'll consider that you have received them on the date recorded on our information system.

You can instruct us to provide these documents by post, to a mailing address you provide, either when you purchase your policy or at any time by contacting us.

You're responsible for making sure the email and postal addresses you've given us are correct and up-to-date at all times.

Your duty to take reasonable care not to make a misrepresentation

Before you enter into this contract of insurance with us, you have a duty to take reasonable care not to make a misrepresentation under the *Insurance Contracts Act 1984* (Cth).

This means you need to take reasonable care to provide honest, accurate and complete answers to any questions that we ask. It is very important that you do so, as we base our decision whether to provide cover and the terms on which we do so on your answers.

If you're not sure of the answers to any of our questions, you should take the time to find them. It's also important to understand that, in answering the questions, you're answering for yourself and anyone else to whom the questions apply.

If any of our questions aren't clear and you need help, please contact us.

When this duty applies

The duty to take reasonable care not to make a misrepresentation also applies before you renew, vary, extend or reinstate an existing contract of insurance. This means that you must inform us of any changes to the information set out in your *certificate of insurance*, where the information is no longer honest, accurate and complete. If you don't contact us to update this information, we'll take it that you agree that the information remains honest, accurate and complete. Please contact us if you have any doubts.

If you don't comply with your duty

If you don't take reasonable care in answering our questions or inform us of changes to the information set out in your policy documents, you may breach your duty. If that happens, your policy may be cancelled, or treated as if it never existed, and any claim may be denied or not paid in full.

Updates to the PDS

We may need to update this PDS from time to time when certain changes occur and where we're required and permitted by law to do so. If that happens, we'll issue you with a new PDS or a Supplementary PDS or other compliant document to update the relevant information.

Where the information isn't materially adverse from the point of view of a reasonable person considering whether to buy or continue to hold this insurance, we may issue you with notice in a different form, including but not limited to disclosure updates on the PetSure and/or Petinsurance.com.au website(s).

You can contact us to get a free paper copy or download an electronic copy that summarises these changes.

How we calculate your premium

Your premium is calculated when your Petinsurance.com.au policy begins, at each policy anniversary, and also if you vary your *cover*. The premium for each *policy period* is printed on your *certificate of insurance*.

The amount you pay also includes allowances for government fees, taxes and charges, including stamp duty and GST.

For new policies

We calculate your premium based on several factors. Some are pre-set and don't vary, e.g. amounts we consider for some internal expenses. Others can affect the premium amount depending on whether we believe it increases or decreases the risk to us. For example, the type of *cover* and options you have selected.

We'll also take into account risk factors associated with you and your *pet* such as your *pet's* breed and age. For instance, as your *pet* gets older the risk of your *pet* requiring *treatment* will increase and so the premium increases. There are also commercial factors that affect your premium, including costs associated with operating our business and our commercial arrangements.

Your premium calculation may also include discounts or promotional offers that we provide. If you qualify for two or more discounts, we apply a specific order to our calculation of your final premium.

Also, any discounts and/or your premium may be rounded up or down and some may only apply in the first year of coverage.

For renewals and changes to your policy

For renewals, we also factor in the claim history for your *pet* and the average cost of care for pets like yours, as well as the claims experience across all our insured pets. Because of all of these factors and the changes to your *pet's* risk profile, your premium will increase from year to year.

When calculating your premium on renewal, we also consider how much your premium was previously, including any discounts that may have been applied. This means that we may limit movements up or down.

These same factors and others are also used to calculate your premium if you amend your coverage.

For information about how and when to pay your premium, please read the [“Paying your premium”](#) section.

Cooling off period

You have a 30 day period to ensure you're happy with every aspect of your policy.

During this time, you can contact us and cancel your policy. If we receive your request to cancel your policy within the 30 day period after the policy *commencement date* or renewal date and as long as you've not made a claim or intend to make a claim, we'll give you a refund of any monies received since that date. We may also deduct any taxes or duties that we're unable to refund.

If you've made a claim during the cooling off period and wish to cancel your policy, then any refund will be in accordance with provisions set out in the [“Cancellation by you”](#) section.

After the cooling off period ends, you'll still be able to cancel your policy and you have rights upon cancellation in certain circumstances under the policy. See the [“Cancellation by you”](#) section for more information.

Your privacy

Renewals of Petinsurance.com.au policies first issued before 7 November 2023

Hollard, PIPL and PetSure (each a 'Recipient' and referred to as 'we', 'us' or 'our' in this Privacy section) are subject to the Australian Privacy Principles under the *Privacy Act 1988* (Cth).

All other Petinsurance.com.au policies

PIPL and PetSure (each a 'Recipient' and referred to as 'we', 'us' or 'our' in this Privacy section) are subject to the Australian Privacy Principles under the *Privacy Act 1988* (Cth).

In connection with each Recipient:

- personal information is collected in various ways, including via telephone, our website, hard copy forms or email. Whenever you deal with us we will collect this information directly from you unless it is unreasonable or impracticable for us to do so. In some instances we may collect your information from someone else. This may include our authorised representatives, our distributors or referrers, agents or related entities, veterinary service providers, another party involved in a claim, family members, anyone you have authorised to deal with us on your behalf, and/or our legal or other advisers;
- personal information is collected that is reasonably necessary in order for us to provide and offer you our products and services, or otherwise as permitted by law. Such purposes include responding to your enquiries, providing you with assistance you request of us, maintaining and administering our products and services (for example processing requests for quotes, applications for insurance, underwriting and pricing policies, issuing you with a policy, managing claims, processing payments, providing you with access to our GapOnly® claims system), processing your survey or questionnaire responses, market research and the collection of general statistical information using common internet technologies such as cookies, providing you with marketing communications which relate to our other products and services as well as those of third parties such as our related entities and other entities with whom we have relationships (unless you opt-out of receiving such communications), quality assurance and training purposes, performing administrative operations (including accounting and risk management) and any other purpose identified at the time of collecting your information;

- if you do not consent to us collecting and using, or disclosing all or some of the personal information we request, we may not be able to provide you with our products or services, such as processing your application for insurance, your claim or any payment due to you. It may also prevent us from maintaining or administering your policy or the provision of information regarding our products or services or those of any third party;
- we may collect your personal information so that we or our related entities or other third parties with whom we have a relationship can develop or offer you products and services which we believe may be of interest to you, but will not do so if you tell us not to by contacting us (our contact details are provided in this section);
- where appropriate, we will disclose your information to our related entities and third parties who provide services to us or on our behalf, including our Authorised Representatives, distributors or referrers, mailing houses and marketing companies, insurance reference bureaus, reinsurers, credit providers, external IT service providers, other insurance providers and advisers. In the case of claims (or likely claims) it may be disclosed to persons involved in the claim, veterinary service providers, external claims data collectors and verifiers. Your personal information may also be disclosed to the Australian Financial Complaints Authority (AFCA) or other dispute resolution providers, government bodies, regulators, law enforcement agencies and any other parties where required by law; and
- your personal information may also be disclosed to some of our service providers who are located overseas, including (but not limited to) the Philippines, South Africa, New Zealand, United States of America and the United Kingdom. Details of who they are may change from time to time. You can contact us for details. In a limited number of cases, we may not be able to take reasonable steps to ensure they do not breach the Privacy Act and they may not be subject to the same level of protection or obligations that are offered by the Act. In these cases only, by proceeding to acquire or continuing to acquire our services and products you agree that you cannot seek redress under the Act or against us (to the extent permitted by law) and may not be able to seek redress overseas.

You consent to the use and disclosure of your personal information as set out in this section. Your consent applies whether you become or remain the insured unless you tell us otherwise by contacting us. You can read more about how we collect, use and disclose your personal information or how to make a complaint about a breach of the Australian Privacy Principles in our Privacy Policy which is available on our website or you can request a copy.

If you wish to gain access to your personal information (including correcting or updating it), have a complaint about a breach of your privacy or have any other query relating to privacy, please contact the Privacy Officer at:

Pet Insurance Pty Ltd

Phone: 1300 855 663
Email: privacy@petinsurance.com.au
Mail: Pet Insurance Pty Ltd
Locked Bag 9021,
Castle Hill, NSW 1765
Website: www.petinsurance.com.au

PetSure

Phone: (02) 9842 4800
Email: privacy@petsure.com.au
Mail: PetSure (Australia) Pty Ltd
Locked Bag 9021, Castle Hill, NSW 1765
Website: www.petsure.com.au

Hollard (only applies to renewals of policies first issued before 7 November 2023)

Phone: (02) 9253 6600
Email: privacy@hollard.com.au
Mail: The Hollard Insurance Company Pty Ltd
Locked bag 2010, St Leonards, NSW 1590
Website: www.hollard.com.au

How to make a complaint

We hope you'll never have reason to complain, but if you do, we'll do our best to work with you to resolve it.

Our complaints resolution process has three steps. Please let us know if you require additional assistance to lodge a complaint.

1 - Immediate Response

If you have a complaint, we'll take steps to resolve it as soon as possible. We'll acknowledge your complaint within one business day of receiving it.

Please contact us by:

- Phone:** 1300 855 663
Monday to Friday 8:00AM to 8:00PM (except public holidays)
- Writing:** Customer Service Complaints
Petinsurance.com.au
Locked Bag 9021
Castle Hill, NSW 1765
- Website:** www.petinsurance.com.au

Please supply your policy number if you have one, to enable the enquiry to be dealt with promptly and by someone with appropriate authority.

2 - Internal Dispute Resolution

If we haven't resolved your matter to your satisfaction, at your request we'll escalate your complaint for review by our Internal Disputes Resolution team.

Please use the same contact information in **step 1** to make this request.

All escalated matters are acknowledged within one business day of receipt. The Internal Dispute Resolution team will review your complaint and any supporting evidence. After full consideration of the matter, a written final response will be provided to you, outlining the decision reached and the reasons for the decision.

3 - External Dispute Resolution

If your complaint is still not resolved to your satisfaction, or a final response has not been provided to you within 30 days, you can refer the matter to the Australian Financial Complaints Authority (AFCA), providing your matter is within the scope of the AFCA Rules.

AFCA is an independent dispute resolution service provided free of charge.

You can contact AFCA at:

Australian Financial Complaints Authority

Mail: GPO Box 3, Melbourne VIC 3001

Phone: 1800 931 678

Website: www.afca.org.au

Email: info@afca.org.au

Goods and Services Tax (GST)

All monetary limits in your policy are in Australian dollars and are inclusive of *GST*. In the event of a claim, if you're not registered for *GST*, we'll pay any amount due under the policy inclusive of *GST*. If you're registered for *GST*, we'll deduct your input tax credit entitlement from the claim and you'll need to claim that from the Australian Taxation Office. If you're registered as a business and have an Australian Business Number, you must advise us of your correct input tax credit percentage.

Note: You'll be liable to us for any *GST* liability we incur arising from your incorrect advice or inaction.

General Insurance Code of Practice

Hollard and PetSure are members of the Insurance Council of Australia and signatories of the General Insurance Code of Practice (the Code).

The objectives of the Code are:

- to commit us to high standards of service;
- to promote better, more informed relations between us and you;
- to maintain and promote trust and confidence in the general insurance industry;
- to provide fair and effective mechanisms for resolving complaints you make about us; and
- to promote continuous improvement of the general insurance industry through education and training.

The Code Governance Committee is an independent body that monitors and enforces compliance with the Code. The Code Governance Committee is also responsible for imposing sanctions for breaches of the Code, as well as the improvement of the Code and assisting the general insurance industry to understand and comply with the Code.

You can obtain a copy of the Code from the Insurance Council of Australia website at www.insurancecouncil.com.au.

Financial Claims Scheme

Should Hollard or PetSure be unable to meet its obligations to you under the policy, you may be entitled to a payment under the Financial Claims Scheme (**the Scheme**).

Access to the Scheme is subject to eligibility criteria. Further information about the Scheme can be obtained at www.fcs.gov.au.

Wag on over to
the next page...



FINANCIAL SERVICES GUIDE (FSG)

This Financial Services Guide, or FSG, informs you about the financial services provided by the organisations associated with Petinsurance.com.au. It also tells you how each is paid for their services, how complaints are dealt with, and how each organisation can be contacted.

In this FSG:

- **Hollard** means The Hollard Insurance Company Pty Ltd.
- **PIPL** means Pet Insurance Pty Ltd.
- **PetSure** means PetSure (Australia) Pty Ltd.
- **You**, and **your** means the applicant for a Petinsurance.com.au policy and, if a policy is issued, the person insured.

The organisations associated with this insurance product Renewals of policies first issued before 7 November 2023 - Hollard as the policy issuer

Hollard is an Australian Financial Services Licensee (AFSL 241436) authorised to provide advice and deal, as well as provide claims handling and settling services, in relation to all general insurance products. Hollard is the insurer and issuer of renewals of Petinsurance.com.au policies first issued before 7 November 2023. In providing the financial services set out in this FSG, Hollard does not provide personal advice and does not act for you.

PetSure is an Australian Financial Services Licensee (AFSL 420183) authorised to provide general advice and deal, as well as provide claims handling and settling services, in relation to all general insurance products. In providing the financial services set out in this FSG, PetSure does not provide personal advice and does not act for you.

For Hollard issued policies, PetSure has been given a binding authority by Hollard which authorises it to enter into, vary and cancel policies on behalf of Hollard as well as manage, administer and settle claims as if it were Hollard, subject to the limits of authority agreed with Hollard.

PIPL is an Authorised Representative (Number 1234944) of PetSure and is authorised to deal in and provide general advice on behalf of PetSure regarding certain general insurance products issued by Hollard, including Petinsurance.com.au policies.

PIPL promotes and arranges Petinsurance.com.au policies and is paid a commission and other benefits for doing so. Petinsurance.com.au policies are arranged on behalf of Hollard. When you apply for a Petinsurance.com.au policy, PIPL will tell you about the product and collect certain information from you that will be used by PetSure to determine, on behalf of Hollard, whether a Petinsurance.com.au policy can be issued to you by Hollard. PIPL does not act for you and does not provide personal advice about Petinsurance.com.au policies.

As the insurer and issuer of Petinsurance.com.au policies, only Hollard can issue, vary and cancel those policies through an arrangement with PetSure, as explained above. If you have purchased your Petinsurance.com.au policy via one of our distribution partners (unless they are a referrer only), the separate Financial Services Guide for that distribution partner also sets out their details.

All other policies - PetSure as the policy issuer

PetSure is an Australian Financial Services Licensee (AFSL 420183) authorised to provide general advice and deal, as well as provide claims handling and settling services, in relation to all general insurance products. PetSure is the insurer and issuer of Petinsurance.com.au policies entered into for the first time from 7 November 2023. In providing the financial services set out in this FSG, PetSure does not provide personal advice and does not act for you.

PIPL is an Authorised Representative (Number 1234944) of PetSure and is authorised to deal in and provide general advice on behalf of PetSure regarding certain general insurance products issued by PetSure, including Petinsurance.com.au policies.

PIPL promotes and arranges Petinsurance.com.au policies and is paid a commission and other benefits for doing so. Petinsurance.com.au policies are arranged on behalf of PetSure. When you apply for a Petinsurance.com.au policy, PIPL will tell you about the product and collect certain information from you that will be used by PetSure to determine, whether a Petinsurance.com.au policy can be issued to you by PetSure. PIPL does not act for you and does not provide personal advice about Petinsurance.com.au policies.

As the insurer and issuer of Petinsurance.com.au policies, only PetSure can issue, vary and cancel those policies.

If you have purchased your Petinsurance.com.au policy via one of our distribution partners (unless they are a referrer only), the separate Financial Services Guide for that distribution partner also sets out their details.

How we're paid for our services

When you purchase a Petinsurance.com.au policy you pay the premium to the policy issuer for the product.

PIPL may receive a commission of up to 20% of the net premium (this is the premium less any government taxes and charges) for promoting Petinsurance.com.au policies. This commission is used by PIPL to cover costs associated with the marketing and distribution of this product to you and may include any referral fees to people or organisations that refer new customers to PIPL.

In addition, our distribution partners may also receive a commission of the net premium (this is the premium less any government taxes and charges for promoting Petinsurance.com.au policies). If you have purchased your Petinsurance.com.au policy via one of our distribution partners (unless they are a referrer only), the separate Financial Services Guide for that distribution partner sets out these details.

For Hollard issued policies, PetSure receives from Hollard (the policy issuer) a portion of the underwriting profit, if any, for administering Petinsurance.com.au policies.

You can request more details about remuneration or other benefits from the relevant entity providing the relevant financial service. However, the request must be made within a reasonable time after you've been given this booklet and before the relevant financial service has been provided to you by them.

Our "[Contact details](#)" are on the last page of this booklet.

Our compensation arrangements

The *Corporations Act 2001* (Cth) requires Australian financial services licensees to have arrangements for compensating retail clients for losses they suffer as a result of a breach by the licensee or its representatives of Chapter 7 of that Act, unless an exemption applies. Those arrangements include a requirement that the licensee hold professional indemnity insurance cover.

As insurers, both Hollard and PetSure are exempt from this requirement because they are insurance companies supervised by the Australian Prudential Regulation Authority (**APRA**) and are subject to the prudential requirements under insurance legislation regulated by APRA.

In accordance with section 912B of the Corporations Act, PIPL has Professional Indemnity Insurance in place which extends to claims in relation to it acting as an authorised representative of PetSure and if its employees or representatives, past or present, are negligent in providing financial services on behalf of PetSure.

Conflicts of interest

We take any potential and actual conflicts of interest seriously and have a conflict of interest policy. Conflicts of interest are circumstances where some or all of your interests are or may be inconsistent with or diverge from some or all of our interests.

We manage conflicts of interest through controls, disclosure, and avoidance. We also provide training to our employees to identify conflicts of interest and encourage the early reporting of potential conflicts of interests.

Giving us instructions

You can instruct us by post, phone or email. Our [“Contact details”](#) are on the last page of this booklet.

Your privacy

Refer to the [“Your privacy”](#) section of the PDS for further information on what we do with your information.

How to make a complaint

Refer to the [“How to make a complaint”](#) section in the PDS for further information on how complaints are dealt with.

Authorised for issue

This FSG was prepared by Hollard, PIPL and PetSure (as it relates to the financial services provided by each of them) on 12 March 2024. PetSure has authorised distribution of this FSG by PIPL.

DEFINITIONS OF IMPORTANT TERMS

This section contains the definitions of important insurance terms we talk about in this booklet. Words that are italicised in this booklet have the special meaning explained in this section.

Benefit limit and Sub-limit(s) means as follows:

Benefit limit means the applicable maximum amount payable by us in any one *policy period*, for your cover.

Sub-limit(s) means the applicable maximum amount(s) payable by us in any one *policy period*, for particular items, *treatments* or *conditions* that you have cover for.

The amounts of your *benefit limit* and *sub-limit(s)*, together with particular items subject to *sub-limit(s)* are specified on your *certificate of insurance*.

Also note:

- we'll never pay more than the overall annual *benefit limit* or *sub-limit* specified on your *certificate of insurance*. This means that if a *sub-limit* applies for a particular item of *cover, condition* or *treatment*, we won't pay more than that amount, either on an individual or per claim basis for that item. This is also subject to the overall *benefit limit* or other relevant *sub-limit* not having been exceeded.
- the *benefit limit* and *sub-limits* are reset when you renew your policy. This means that policy benefits don't accumulate across *policy periods*. They expire at the end of each *policy period*.
- the *benefit limit* and *sub-limits* are also subject to the excess (if any) applicable to your cover.

Benefit percentage means the stated percentage of each claim for eligible *vet expenses* and eligible costs for covered items which we reimburse, subject to the applicable *benefit limit* or *sub-limit* and *excesses*. The applicable *benefit percentage* will be shown on your *certificate of insurance*.

Note: The *benefit percentage* does not apply to *routine care* items.

Bilateral condition means any *condition* affecting body parts on each side of your *pet's* body, e.g. ears, eyes, knees or elbows.

A *bilateral condition* is considered a single *condition* when applying a *benefit limit*, *sub-limit*, *excess* (if any) or exclusion.

Example 1: if your *pet* displays signs or symptoms of a *cruciate ligament condition* in the left knee prior to the *commencement date* of the *first policy period* or during the applicable *waiting period*, and this falls within the definition of a *pre-existing condition*, a subsequent *cruciate ligament condition* in the right knee will still be considered a *pre-existing condition*.

Example 2: if your *pet* suffers from a *cruciate ligament condition* in its left hind leg and patella luxation in its right hind leg, this is not a *bilateral condition*. *Cruciate ligament conditions* and patella luxation aren't the same *condition*.

Certificate of insurance is the certificate we provide you that outlines the key details of the contract of insurance between you and us. It includes the policy number, *cover*, *excess* (if any), *commencement date*, *end date*, insured *pet* details, and the schedule of benefits, including *benefit limits*, *sub-limits* and *dental illness limit* (if applicable).

Note: A *certificate of insurance* is issued to you when we accept your application for *cover*, on each renewal, and whenever your policy is amended.

Chronic condition means a long-lasting *condition* which is recurring or present in your *pet* over a period greater than three months in total, however the three-month period need not be consecutive. *Chronic conditions* may also be intermittent or managed with medication and/or prescription diets with intervals of remission.

Examples include (but aren't limited to): chronic or seasonal allergies, inflammatory bowel disease, diabetes, osteoarthritis, cancer and some autoimmune diseases.

If a *chronic condition* is a *pre-existing condition*, it will always be excluded from cover. That means, it will never be considered a *temporary condition*.

Commencement date unless otherwise specified, is the date when cover for your *pet* started in the current *policy period* as shown on your *certificate of insurance*. The start time is 11:59PM on that date.

Note: Also see the *first policy period* definition for *commencement date of first policy period*.

Condition means a condition resulting from an accidental injury or manifestation of an illness.

Note: Only *conditions* that are *specified accidental injuries*, *specified illnesses* and/or *specified dental conditions* (where covered under the *dental illness benefit*) are eligible for cover under your policy.

Consultation and other derivations means an examination performed by or under the supervision of a *vet*, including a physical consultation, inpatient examination, in-hospital examination, health certificate, consultation or recheck consultation/visit, referral/specialist consultation/visits, phone consultation, web consultation and emergency and after-hours consultations/visits.

Note: Any applicable *sub-limit* will be shown on your *certificate of insurance*.

Cover means:

- the *benefit limit*, *sub-limits*, *excess* (if any), *benefit percentage* and any other optional or additional benefits (including their limits) applicable to your selected policy; and
- the cover applicable under your policy for your selected plan and any previous policies you've held with us where the same or a substantially similar or a higher level of cover was provided in the current *policy period*, without any break or time without holding the cover.

Note: Your *certificate of insurance* tells you which plan you have. The *cover* for your plan comprises of *specified accidental injury cover*, *specified illness cover*, additional benefits and any selected optional benefits.

Cruciate ligament condition means partial or complete rupture of the cruciate ligament(s). This includes meniscal tears, any looseness of the cruciate ligaments, along with any complications following *treatment* for this *condition*.

Dental illness benefit means the dental illness benefit described in the [“Additional and optional benefits”](#) section which provides benefits, up to the *dental illness limit*, for eligible *vet expenses* incurred in relation to *specified dental conditions*.

Dental illness limit means the dental illness limit amount specified on your *certificate of insurance* which is additional to your policy's *benefit limit*.

If you have the *dental illness benefit*, also note:

- we'll never pay more than the *dental illness limit* specified on your *certificate of insurance*.
- the *dental illness limit* resets if you renew your policy. This means that policy benefits for the *dental illness benefit* don't accumulate across *policy periods*. They expire at the end of each *policy period*.
- the *dental illness limit* is also subject to the excess (if any) applicable to your *cover*.

Elective treatment means a *treatment* or surgery that is beneficial to your *pet* but is not essential for your *pet's* survival and doesn't form part of the *treatment* for a covered *condition*.

End date is the date when your policy terminates. No further benefits or entitlements can be paid under the policy for *vet expenses* or other claims expenses incurred after the *end date*. The end time is 11:59PM on that date.

Unless otherwise specified, this relates to the *end date* of your current *policy period*.

The *end date* is shown on your *certificate of insurance*. If the policy is cancelled, then the date of cancellation will be deemed to be the *end date*.

Excess means an amount you contribute towards the cost of your claim(s), as shown on your *certificate of insurance*. The excess is calculated on a 'per condition, per policy period' basis. We do this for each *condition* treated that is unrelated to any other *condition* during the same *policy period*. Your excess also applies to each emergency boarding claim event. The excess will be deducted from your calculated claim benefits after we apply any *benefit limit*, *sub-limit* and the *benefit percentage* to your claimed amount.

Refer to the [“Making a claim”](#) section for an example of how claim payments are calculated.

First policy period means the time during which we first provided cover to you for your *pet*. For clarity, the *commencement date* of your *first policy period* is 11:59PM on the date when cover for your *pet* first started.

GST means the Australian Goods and Services Tax at the officially published tax rate.

Hip joint surgery means surgery of the coxofemoral joint or pelvis, and the associated soft tissue structures for *treatment* of a *condition* affecting the hip. This includes the diagnostics necessary to plan the surgery, preoperative care, surgery, postoperative care and any complications that arise from the *hip joint surgery*.

Pet means the dog or cat covered under the policy and named on your *certificate of insurance*.

Policy period means the time during which we provide cover as specified on your *certificate of insurance*.

Note: Unless otherwise specified, this relates to your current *policy period*.

Pre-existing condition means a *condition* that first existed or occurred:

- prior to the *commencement date* of the *first policy period*; or
- within any applicable *waiting period*; AND
- of which you were aware of, or a reasonable person in your circumstances would have been aware, irrespective of whether the underlying or causative *condition* has been diagnosed.

A *pre-existing condition* also includes a *related condition* or *bilateral condition* of a *pre-existing condition*.

Related condition means a *condition* that results from the same disease process, arises as a consequence of or has the same diagnostic classification as another *condition*, regardless of the number of areas of your *pet's* body that are affected.

Examples

- if your *pet* suffers from IVDD on its thoracic region, all future occurrences of IVDD, e.g. in the lumbar region, will be *related conditions*.
- if your *pet* suffers from anaphylaxis from a bee sting, all future occurrences of anaphylaxis from bee stings will then be *related conditions*.
- if your *pet* suffers from a heatstroke, then later suffers from thermal burns from a hot water spill, these aren't *related conditions*, as the thermal burns are not as a consequence of the heatstroke, nor do they follow the same disease process or diagnostic classification.

Routine care means certain pet care items for your *pet* listed on your *certificate of insurance* which are non-insurance benefits. If you have these benefits, the list of allowable items and the maximum amount payable during the *policy period*, are shown on your *certificate of insurance*.

Specified accidental injury means physical harm or injury arising from at least one of the following:

- a motor vehicle incident;
- a burn or electrocution;
- a reaction to a bite from an insect, spider or scorpion (excluding fleas);
- a near drowning incident;

OR

the *specified accidental injury* must be one of the following:

- a bone fracture;
- a traumatic tooth fracture;
- snake bite toxicity;
- poisoning;
- ingestion of a foreign object;
- a traumatic ligament or tendon injury;
- a bite wound or fight wound abscesses;
- lacerations or abrasion of tissue, skin or mucous membrane due to external trauma; or
- a *cruciate ligament condition*.

Note: We define an accident as a single unexpected event that is unintended by you and is independent of any illness or *specified dental condition*. For more information, see the [“Specified accidental injury cover”](#) section.

Specified dental condition means a *specified condition* listed in the [“Dental illness benefit”](#) section.

Specified illness means the following *specified illnesses* that are a consequence of or result in one of the following:

- tick paralysis;
- heat stroke;
- gastric dilatation-volvulus (GDV);
- trauma induced respiratory impairment (for example, if your *pet* chokes or experiences near drowning);
- intervertebral disc disease (IVDD) or a traumatic spinal disc rupture;
- torn nail;
- embedded grass seed;
- soft tissue injury; or
- eye trauma.

Temporary condition means a *condition* that normally resolves with *treatment*, but does not include:

- *cruciate ligament conditions*;
- intervertebral disc disease; and
- any *chronic condition*.

Note: This definition is relevant to determining whether a *condition* is no longer excluded as a *pre-existing condition*. See the [“Pre-existing conditions”](#) section under General exclusions.

Example: Your *pet* suffers from kidney damage due to an incidence of heat stroke prior to the *commencement date* of your *first policy period*. This resolves with intravenous fluids. Your *pet* does not suffer any further complications until two years later, when it suffers kidney failure which is a result of that episode of heat stroke. This *condition* would be a *temporary condition* that has not existed, occurred or shown noticeable signs, symptoms or an abnormality in the 18-month period immediately prior to the kidney failure being suffered. In this case, heat stroke would not be a *pre-existing condition* and therefore would be covered, subject to your policy terms and conditions.

Treatment means reasonable and customary treatment including hospitalisation, surgery, x-rays, medication, diagnostic tests, nursing and other care and procedures including *consultations* provided by a *vet* to relieve or cure a *specified accidental injury, specified illness or specified dental condition* (where covered) during the *policy period*.

Vet means any veterinarian, veterinary specialist, animal hospital, animal clinic, or animal surgery, other than yourself, who is licensed in and currently registered in Australia.

Vet expenses means the reasonable and essential expenses incurred in respect of *treatment* provided by a *vet* during the *policy period*, considering the circumstances in which the *treatment* was provided.

Waiting period means the period that your *pet* is not covered as specified in the Waiting periods section of this booklet, and starts from the *commencement date* of your *first policy period* in which you obtained cover for the applicable *condition* or benefit.

Note: For more information, see the [“Waiting periods”](#) section.

CONTACT DETAILS

Petinsurance.com.au

General enquiries, pre-approvals, etc.

Phone: 1300 855 663
Monday to Friday 8:00AM to 8:00PM
(except public holidays)

Email: petinsurance@petsure.com.au

Mail: Petinsurance.com.au
Locked Bag 9021, Castle Hill, NSW 1765

Website: www.petinsurance.com.au

Privacy enquiries

Phone: 1300 855 663
Monday to Friday 8:00AM to 8:00PM
(except public holidays)

Email: privacy@petinsurance.com.au

Mail: Petinsurance.com.au
Locked Bag 9021, Castle Hill, NSW 1765

Website: www.petinsurance.com.au

Complaints

Phone: 1300 855 663
Monday to Friday 8:00AM to 8:00PM
(except public holidays)

Mail: Customer Service Complaints
Petinsurance.com.au
Locked Bag 9021, Castle Hill, NSW 1765

Website: www.petinsurance.com.au

PetSure

Privacy enquiries

Phone: (02) 9842 4800

Email: privacy@petsure.com.au

Mail: PetSure (Australia) Pty Ltd
Locked Bag 9021, Castle Hill, NSW 1765

Website: www.petsure.com.au

Hollard (for renewing policies first issued before 7 November 2023)

Privacy enquiries

Phone: (02) 9253 6600

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