

trupanion®



TRU DEVOTION

800.569.7913 TRUPANION.COM

PET HEALTH INSURANCE POLICY

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Underwritten by American Pet Insurance Company (USA) and Omega General Insurance Company (Canada)

POLICY INDEX



1. INSURING AGREEMENT	3
a. WE COVER	
b. MONTHLY PREMIUM	
c. CHANGES TO YOUR PREMIUM	
d. POLICYHOLDER - INITIATED CHANGES	
2. INSURED PET AND POLICY BENEFITS	4
3. ELIGIBLE CLAIMS - WHAT YOU PAY	5
4. CLAIMS PROCESS	5
5. GENERAL CONDITIONS	6
6. THINGS YOU MUST DO	7
7. WHAT WE DO NOT COVER	8
a. WAITING PERIODS	
b. CONDITIONS NOT COVERED	
c. PREVENTIVE CARE	
d. DENTAL	
e. OTHER EXCLUSIONS	
8. STIPULATIONS	10
9. DEFINITIONS	11
10. NOTICE	13

This policy contains various exclusions and stipulations, which restrict coverage. Please read it carefully.

1. INSURING AGREEMENT

We provide the insurance described in this policy in return for payment of the premium and in reliance upon the statements **you** made in the application, and subject to the terms and **conditions** set forth in the policy.

- a. **WE COVER:** the **actual cost of veterinary treatment** if **your pet** develops an **illness** or has an **accident**, with no claim payment limits per year or per claim throughout the lifetime of **your pet**.
- b. **MONTHLY PREMIUM:** **Your** monthly premium is found on the Declarations Page. The premium amount is determined by the following enrollment factors:
 - (1) Age at enrollment;
 - (2) Breed;
 - (3) Gender;
 - (4) Local cost of veterinary care, (i.e., by postal/zip code);
 - (5) Therapeutic **pet** food discount, as applicable;
 - (6) **Deductible** choice;
 - (7) Working **pet** activities;
 - (8) Rider A choice; and
 - (9) Rider B choice.
- c. **CHANGES TO YOUR PREMIUM:** **Your** premium will not change due to your pet aging or **your pet's** individual claims experience. However, **your** monthly premium may change (up or down) during the life of the policy as a result of changes in the overall cost of veterinary care for your enrollment factors. Such changes will never occur more than once per year and will not exceed 20%. If **your** premium changes, **we** will notify **you** in writing, by regular mail or by email (to the last addresses made known to **us**), at least 30 days before your change is to take effect.
- d. **POLICYHOLDER-INITIATED CHANGES TO COVERAGE:** If, at any time after initial enrollment, you elect to enhance **coverage** by decreasing **your deductible** and/or by adding a Rider, waiting periods will apply from the date of enhancement.

2. INSURED PET AND POLICY BENEFITS

- a. **INSURED PET:** We insure the **pet** described on the Declarations Page for the cost of **veterinary treatment**.
- b. Working pet activities - For this **coverage** to apply, **you** must specify at the time of enrollment which of the following working activities applies to **your pet**. An additional premium may apply:
- (1) Service and therapy cats and dogs;
 - (2) Law enforcement dogs;
 - (3) Search and rescue dogs;
 - (4) Herding, hunting and sled dogs;
 - (5) Guard dogs; and
 - (6) Breeding cats and dogs (breeding, whelping, and queening).
- c. The following optional benefits (Rider A) are available, subject to an additional premium. **You** must choose and pay for Rider A for **coverage** to apply:
- (1) Acupuncture,
 - (2) Behavioral modification,
 - (3) Bone marrow transplants,
 - (4) Chiropractic,
 - (5) Colloidal silver treatment,
 - (6) Gold seed therapy (gamma knife),
 - (7) Herbal therapy,
 - (8) Homeopathy,
 - (9) Hydrotherapy,
 - (10) Hyperbaric oxygen therapy,
 - (11) Kidney transplants,
 - (12) Naturopathy,
 - (13) Physical therapy (rehabilitative therapy),
 - (14) Platelet rich plasma injection,
 - (15) Polyethylene glycol **medication**,
 - (16) Shock-wave therapy, and
 - (17) Stem cell therapy.
- d. The following optional benefits (Rider B) are available, subject to an additional premium. **You** must choose and pay for Rider B for **coverage** to apply:
- (1) Liability **coverage** for third-party property damage;
 - (2) Advertising and reward;
 - (3) Boarding fees;
 - (4) Holiday vacation cancellation costs; and
 - (5) Cremation or burial

All benefits are subject to the terms and **conditions** of this policy. **Coverage** is in effect at the time and date shown on the Declarations Page, subject to the waiting periods.

3. ELIGIBLE CLAIMS - WHAT YOU PAY

- a. **Veterinary Examination Fees;**
- b. **Deductible** (if you choose to have one);
- c. **10% Co-Insurance;**
- d. Federal/State/Provincial/Local taxes; and
- e. Costs not covered by this policy.

4. CLAIM PROCESS

- a. **You** must submit a fully completed claim form and supporting invoice(s) within 90 days of the treatment date. **You** can download a claim form from the member portal on **our** website at www.trupanion.com, or **you** may contact **our** call center at 1-800-569-7913 and **we** will mail, e-mail, or fax one to **you**.
- b. The complete medical history/records associated with **your pet** are required to process any claim. **You** agree to provide to **us** all medical history/records associated with **your pet**. **You** authorize **us**, at the time of enrollment, to contact any and all veterinary clinics or hospitals in **your** area to obtain all available medical records that exist for **your pet**. **You** authorize any and all veterinary clinics or hospitals to release to **us** all medical records that may exist for your **pet**. Failure or refusal to disclose a complete medical history for your **pet** when requested may result in the denial of **your** claim(s) and the voiding of **your** policy. If **your** policy is voided, the policy premium paid will be refunded to **you**.
- c. In the event of a disagreement between **you** and **us** concerning the **coverage** of a claim, **you** may request a review of Trupanion's denial pursuant to **our** voluntary denied claims review process. If Trupanion affirms denial of **your** claim, **you** may further request that your claim be reviewed by an independent third-party **veterinarian** ("**ITPV**") to adjudicate whether the medical reasoning for denial is justified. The **ITPV's** decision shall be final and binding on Trupanion.
- d. **Your** claim is payable within 60 days after submission of a completed claim form and supporting documentation, unless state or provincial law provides for a shorter period.
- e. You may have **your** claims paid directly to the treating **veterinarian** if an arrangement to do so exists between Trupanion and the treating **veterinarian**.

5. GENERAL CONDITIONS

- a. Premiums are payable monthly. This policy is continued until cancelled, and will renew automatically each month as long as premium payments are current. If premiums are unpaid, **we** may cancel this policy by sending a notice of cancellation to **you** at **your** last known address at least 20 days before the effective date of cancellation.
- b. **You** may cancel **your** policy by notifying **us** in writing via mail, fax or email.
- c. If **you** cancel **your** policy for any reason within the first 30 days, and **you** have not submitted a claim within that period, **you** will receive 100% of **your** money back.
- d. Insurance fraud unfairly increases premiums for all policyholders. Thus, if **you** provide **us** with false information, or make a false, exaggerated, or otherwise dishonest claim with **us**, **we** may not pay your claim, **we** may void **your** policy and **we** may inform the authorities.
- e. **You** must be the owner of the insured **pet**. If the **pet** owner dies, becomes unable to care for the insured **pet**, or transfers the ownership of the insured **pet**, **we** are happy to arrange continued **coverage** if we are contacted within 30 days.
- f. A **pet** is covered under this policy only while the **pet** is in the United States of America, Puerto Rico or Canada.
- g. This **coverage** is not transferable to other **pets**.
- h. **Conditions** arising from repeated activity may be excluded by **us** if **you** have been notified in writing that claims arising from that activity will no longer be covered. If there is a repeated activity that is to be excluded from **your** policy, **we** will notify **you** in writing, by regular mail or by email (to the last addresses made known to **us**), at least 30 days before the change is to take effect.
- i. **We** will not make payments for claims for which **you** are entitled to indemnity under any other insurance, except for:
 - (1) Any additional sum which is payable over and above such other insurance;
 - (2) Any contribution that **we** are obliged to make by law;
- j. Qualifications – all **veterinary treatment** must be endorsed and provided by a **veterinarian** with the necessary training and experience, or staff under the **veterinarian's** direct supervision.
- k. When this policy's provisions are in conflict with the statutes of the state or province in which this policy is issued, the provisions are amended to conform to such statutes.
- l. Entire contract – This policy, the declaration page, and any attached endorsement(s) contain all the agreements between **you** and **us**.

6. THINGS YOU MUST DO

We care about and promote responsible **pet** ownership, and require **you** to do and pay for the following:

- a. You must act prudently in the care and protection of **your pet**. You must protect the **pet** from aggravation and/or recurrence of any injury and/or **illness** after its initial occurrence and provide proper maintenance/preventive care.
- b. **Your pet** must have an annual dental **examination** and, if recommended, prophylaxis (defined as ultrasonic scaling and polishing of the teeth). **You** must follow **your veterinarian's** advice about dental care and treatment. Subject to the terms and **conditions** of this policy, **we** will pay dental claims if **you** comply with these requirements.
- c. **You** must keep **your pet** vaccinated against the following:
 - (1) Dogs – Distemper, hepatitis, parainfluenza, parvovirus, rabies and any other **condition** for which **vaccination** has been recommended by **your** vet.
 - (2) Cats - Panleukopenia, rhinotracheitis, calici virus, rabies and any other **condition** for which **vaccination** has been recommended by **your** vet.

We will not pay claims for **illnesses** resulting from failure to comply with the **vaccination** guidelines described above, or other diseases that are preventable by vaccines, unless otherwise advised by **your veterinarian**.
- d. You must arrange for **your pet** to be neutered or spayed prior to its first birthday. If **you** do not comply, no **coverage** shall apply for **illness** related to prostate problems, hormonal skin **conditions**, perianal hernias, testicular tumors, perianal tumors, mammary tumors, uterine and ovarian conditions, birthing, or injury due to fighting, collision with a motor vehicle, or aggressive behavior. This stipulation does not apply to **pets** where the timing of being spayed or neutered was in conjunction with their **veterinarian's** medical recommendations, or to **pets** spayed or neutered within 60 days of being adopted.
- e. Appropriate prophylactic **medication** as prescribed and dispensed by **your veterinarian** to protect against **illness**, including but not limited to lice, parasites, and fleas. **We** will not pay claims for **illnesses** or injuries as a result of **your** failure to comply with this requirement; and
- f. Appropriate prophylactic **medication** and/or **vaccination** as prescribed and dispensed by **your veterinarian** to protect against tick-borne **illnesses**. **We** will not pay claims for **illnesses** or injuries as a result of **your** failure to comply with this requirement.

7. WHAT WE DO NOT COVER

a. WAITING PERIODS

- (1) **Illnesses** that occur or recur within the first 30 days from the **policy enrollment date** (or from a policy enhancement date); or
- (2) Injuries from an **accident** that occurs within the first 5 days from the **policy enrollment date** (or from a policy enhancement date).

b. CONDITIONS NOT COVERED

- (1) **Illnesses** for which any evidence and/or symptoms of their potential manifestation already exist at, or prior to, the **policy enrollment date**;
- (2) The cost of treatment for bilateral **conditions** presenting on one side of the body, if that **condition** was a pre-existing condition on the other side of the body (such as luxating patella or anterior cruciate ligament (ACL) weakness);
- (3) **Conditions** arising from a repetitive and specific activity that leads to decontamination (i.e., the induction of vomiting, stomach pumping, or treatment with charcoal), medical, or surgical treatment of **your pet**, if the same or a similar activity has occurred two times within the 18-month period prior to the **policy enrollment date**.
- (4) Abnormalities that are present at, or during the 18 months prior to, the **policy enrollment date** (even if they have not been previously detected and/or documented by a **veterinarian**). These include signs, symptoms or **conditions** which are:
 - a. observable by, or reasonably known to be present by, the **pet** owner;
 - b. detectable by a routine physical exam by **your veterinarian**;
 - c. those which have been noted from diagnostic testing, screening or radiographs.

c. PREVENTIVE CARE - Preventive care such as, but not limited to, **vaccinations** or titer test, flea control, tick control, heartworm **medication**, dental care and prophylaxis (meaning cleansing of tooth surfaces), deworming, nail trim, or other grooming.

d. DENTAL - **Coverage** for the cost of scaling, cleaning and polishing the teeth at any time, and for any reason.

e. OTHER EXCLUSIONS

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

- (1) Veterinary **examinations**;
- (2) Injuries due to any intentional act, including organized dog fighting, by **you** or a member of **your** household;
- (3) Elective, cosmetic, or preventive procedures, including but not limited to tail docking, ear cropping, declawing, dew claw removal, and ear cleaning;

- (4) Boarding or transport expenses;
- (5) Complications of **conditions** excluded or restricted by this policy;
- (6) Anal gland expression. However, the cost to surgically remove the anal glands is eligible for **coverage**;
- (7) Feeding, housing, exercise, special diets, **pet** foods, routine or preventive supplements, grooming, nail trims, shampoo and bathing (including medicated baths);
- (8) **Diagnostic tests** for **conditions** or procedures excluded by this policy and/or due to complications of **conditions** excluded or restricted by this policy;
- (9) Any claim for loss arising from a nuclear reaction, radiation, radioactive contamination or the discharge of nuclear device, whether controlled or uncontrolled, **accidental** or otherwise;
- (10) Any claim for loss arising from a chemical, biological, biochemical or electromagnetic weapon, device, agent or material, whether controlled or uncontrolled, **accidental** or otherwise;
- (11) Any claim for loss arising from war, invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolution, insurrection, strikes, riots, or civil commotion;
- (12) Any **condition** resulting from activities related to training for or participating in track racing or sled racing; or
- (13) Raw food diets.

8. STIPULATIONS

- a. Supplements – **We** cover dietary supplements, including vitamins and nutraceuticals, manufactured and labeled with ingredient analysis, which are dispensed by **your veterinarian** in the treatment of injuries and symptomatic **illnesses** covered by this policy and not for routine or preventive care.
- b. Therapeutic **Pet** Food – **We** cover 50% of the cost of therapeutic **pet** food when recommended and dispensed by **your veterinarian** in the treatment of injuries or **illnesses** covered by this policy for up to two months of feeding. If **you** continue to feed **your pet** the food as a long-term replacement diet, **you** will be eligible for a discount to **your** monthly premium. This **coverage** is not for routine/preventive care.
- c. Dental – **We** will pay for endodontic treatment due to dental disease or trauma for canine and carnassial teeth. If endodontic treatment is performed on any other teeth, **we** will pay for the cost of extraction.

SAMPLE

9. DEFINITIONS

These words that are used throughout the policy have the following special meanings:

- a. **ACCIDENT** – An event causing injury to the **pet**, when such injury is neither expected nor intended by **you**.
- b. **ACTUAL COST OF VETERINARY TREATMENT** – The standard fees/costs a **veterinarian** would charge, regardless of whether that customer has insurance **coverage**.
- c. **CO-INSURANCE** – **Your** portion of the cost of insured **veterinary treatment**. **Your co-insurance** amount is 10% and is shown on the Declarations Page as the “Owner” portion.
- d. **CONDITION** – Any manifestations of clinical symptoms consistent with a diagnosis or diagnoses, regardless of the number of incidents or areas of the body affected.
- e. **COVERAGE** – The insurance protection described in this policy form and on the Declarations Page.
- f. **DEDUCTIBLE** – The monetary amount that **you** pay for each condition. Once the **deductible** amount has been met for a specific **condition**, the policy will then pay out all future losses subject to all other terms and **conditions**.
- g. **DIAGNOSTIC TESTS** – Tests used to determine the overall health of **your pet**. **Diagnostic tests** can be used as a way to detect certain abnormalities, validate the current health of **your pet** or help to thoroughly evaluate an older **pet** before problems surface.
- h. **EXAMINATION** – A thorough **examination**, encompassing all body systems, performed by a licensed **veterinarian**. Also referred to as “full physical,” “physical consultation,” “full **examination**,” or “veterinary **examination**.”
- i. **ILLNESS** – Sickness, disease, and any changes to **your pet’s** normal healthy state not caused by an **accident**.
- j. **ITPV - Independent Third Party Veterinarian** – Trupanion contracts with independent **veterinarians** who are board certified specialists/experts in the field of **your** claim. For example – a claim pertaining to cancer would be reviewed by a board certified oncologist. These doctors are selected solely on the basis of their degree of expertise and have no other relationship or affiliation with Trupanion.
- k. **MEDICATION** – legally prescribed **medication** dispensed by **your veterinarian**.

- l. **PET OR PETS** – A domestic cat or dog that is owned for companionship or as a service dog, not owned for commercial reasons. This term does not refer to hybrid breeds resulting from the breeding of domestic cats or dogs with wild breeds (e.g. wolf hybrid).
- m. **POLICY ENROLLMENT DATE** – This is the date **you** enroll **your pet** with **us**.
- n. **RACING DOG** – A dog which is owned and maintained for the purpose of competing in organized track or sled races or speed tests.
- o. **SURGERIES** – Procedures that treat diseases or injuries by operative manual and instrumental methods.
- p. **VACCINATION** – The administration of a legally approved commercial vaccine by a licensed **veterinarian**, in accordance with the manufacturer’s recommendations for prevention of disease.
- q. **VETERINARIAN** – A **veterinarian** licensed to practice in the area where **your pet** is treated or examined.
- r. **VETERINARY TREATMENT** – **Diagnostic tests, surgeries, medications, supplements, therapeutic pet food, orthotic devices, prosthetic devices, carts, nursing and care** that are proven and accepted forms of treatment.
- s. **VETERINARY EXAMINATION FEES** – Fees charged for the professional opinion of a **veterinarian**, including but not limited to consultation, **examination**, office visit, referral, and recheck fees.
- t. **WE, US, AND OUR** – Trupanion handles many of the administrative processes for this insurance on behalf of the underwriter. The terms “**We,**” “**Us,**” or “**Our**” should be interpreted in that context.
- u. **YOU AND YOUR** – The Insured/spouse/partner (**pet** owner) named in the Declarations Page.
- v. **YOUR PET** – The dog or cat named in the Declarations Page or in the schedule.



10. NOTICE

a. Any written notice to Trupanion may be delivered to us at:

United States Policyholders:

Trupanion
American Pet Insurance Company
907 NW Ballard Way
Seattle, WA 98107-4607

Canadian Policyholders:

Trupanion
Omega General
Insurance Company
PO Box 34538, 1268 Marine Drive
North Vancouver, BC V7P 1T2
Email: notice@trupanion.com
Fax: 1-866-405-4536

IN WITNESS WHEREOF, the Company has executed and attested these presents.

Darryl Rawlings, Chief Executive Officer