

**INSURER DISCLOSURE OF IMPORTANT POLICY PROVISIONS**  
***Companion Horse***  
***Accident and Colic Coverage and Accident, Colic and Illness Coverage***

Please read below for important information to help you understand our coverage. Keep in mind, we will not reduce coverage or increase premium due to claims history.

We use certain terms in our policy documents and want to make sure you understand how they are used. Following are some common **DEFINITIONS**.

**Pet Insurance-** means an individual or group insurance policy that provides coverage for Veterinary expenses.

**Pre-existing condition-** means any condition for which a veterinarian provided medical advice, the pet received treatment for, or the pet displayed signs or symptoms consistent with the stated condition prior to the effective date of a pet insurance policy or during any waiting period.

**Reimbursement Percentage-** means co-insurance.

**Veterinarian-** means an individual who holds a valid license to practice veterinary medicine from the Veterinary Medical Board pursuant to Chapter 11 (commencing with Section 4800) of Division 2 of the Business and Professions Code or other appropriate licensing entity in the jurisdiction in which he or she practices.

**Waiting Period-** means the period of time specified in a pet insurance policy that is required to transpire before some or all of the coverage in the policy can begin.

**Coverage for the following conditions will be EXCLUDED.**

**Pre-existing condition:** Pre-existing conditions are not covered by our plans. However, a condition will no longer be considered pre-existing if 180 days have passed since the pet's condition was cured and free from treatment and symptoms.

Other exclusions apply. Please refer to the exclusions section of the policy (What Is Not Covered) for more information.

**Waiting Periods**

There are WAITING PERIODS that apply before certain coverages are effective. On the Accident and Colic Coverage and Accident, Colic and Illness Coverage, a 14 day waiting period applies to the first policy period. Conditions that occur during a waiting period are considered pre-existing.

**Policy Limits**

Reimbursement of covered expenses is subject to the annual policy limit you select at enrollment and is listed on your declarations page.

**Please continue reading for information on Claims, Deductibles, Reimbursement Percentage and Deductible.**

We offer a choice of annual deductible options. The annual deductible applies to each policy period. We subtract that deductible amount from the covered expenses before calculating your reimbursement percentage.

**Reimbursement Percentage**

We offer a choice of reimbursement percentage options. After the deductible is met, you are responsible for your portion of the covered expenses in addition to any amounts not covered by the policy. We then pay our portion of the covered expenses subject to the annual limits.

**Determination of Claim Payouts**

Our coverage provides reimbursement up to the applicable annual limit for the actual costs for covered expenses that you incur during the policy period, after subtracting your deductible and applying the reimbursement percentage, listed on the declaration page.

Preventive benefits are paid according to the schedule of benefits provided with the policy, if applicable, and are not subject to a deductible or reimbursement percentage. See below for a list of available benefits.

**Preventive Care optional endorsement**

Reimbursements are up to the lower of the amount listed or charged. Some benefits are specific as noted.

<b><i>Benefits</i></b>	<b><i>Option 1</i></b>	<b><i>Option 2</i></b>	<b><i>Option 3</i></b>
Dental Floating	\$75	\$150	\$200
Wellness Exam	\$50	\$50	\$75
Vaccine WNV or EEE/WEE/VEE	\$25	\$25	\$25
Vaccine - Tetanus or Rabies	\$25	\$25	\$25
Vaccine - Herpesvirus or Strangles	N/A	N/A	\$25
Fecal Test	N/A	\$25	\$25
Coggins Test	N/A	\$25	\$25
Blood Test	N/A	N/A	\$25