United States Fire Insurance Company
1208 Massillon Rd. Suite G 200, Akron Ohio 44306, (866) 204-6764

Washington Insurer Disclosure of Important Policy Provisions

Underwriter, Producer, Brand Information

Insurance is underwritten by United States Fire Insurance Company (NAIC #21113. Morristown, NJ). The insurance underwriter is different than the brand name and the agency that markets and sells the products. Insurance plans are marketed and produced by PTZ Insurance Agency Ltd. (NPN: 5328528. domiciled in Illinois with offices at 1208 Massillon Road, Suite G200, Akron, Ohio 44306). (California residents only: PTZ Insurance Agency Ltd., d.b.a PIA Insurance Agency Ltd. CA license #0E36937. The ASPCA® is not an insurer and is not engaged in the business of insurance. Through a licensing agreement, the ASPCA receives a royalty fee that is in exchange for use of the ASPCA's marks and is not a charitable contribution.

Please read below for important information to help you understand our coverage. Your coverage starts on the effective date listed on the Declarations Page.

Right to Examine and Return

You have 15 days from the day you receive this policy, certificate, or endorsement to review it and return it to the company if you decide not to keep it. You do not have to tell the company why you are returning it. If you decide not to keep it, simply return it to the company at its administrative office or you may return it to the insurance producer that you bought it from as long as you have not filed a claim. You must return it within 15 days of the day you first received it. The company will refund the full amount of any premium paid within 30 days after it receives the returned policy, certificate, or endorsement. The premium refund will be sent directly to the person who paid it. The policy, certificate, or endorsement will be void as if it had never been issued.

Definitions

Chronic condition. "Chronic condition" means a condition that can be treated or managed, but not cured.

Congenital anomaly or disorder. "Congenital anomaly or disorder" means a condition that is present from birth, whether inherited or caused by the environment, which may cause or contribute to illness or disease.

Hereditary disorder. "Hereditary disorder" means an abnormality that is genetically transmitted from parent to offspring and may cause illness or disease.

Orthopedic. "Orthopedic" Refers to **conditions** affecting the bones, skeletal muscle, cartilage, tendons, ligaments and joints, including, but not limited to, elbow dysplasia, hip dysplasia, intervertebral disc degeneration, patellar luxation and cranial cruciate ligament ruptures but not including cancers or metabolic, hemopoietic or autoimmune diseases.

Preexisting condition. "Preexisting condition" means a condition for which any of the following are true prior to the effective date of a pet insurance policy or during any waiting period: A veterinarian provided medical advice regarding the condition;

The pet received previous treatment for the condition; or

Based on information from verifiable sources, the pet had signs or symptoms directly related to the condition for which a claim is being made.

A condition for which coverage is afforded on a policy cannot be considered a preexisting condition on any renewal of the policy.

Renewal. "Renewal" means to issue and deliver at the end of an insurance policy period a policy that supersedes a policy previously issued and delivered by the same insurer or an affiliated insurer and that provides types and limits of coverage substantially similar to those contained in the policy being superseded.

Veterinarian. "Veterinarian" means an individual who holds a valid license to practice veterinary medicine from the appropriate licensing entity in the jurisdiction in which he or she practices.

Veterinary expenses. "Veterinary expenses" means the costs associated with medical advice, diagnosis, care or treatment provided by a veterinarian, including, but not limited to, the cost of drugs prescribed by a veterinarian.

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

<u>Determination of Claim Payouts</u>

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.

Premium Increases Due to Pet Age and Geographic Location

Insurance plan premiums will increase as the covered pet gets older. Insurance plan premiums may increase or decrease due to the policyholder's geographic location. We will not reduce coverage or increase premium due to claims history.

Policy Limits

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

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.

Policy Exclusions

This policy excludes coverage for **pre-existing conditions** as defined above and in the policy. Other exclusions may apply. Please refer to the exclusions section of your policy (What is Not Covered) for more information.

Waiting Periods

There are WAITING PERIODS that apply before certain coverages are effective. For accident and illness policies, a 14 day illness coverage waiting period applies to the first policy period. Any Illness, congenital anomaly or disorder, hereditary disorder and orthopedic illness that occur during or before a waiting period are considered pre-existing and excluded from coverage.

You may elect at your cost to pursue a Waiting Period Health Assessment. If you and your pet meet the requirements of the Waiting Period Health Assessment, then the waiting period may be modified. A copy is available online or by calling customer service.

In order for us to modify the waiting period, you must meet each of the following requirements:
1. A qualifying exam of your pet by a veterinarian that includes an assessment of all body systems and parts;
2. results of the exam need to be documented at the time of exam on our completed Waiting Period Health Assessment Form;
3. the qualifying exam may occur within 3 days prior to or 7 days after your initial policy effective date; and
4. the Waiting Period Health Assessment form must be provided to us within 30 calendar days of your qualifying exam.

If the Waiting Period Health Assessment requirements are met, the waiting period will be waived to either the policy period effective date or the day after the qualifying exam, whichever is later. This waiver does not alter the pre-existing conditions exclusion.

Preventive Care optional endorsement

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

Benefit	***Basic***	***Prime***
Dental Cleaning	$100	$0
Dental Cleaning OR Spay/ Neuter	$0	$150
Wellness Exam	$50	$50
FVRCP Vaccine/ Titer (cats) DHLPP Vaccine/ Titer (dogs)	$20	$25
Rabies Vaccine/ Titer OR FIP Vaccine/ Titer (cats), Lyme Vaccine/ Titer (dogs)	$20	$25
Fecal Test	$20	$25
FELV Test (cats) Heartworm Test (dogs)	$20	$25
Deworming	$20	$25
Health Certificate	$0	$25
Flea/ Heartworm Prevention	$0	$25
FELV Vaccine/ Titer (cats) Bordetella Vaccine/ Titer (dogs)	$0	$25
Blood Test	$0	$25
Urinalysis	$0	$25