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1. Your Insurance Policy- Overview

Your Summary of Coverage page contains all of the important details about your policy, including your annual limits for coverage, your policy start date and renewal date, your premium, your deductible and **your share**. It also displays any **exclusions** or sublimits that exist on your policy. On this page, we list your pet's details, your contact information, your billing date, and your preferred payment and communication methods.

Your Summary of Coverage is located within this section.

Your premium payment can be made monthly. We only accept payment by direct debit using a valid chequing bank account or by credit card.

1.1 Key Terms.

This is the language that we think you need to know as you read this guide, and when you discuss your coverage with us. For a full list of definitions, please see our Glossary.

- When we say '**accident**' We mean a sudden event, specific to time and place, caused by an identified external force that causes acute injury to your pet. For the purpose of this policy, bloat, dietary indiscretion/contaminated water ingestion, cruciate ligaments, patellar luxation, elbow dysplasia, hip dysplasia, and lameness are specifically defined as illness medical conditions, and NOT coverable as an accident.
- When we say '**illness**' we mean a sickness or disease, or any change in your pet's normal health state that is not caused by an accident.
- When we say '**condition**' we mean an accident or illness or clinical signs/symptoms that are observed in your pet, even if a final diagnosis has not been reached.
- When we say '**pre-existing condition**' we mean any condition that existed or was set into motion before the end of your policy's waiting period, even if it was not yet formally diagnosed. For a detailed definition of pre- existing conditions, please read our glossary.
- When we say '**associated condition**' we mean any condition that developed because of the presence or treatment of another condition that appeared first. Some accidents and illnesses can make a pet more likely to develop another problem or condition. For example, a dislocated hip makes an animal more likely to develop arthritis. Diabetes makes a dog more likely to get cataracts.
- When we say '**onset**' we mean the date an accident first occurred, or the date signs and symptoms of a condition first appeared. In most cases, the onset date is different than the date the pet received treatment or even the date a diagnosis was made. In other words, onset is when you first notice something is wrong or different.
- When we say '**eligible**' or '**covered**' we mean something that meets the requirements for coverage described in this guide. It is a part of your pet's care that we can reimburse you for.
- When we say '**exclusion**' we mean a modification to this policy that eliminates or restricts coverage. In other words, an exclusion is a specific and named condition or treatment that is not covered, or not fully covered, by this policy.
- When we say '**your share**' we mean the percentage of veterinary fees that you are responsible for paying. Our coverage reimburses a percentage of eligible veterinary fees back to you! The remaining percentage of the veterinary costs is **your share** of the claim. **Your share** is also known as co-insurance.

1.2 What is the difference between an emergency, an illness, and an accident?

An **accident** is a situation where an external influence causes harm to your pet. Examples of **accidents** are falls from a height, cuts, blunt force trauma, and poisoning.

An **illness** is a situation where some part of your pet's body is not functioning properly or has not developed normally. This could include things like vomiting and diarrhea, skin disease, diabetes, or arthritis.

An emergency is any situation in which your pet needs immediate medical attention. Emergencies can occur because of a severe or sudden **illness**, like a seizure or bloat, or they can occur because of an **accident** or trauma.

Many **accidents** are emergencies, but not all emergencies are **accidents**. Many sudden-onset **illnesses** originate from a problem within the body and require emergency care.

1. Getting Started

1.1 How we talk to your vet

When you start your policy with us, you agree to let your vet share medical records and insights about your pet's health and history. Let your vet know that you've enrolled your pet in an insurance policy in case they need your consent to share information. We may ask them to complete a health checklist, send us medical records, or provide clarification about your pet's health and treatment details. This applies to any additional clinics that provided care.

1.2 How we process your claims

This is a reimbursement policy. That means that in the event of an **accident** or **illness**, you will take your pet to the vet, get them the treatment they need, pay your bill, and collect your invoice. Then, submit your claim at the Member Portal at mypetcloud.ca. Be sure to select your preferred reimbursement method when you make your claim.

We want to process your claim as quickly and accurately as possible. To process a claim, we look at your pet's **condition**, the **onset** and treatment dates, and your closed invoices. Sometimes, we need your pet's updated medical records to understand the case better. When you help us collect this information, we can get your claim done faster.

We will then reimburse you for all **eligible** expenses. You can be reimbursed quickly by Electronic Funds Transfer (EFT). If you don't mind a wait, we can reimburse you by sending a cheque through snail mail. We can even arrange to send a cheque directly to your veterinarian. Visit the FAQ section of our Member Portal at mypetcloud.ca to learn about this option.

We will keep you up to date on what's happening with your claim in case any additional info is needed. If we cannot pay part of your claim, we will explain why. You can check on your claim's status anytime at the Member Portal.

1.3 How your policy renews

Your policy will renew automatically every 12 months on your policy's anniversary date unless you call us to cancel. We will contact you before your policy renews with full details about next year's premium, deductible, **your share**, and any other changes to your policy.

2. How your policy works

2.1 How to make a claim

You can submit your claim online 24/7 at mypetcloud.ca. We can process claims submitted within 180 days of the treatment date. You should submit claims for ongoing treatment as the treatment occurs. Processing of your claim can only begin when all the required information has been received by us.

Claim Checklist

- ✓ You pay your vet first.
- ✓ Submit your claim within 180 days of your pet's treatment date. If your vet submits your claim for you, you must make sure they do it on time.
- ✓ Help us to collect all the medical records that we need.
- ✓ Include all closed invoices or receipts. Make sure the entire page is legible, with no portions covered, crossed out, highlighted, or otherwise hidden.
 - ✓ A closed invoice includes an invoice number, your pet's name, an itemized list of products and services provided, associated costs, and all taxes and discounts.
 - ✗ Estimates, account summaries, transaction histories, packing slips, open invoices,

and pharmacy receipts without prescription labels are not considered invoices.

- ✓ Be sure to send us your pet's full medical history within the first 30 days of starting your new policy. This will allow us to process your claim as quickly as possible.
- ✓ Claims submitted within the first 30 days of the policy must include detailed examination notes taken at the time of the appointment by the treating veterinarian.
- ✗ Reimbursements are often delayed because of missing medical records or invoices.
- ✗ Missing documents must be submitted within 30 days of the date that we request them, or your claim will be closed.

2.2 How to tell us if something is wrong

We work hard to exceed your expectations at every opportunity. If something isn't working, please tell us right away so we can fix it. To make a complaint, call our representatives toll free at 1-800-364-8422 or visit the Member Portal at mypetcloud.ca to send us an email. We will do our best to resolve problems as soon as we are aware of them. If things are a little complicated, additional time, information, and follow-ups may be needed. We want you to be happy and to feel confident in us. Your feedback will help make us better!

2.3 How to appeal a claims

Our claims adjusters and underwriters are knowledgeable and fair. However, if we don't have the full medical details about your pet, we can sometimes get it wrong. If you have new or additional medical information, you can appeal our decision. Appeals are reviewed by our claims and underwriting departments, and when needed, our veterinarian.

- To appeal a claims decision "Reassessment"
 - ✓ A reassessment can only be completed with the submission of new or additional medical documentation.
 - ✓ Complete a reassessment form, found at the Member Portal at mypetcloud.ca.
 - ✓ Send your new or additional medical information to submissions@petsplusus.com attention to the Claims Department.
 - ✓ Statements or amendments made by your veterinarian should be submitted using the Veterinarian's Statement of Appeal form located at the Member Portal at mypetcloud.ca, and documented in the medical record.
 - ✓ Claims appeals must be received within 180 days of the date of the claim denial notice.

You may also submit your appeals by mail. We will share our decision with you by your preferred communication method, or you can review your completed claims on mypetcloud.ca.

2.4 How to cancel your policy

You can cancel your policy at any time by calling us at 1-800-364-8422. When you call, we will ask why you no longer wish to keep the policy. We do this because there may be solutions available that are a better fit for you and your pet. If you still want to cancel your coverage, we understand and we will honour your request. Cancellations can only be processed on business days.

If you decide to cancel your policy within the first 30 days of enrolling, and you have not had any claims reimbursed, we will refund you any part of the premium you have paid and void your policy.

You cannot make claims for **accidents** or **illnesses** that occur after your cancellation takes effect. If you have outstanding claims for things that occurred while your policy was active, you have 60 days from your date of cancellation to send them in. Claim submission timeframes will apply.

We will issue a refund for any unearned premium. This means that if we have already collected premium for longer than you wish to remain insured, we will refund you the difference.

2.5 How to make a change to your policy

You can change this policy to meet your needs better, but timing is everything! For policy changes, there are rules and regulations that we must follow. We want you to be aware of them up front.

- Changes to the policy, including coverage limits, can only be made by you, the primary owner named on the Summary of Coverage. Please see NAMED INSURED in the glossary.
- You must call us at 1-800-364-8422. to make policy changes. We want to make sure you fully understand how the change will affect your pet's coverage. Changes to the policy cannot be made by email.
- The best time to make changes to your policy is during your renewal period: the 60 days leading up to your policy anniversary and renewal date.

Increasing your coverage limit:

- ✓ Can be completed at yearly renewal (policy anniversary).
- ✓ Your coverage limit will only increase for all **conditions** that are **onset after** the upgrade.
- ✓ All previous **exclusions** and restrictions will remain in effect in your upgraded policy.
- ✓ **Illness** waiting periods will apply when upgrading from **accident** policies.
- ✗ Your coverage limit will not increase for any **conditions** that were first **onset** before the upgrade.
 - For example: you increase your annual coverage limit from \$7,500 to \$15,000. If your pet developed ear infections while still at the \$7,500 limit, their coverage for ear infections will always be limited to a \$7,500 annual maximum. All new **conditions** will still benefit from the upgraded annual limit.

Decreasing your coverage limit:

- ✓ Can be completed at yearly renewal (policy anniversary).
- ✓ Eligible **conditions** will be reimbursed at the lower coverage limit.
- ✓ No new restrictions will be applied to your policy.
- ✗ Your previous **exclusions** will remain in place.

3. Your Coverage

Even the healthiest, most pampered pets can get sick or injured. There's never a good time to face a large, unexpected bill from the vet. Our coverage helps you give your pet the best medical care by assisting you with these bills. Any **conditions** that first occur after your waiting period will qualify for coverage unless they are specifically excluded in this guide. We will reimburse you for costs related to treating **eligible conditions** for as long as you keep your coverage.

As part of this coverage, you have a duty to take proper care of your pet. You must:

- ✓ Take your pet for annual check-ups.
- ✓ Follow your vet's standard advice about vaccination, parasite control, grooming, spay/neuter, and nutrition.
- ✓ Follow all laws that apply to pet ownership in your area.
- ✓ Arrange for a veterinarian to examine and treat your pet as soon as possible when you notice something is wrong.

The costs of preventative care, grooming, and nutrition are not covered by this policy. These are the normal costs and responsibilities that you can expect with pet ownership. An optional FlexCare plan can be purchased and added to this policy to assist with these fees.

This policy covers one pet only. You cannot transfer this policy between pets. Each pet requires individual enrolment and underwriting.

3.1 Your deductible and your share Deductible

You need to satisfy your deductible before claims can be paid. This is the first portion of **eligible** veterinary costs claimed each year – review your Summary of Coverage to see your selected deductible. If you don't submit a claim, you don't need to satisfy a deductible.

Your share (Co-Insurance)

You need to pay **your share** of your bill for covered treatments and services. **Your share** is calculated first, followed by your deductible. You can review both your selected deductible and **your share** on your Summary of Coverage.

Sample calculation

Debbie's golden retriever Lloyd developed an infection and had to be rushed to the vet for emergency treatment. Debbie's Pets Plus Us Accident & Illness insurance provided reimbursement of 80% of the \$2000 incurred **eligible** veterinary costs, less Debbie's \$100 deductible. Debbie is responsible for paying her share of 20%. In total, Debbie was reimbursed \$1500.

Later that same policy year, Lloyd experienced another illness totaling another \$2000 in **eligible** veterinary bills. Because Debbie had already satisfied her annual deductible, Debbie is only responsible for paying her share of 20% – in this case \$400. Pets Plus Us is responsible for 80% of the total costs and reimburses Debbie \$1600.

Expenses We Will Reimburse You For

3.2 Coverage if your pet needs veterinary care

- ✓ If a vet recommends tests or treatments for a **covered accident** or **illness**, we will pay our share for the cost of that care. You pay **your share** of the bill for each **eligible** treatment, and you satisfy your deductible once a year.
- ✓ The treatment must be performed by a vet or a veterinary technician, or by someone under their direct supervision.

3.3 Alternative therapy

We know a lot of people want the added benefit of alternative therapies in their pets' veterinary care. We do too! We will pay for **eligible** alternative therapy if prescribed by your vet to help treat an **eligible accident** or **illness**.

For the purpose of this policy, we consider alternative therapy to include acupuncture, chiropractic services, hydrotherapy, massage therapy, physiotherapy, and laser therapy performed by a licensed veterinarian, or under their supervision.

- ✓ We recommend getting a pre-approval for alternative therapies.
- ✗ We can't pay for alternative therapies not listed above.
- ✗ We can't pay for alternative therapies used for wellness or preventative care.
- ✗ We can't pay for experimental or innovative therapies.
- ✗ We can't pay for alternative therapies used to treat **conditions** that we don't cover, or alternative therapies not prescribed by your vet.

3.4 Behavioural therapy

- ✓ We will pay for veterinary consultations to diagnose and treat your pet's abnormal behaviour.
- ✓ We will pay for behavioural therapy if it is conducted by a licensed veterinarian or if your pet was referred to a certified animal behavioural therapist by your vet.
- ✓ A referral letter or medical record that confirms your pet's referral will be required.
- ✗ We can't pay for classes, regular training, socialization, or obedience services under this policy.

3.5 Medical devices

- ✓ We will pay up to an annual limit of \$1,000 for medical and diagnostic devices prescribed by your veterinarian to manage your pet's **eligible accident** or **illness**.
 - Examples of medical devices are glucometers, slings, prosthetics, braces, wheelchairs, and other devices supporting independent mobility.
- ✓ We recommend getting a pre-approval for medical device coverage.
- ✗ We can't pay for non-medical grooming and restraint devices such as collars, muzzles, strollers, carriers, and

crates, or for equipment not typically intended for home use.

3.6 Prescription food

Nutrition can be a big part of your pet's treatment!

- ✓ We will pay for up to two months' supply of prescription food per policy year to a limit of \$50 per year for cats, and \$200 per year for dogs, if recommended by your vet to treat a covered **condition**.
 - Please include a detailed closed invoice including item descriptions and cost.
 - If you make your purchase online, please include a copy of your prescription slip or medical records.
- ✗ We can't pay for non-prescription foods or treats, raw diets, home-cooked diets, and weight management foods.
- ✗ We can't pay for prescription food if no illness has been diagnosed in your pet.

3.7 Complications

- ✓ If your pet suffers a complication during treatment of a covered **condition**, we will pay for treatment needed to manage that complication.
- ✗ We can't pay for any complications of treatments that were not specifically recommended by your vet, as recorded in your pet's medical records.
- ✗ We can't pay for any complications that happen because of a treatment or **condition** that is excluded by this policy.

3.8 Emergencies

- ✓ We will pay for after-hours or emergency fees if your pet requires urgent treatment for an **eligible condition**.
- ✗ We can't pay for house call fees unless a veterinarian certifies that the house call was essential to the survival of the pet.

3.9 Musculoskeletal conditions

Cruciate ligaments, hip dysplasia, elbow dysplasia, patellar luxation, and lameness, regardless of cause, are considered to be bilateral **illness conditions**. They are subject to **illness** waiting periods, and if **eligible**, are covered under the **illness** benefits of this policy. For additional resources about specific conditions, please see the Frequently Asked Questions section of our Member Portal.

A word about Lameness and other Musculoskeletal Conditions:

Lameness and Limping:

Although many people think of lameness as being caused by a fall or other Accident, many types of lameness are caused by degenerative Illness conditions. If a policy holder notices their dog has a limp with no obvious evidence of a traumatic event occurring, coverage is not available under our accident benefits. We process lameness claims according to illness coverage criteria.

Cruciate Ligaments:

The veterinary literature concludes that most cruciate ligament strains and tears result from a progressive degenerative disease within the ligament and surrounding structures. These degenerative changes can take place over many months and may not display obvious clinical signs. Conformational, developmental, hormonal, inflammatory, autoimmune and lifestyle factors may all play a role in the development of the condition. Clinical signs typically appear suddenly, leading pet owners to conclude that an accident has occurred. Pain and rupture of the cruciate ligament is the end result of an ongoing disease process. A dog is often not lame while the process takes place.

A diseased cruciate ligament is like a fraying rope. Once the ligament structure has been

compromised, normal activities like running, jumping, playing, and minor falls can cause a partial or complete tear, producing sudden lameness. Unless the circumstances are exceptional, and a documented external force can be identified as the sole cause of the injury independent of all other factors, we consider a torn cruciate ligament to be an illness, not an accident. Eligibility for coverage is subject to illness waiting periods.

Patellar Luxation:

Luxating patellae (loose kneecaps) are a common problem in small dogs under 30 lbs., and some large breeds. About half of all affected dogs have the abnormality in both knees. Veterinary research has shown that this is a congenital illness involving multiple abnormalities in the shape and function of the knee joint. The abnormal development of the knee predisposes the patella to slip out of place (luxate) as the pet gets older, sometimes after exercise or a minor fall. Unless the circumstances are exceptional, this policy treats patellar luxation as an illness, not an accident. Eligibility for coverage is subject to illness waiting periods.

3.10 Coverage if you are travelling with your pet

- ✓ We will pay for your pet's veterinary treatment of an **eligible condition** within Canada or the United States of America (when you and your pet are travelling).
- ✗ We can't pay for currency conversion. For example, \$800 in U.S. charges will be considered as \$800 in Canadian funds. This is because your premium is paid in Canadian dollars and is calculated based on Canadian fees.
- ✗ We can't pay the costs for any travel to receive treatment, mileage fees, or transportation while receiving treatment.
- ✗ We can't pay for any medical treatments provided outside of Canada or the United States.

Additional Benefits

3.11 Cancelling or interrupting a trip

We call these Your 'Trip Cancellation' costs.

- ✓ We will pay the portion of your pre-paid travel costs that are not refundable if you are on a trip and must come home early because your pet needs urgent and life-saving treatment for an **eligible condition**. We will pay up to a limit of \$1,000 per incident.
- ✓ We will pay the portion of your pre-paid travel costs that are not refundable if your pet gets sick or injured because of an **eligible condition** within the 7 days before you leave for a trip and you must cancel because they require urgent and lifesaving treatment. We will pay up to a limit of \$1,000 per incident.
- ✓ To qualify for trip cancellation costs,
 - You must have booked your trip at least 28 days before your planned departure.
 - You must keep your documents showing the details of your pet's medical treatments, and proof of the trip cancellation costs that you were not able to get refunded
- ✓ You do not need to pay **your share** or a deductible to receive this reimbursement.
- ✗ We can't pay for trips that are delayed or cancelled by something that is unrelated to your pet or for non-urgent or non-life-saving treatments.
- ✗ We can't pay cancellation costs if you have recovered costs from other sources.
- ✗ We can't pay cancellation costs for your trip if your pet's emergency is excluded by your policy.
- ✗ We can't pay the costs for rebooking or changing travel plans, or for return trip fare.

3.1 Coverage for missing or stolen pets

We call these your 'Recovery Costs'.

Despite the best efforts of families, pets can become lost or even stolen. We want to support you through a stressful time by offering coverage for some of the costs associated with getting your pet home safely.

- ✓ We will pay the cost to advertise (notices, flyers) for the safe return of your pet if they are lost or stolen.
 - Keep your closed invoices or receipts for printing and other advertising.
- ✓ We will pay for the reward you offer for the safe return of your pet if they are lost or stolen.
 - If you pay a reward for the safe return of your pet, you must get a receipt that includes the name, address, and phone number of the person you paid the reward to.
- ✓ We will pay up to a total of \$1,000 per incident for all claims related to pet loss.
 - For example, if you claim \$200 for advertising costs, we cannot pay more than \$800 for reward costs.
- ✓ Your pet must be missing for at least 48 hours to qualify for this reimbursement.
- ✓ You must report your pet's disappearance to your local shelter, humane society, or animal services agency to qualify for this reimbursement.
- * You do not need to pay **your share** or a deductible to receive this reimbursement.

We can't pay any rewards to your family, anyone who lives with you, or anyone who is employed by you.

3.2 Coverage if you have a medical emergency and can't take care of your pet

We call this part of your coverage the 'Emergency Boarding Kennel or Cattery Fees'. It applies if you are hospitalized unexpectedly and need assistance caring for your pet.

- ✓ We will pay the costs for pet sitting or pet boarding if you or your immediate family member are hospitalized unexpectedly for 48 hours or longer.
- ✓ We will pay up to \$30 per day for boarding or pet sitting to a maximum limit of \$1,000 per incident.
- ✓ Your pet sitting must be provided by someone who does not live in your home.
- ✓ You must provide proof of your hospitalization including reasons and dates of your visit, and all paid receipts for your pet's boarding or care. We need these documents to pay your claim.
- ✓ You do not need to pay **your share** or a deductible to receive this reimbursement.
- * We can't pay for any pre-planned admissions.
- * We can't pay for boarding fees while you are recovering at home or outside of hospital.
- * We can't pay if you are going to the hospital for pregnancy or birth.
- * We can't pay if you are going to the hospital for elective or cosmetic procedures.
- * We can't pay if you are going to the hospital for treatment of an injury or an illness that you experience symptoms of, consulted a health provider for, took tests, or received treatment for before your policy started.

3.3 End of life coverage

We know that saying goodbye to your pet is a painful experience. If your pet dies due to a **covered condition**, or if your vet recommends euthanasia, this part of the policy can help with the costs of 'Euthanasia, Cremation and/or Burial'.

- ✓ We will pay the euthanasia, cremation and/or burial costs, up to a total limit of \$1,000, if your pet dies, or a vet recommends that they be put to sleep as a direct result of a **covered accident or illness**.
- ✓ You do not have to pay **your share** or satisfy a deductible to receive reimbursement for **eligible** Euthanasia, Cremation and/or Burial.
- ✓ We will cancel your policy to the documented date of your pet's passing, as soon as you notify us.
- * We can't pay for euthanasia performed for behavioural or financial reasons.
- * We can't pay for additional memorial items like caskets, urns, paw prints, memorial stones, or for equipment needed for private burials.
- * We can't pay for euthanasia, cremation, or burial costs if the **accident** occurred before the end of the

48- hour **accident** waiting period, or if the **illness** occurred before the end of the 14-day **illness** waiting period for this policy.

- ✘ We can't pay for euthanasia, cremation, or burial costs if your pet's death results from a pre-existing condition or any other condition that is excluded.

3.4 Tribute if your pet passes away

If your pet passes away due to an **eligible condition** that occurs while this policy is in effect, we will donate \$50 in tribute to your pet to the Pets Plus Us tribute charity.

4. Coverage limits

4.1 Annual limits

- ✓ We will pay up to your selected policy limits for **covered** vet fees in each policy year. You can submit as many or as few claims as you need to, up to your annual limit.
- ✓ When your policy renews each year, so does your annual limit. This means that we will pay up to your selected policy limits for **covered** veterinary fees each policy year, no matter how much you claimed last year. There is no lifetime cap on reimbursement.
- ✘ Some **covered** items have sublimits. This means that you can only claim up to a stated maximum amount per year or per incident for these expenses. Sublimited items include medical devices, prescription food, and additional benefits.

4.2 Sublimits

- ✓ You may use up to \$1000 of your annual coverage limit towards medical devices.
- ✓ You may claim up to \$1000 per incident for your additional benefits, excluding pet tribute.
- ✓ You may claim up to two months' supply of prescription food, to a maximum of \$50 per year for cats and \$200 per year for dogs.

5. What we can't cover

This section explains our most important general **exclusions**. They tell you what your policy is not meant to cover. A complete list of exclusions can be found at the end of this section. These conditions and **exclusions** apply for as long as you have your policy.

5.1 Waiting periods when you first buy

Waiting periods help to create a clear separation between **accidents** and **illnesses** that happen before the policy starts, and those that happen after your pet is insured.

- ✘ We can't pay a claim for any **accident** that is onset or treated before day 3 of the policy.
- ✘ We can't pay a claim for any **illness** that is onset or treated before day 15 of the policy.
- ✓ The waiting periods above do not apply if you are renewing your existing Pets Plus Us policy.

5.2 Pre-existing conditions

A **pre-existing condition** is any **condition** that shows its first clinical signs before the end of your waiting period, or any diagnosed or undiagnosed **condition** that has the same clinical signs as those observed before the end of your waiting period.

- ✘ We can't pay claims for **conditions** that are **pre-existing**.
 - For example, a pet is enrolled in insurance at three years of age. Their medical records indicate that they have experienced itchy skin each spring since they were about a year of age. Illnesses related to seasonal itchiness would be excluded from coverage.
 - For example, a pet experiences vomiting and diarrhea a week before they are enrolled in insurance. They are treated with supportive medication and get better, but the cause of the illness

was never determined. A month after enrolment, that pet experiences vomiting and diarrhea again. This time, some tests are performed, and the cause is determined to be a giardia infection. In this case, the giardia can't be covered because it has the same clinical signs as those recorded before enrolment.

Coverage restrictions after an upgrade

We may place a coverage restriction on your pet's policy when you have made a change to your policy and increased your coverage limits. A coverage restriction is an exclusion that only applies to **conditions** that first appeared when your pet was insured under a lower annual limit. Ongoing coverage for the **condition** will still be available; however, if your pet first showed signs of a **condition** before you increased your coverage limits, coverage for that **condition** will remain limited to your previous (lower) limit.

5.3 Bilateral conditions

A bilateral **condition** is a **condition** that is likely to affect both sides of the body.

- ✗ We can't pay for treatment of a bilateral **condition** affecting a limb, joint, or organ if that **condition** was already **pre-existing** on the opposite side of the body.
 - For example, if your pet has pre-existing glaucoma in their right eye, they will not be covered for treatment if they develop glaucoma later in their left eye.

5.4 Reproduction and reproductive system claims

- ✗ We can't pay costs related to reproduction or **illnesses** of the reproductive system, including cryptorchidism, pregnancy, queening, or whelping.
- ✗ We can't pay for complications that arise from reproduction or the reproductive system.
- ✗ We can't pay for spaying or neutering or any sterilization procedure or its complications.

5.5 Wellness, preventative, and elective treatments

- ✗ We can't pay for routine, preventative, or wellness care. This includes annual physicals, vaccines, spay/neuter, grooming, anal gland expression, and parasite testing and prevention (including fleas, ticks, heartworm, intestinal worms).
- ✗ We can't pay for any treatments you choose that have not been prescribed by a vet.
- ✗ We can't pay for non-essential or non-medical boarding or hospitalization.
- ✗ We can't pay for training classes, non-therapeutic training, correctional devices or other training or preventative products.
- ✗ We can't pay for any elective or cosmetic procedures, or any complications related to them including (but not limited to) debarking, declawing, dewclaw removal, ear cropping, nail trims, grooming, nasal or skin fold correction, stenotic nares, or tail docking.
- ✗ We can't pay for shipping, transportation, travel, or mileage expenses related to veterinary care of any kind.

5.6 Claims for dental treatment

- ✗ We can't pay for claims related to dental and orthodontic care or treatment of diseases of the teeth and gums. This includes (but is not limited to) treatment of dental caries, gingivitis, periodontitis, stomatitis, retained deciduous (baby) teeth, non-erupted teeth, tooth resorption, malocclusion, periodontal disease, root canals, caps, crowns, or abscessed teeth.
- ✗ We can't pay claims for non-anesthetic dentals, scale and polish or dental grooming.

5.7 Accidents or illnesses caused by you

We know all our policy holders handle their pets with care; however, it is important to know that we will not cover injuries, **accidents**, or **illnesses** that are caused by you:

- ✗ We can't pay for treatment if you, your household member, or your employee intentionally injures,

mistreats, or neglects the health and safety of your pet.

- ✘ We can't pay for any claims for preventable conditions. This means that if you did not follow your veterinarian's advice about preventative care, spay/neuter, nutrition, hygiene, and safety, we will not pay for the treatment of illnesses and injuries that could have been avoided with these measures. Preventative care includes (but is not limited to) the accepted veterinary standards for vaccination, flea control, parasite prevention, dental care, nutrition, and grooming. Homeopathic vaccinations are not considered an alternative to conventional vaccines.
- ✘ We can't pay for any claims for **accident** or **illness conditions** or complications that occurred after you did not follow the advice of your veterinarian regarding the diagnosis or treatment of a **covered condition**

5.8 Claims caused by repetitive and preventable behaviours or activities

Accidents happen, sometimes more than once! Some pets never learn that porcupines are not friends, and socks are

not food. Fortunately, your vet can give you advice and tools to prevent repeat incidents of some avoidable **accidents**. You must take measures to prevent or avoid situations that can hurt your pet, especially when it comes to the risky behaviours you know they tend to repeat.

- ✘ We can't pay for more than three separate but similar incidents that happen because of a preventable activity or behaviour. Examples include (but are not limited to) porcupine quills, fight and bite wounds, poisoning, foreign body ingestions, and motor vehicle injuries.
 - For example, we will pay to treat your pet's injuries related to porcupine quills three times. If they get quills a fourth time, this policy will not provide further coverage.

5.9 Claims for experimental or innovative treatments

We stay on top of trends and advances in medicine, technology, and nutrition. This allows us to cover tests and treatments that are broadly accepted and used in the veterinary profession.

- ✘ We can't pay for the costs of tests or treatments that are not yet supported by strong scientific evidence, or not commonly used in veterinary species.
- ✘ We can't pay for the cost of treating complications that happen because of the use of experimental or innovative tests or treatments.
- ✘ Examples of innovative therapies include (but are not limited to): regenerative therapy, stem cell therapy, prolotherapy, platelet rich plasma therapy, hyperbaric oxygen therapy, veterinary orthopedic manipulation, osteopathy, colour therapy, and cryotherapy.

5.10 Unlicensed medications

- ✘ We can't pay for medications, supplements, or non-prescription drugs that do not have a Drug Identification Number (DIN), Natural Health Product (NHP) number, and Interim Notification Program (INP) number, or a Veterinary Health Product (VHP) number.

5.11 Anal gland expression

- ✘ We can't pay for routine or preventative anal gland expression.
- ✘ We can't pay for anal gland expression to treat abnormal fluid or impaction consistent with a minor infection (sacculitis) that does not require antibiotic therapy.

5.12 Non-therapeutic services and supplies

- ✘ We can't pay for pet services and supplies related to grooming, restraint, wellness, or transportation. This includes collars, muzzles, crates, carrying devices like strollers and carriers, regular or medicated baths, and bathing products.
- ✘ We can't pay for non-prescription pet food.
- ✘ We can't pay for prescription or non-prescription drugs, supplements, or vitamins that have not

been purchased from a licensed veterinary hospital or pharmacy.

5.13 Administrative fees

- ✘ We can't pay you for fees related to administrative activities like completing and filing forms, transferring records, courier fees, or for prescription and dispensing fees.

5.14 Risky activities

- ✘ We can't cover **illnesses** or **accidents** that affect your pet because they were used for risky activities like commercial guarding, fighting, pursuit of prey, or for-profit racing.
- ✓ We **can** cover **accidents** related to recreational hunting of upland birds and waterfowl.

5.15 Animals we can't cover

If your pet's details change, it may affect your coverage.

- ✘ We can't cover pets that do not belong to you or are not under your care and in your possession.
- ✘ We can't start a new policy for pets younger than 7 weeks of age.
- ✘ We can't offer **illness** coverage for pets who have been diagnosed with, tentatively diagnosed with, or are showing clinical signs of certain critical illnesses before the end of the illness waiting period. These illnesses are known to negatively impact a pet's whole body. They include (but are not limited to) congestive heart failure, Feline Immunodeficiency Virus (FIV), Feline Leukemia Virus (FLV), Feline Infectious Peritonitis (FIP), advanced kidney failure, and systemic autoimmune disease (e.g., lupus). Pets affected by localized immune mediated diseases (e.g., IBD, or IMHA) are still eligible for coverage with exclusions for pre-existing and associated conditions. If a pet has a pre-existing condition of this nature, we may recommend an Accident policy.

5.16 Post-mortems

- ✘ We cannot pay the costs associated with any examination or testing performed after the death of a pet.

5.17 Submitting claims too late

If your veterinarian or anyone else submits your claim for you, you are responsible for making sure it is submitted on time. You

can review your account on mypetcloud.ca to check that the claim was received. We will also notify you by email when a claim is received

- ✘ We can't pay for claims submitted longer than 180 days after the treatment date.

5.18 Claims covered by other insurance policies

Based on our policy structure, we question the value of having multiple insurance policies for your pet. The coverage outlined in this policy is not meant to be combined with any other **accident** and/or **illness coverage**. We may communicate with alternative insurance providers, and in the event we are advised there is another policy in place elsewhere we can cancel your policy. This means that if there are other insurance plans, contracts, or benefits providing you with assistance for your pet's veterinary or therapeutic expenses, this policy will be cancelled. If we have not reimbursed a claim, we will refund any premium collected in the current term when our policy overlaps with another insurance policy. If we have reimbursed a claim, we will cancel the policy immediately.

5.19 Exclusions in detail

It isn't practical to give you a list of all the **accidents**, **illnesses**, tests, and treatments that we can help you pay for. Instead, it's easier to plainly tell you what we can't pay for. We have provided a list below. Please read through this section carefully. If you need more information about anything you read below, please get in touch with our friendly and knowledgeable representatives.

This policy will not pay for:

1. Dogs and cats under seven weeks of age.
2. Any and all **pre-existing** clinical symptoms/clinical signs, medical **conditions**, diseases, **illnesses**, and/or **accidents**.
3. Any and all **illness** conditions that are present or **onset** within the **illness** waiting period, or conditions with the same clinical signs as an undiagnosed condition present or onset within the waiting period.
4. Any treatment for a bilateral **condition** in which that **condition** was already **pre-existing** on one side of the body.
5. Any treatment for an **accident** or **illness** for which you were advised by a veterinarian to take preventative measures, and you did not follow their advice.
6. Any treatment for an **accident** or **illness condition** resulting directly from your pet's usage for breeding, for-profit racing, organized fighting, commercial guarding, or pursuit of prey. This excludes recreational hunting of upland birds and waterfowl.
7. Any treatment for an **accident** or **illness** caused by you, any member of your household, or anyone employed or contracted by you, including mistreatment, injury, or neglect.
8. Routine, preventative, or wellness care intended for the maintenance of good health of your pet. This includes annual physical examinations, vaccinations, vaccine titers, spay/neuter (including for false pregnancy, pyometra, cryptorchidism and hormone related illnesses), grooming, anal gland expression, and parasite testing and prevention.
9. Elective procedures and cosmetic procedures and any related **associated conditions** or complications. This includes but is not limited to tail docking, ear cropping, ear hair plucking, declawing or tenectomy, dew claw removal, nail trims, grooming, anal gland expressions, debarking, treats and supplements.
10. Any treatment for medical **conditions** arising from lack of use and/or failure to follow a preventative health care plan generally accepted by veterinary standards or recommended by your veterinarian. Preventative health care includes but is not limited to vaccinations, flea control, heartworm medication, de-worming, dental care, and grooming.
11. Any treatment of **accidents**, **illnesses**, injuries, or complications related to reproduction or the reproductive system. This includes pregnancy, queening, whelping, aftercare of a litter, and sterilization procedures including spaying and neutering and their complications.
12. Non-essential and/or non-medical related boarding and/or hospitalization.
13. Any boarding or cattery costs related to you being hospitalized for an **accident** or **illness** that first happened or showed symptoms prior to your policy's effective date or within the waiting period.
14. Any boarding or cattery costs related to you being hospitalized for pregnancy or birth.
15. Shipping, transportation, travel, and/or mileage expenses.
16. House calls, unless certified essential for the survival of the pet by the attending veterinarian.
17. Any treatment you choose to have carried out that is not directly related to a **covered accident or illness**.
18. Therapeutic, prescription, and non-prescription food above the annual limit, or not prescribed to treat an **eligible condition**.
19. Vitamins, supplements, and prescription and non-prescriptions medications that have not been purchased at a licensed veterinary hospital or pharmacy, and medications, vitamins, supplements, and non-prescription drugs that do not have a DIN, NHP, VHP, or INP number.
20. Expenses related to grooming, grooming supplies, restraint devices (collars, crates, muzzles), carrying devices (carriers, strollers), medicated and non-medicated baths.
21. Dental and orthodontic health care, dental treatment, non-anesthetic dentals, dental procedures and/or dental diseases including but not limited to treatment of the teeth and gums, dental caries (cavities), gingivitis, periodontitis, stomatitis, retained deciduous (baby) teeth, non-erupted teeth, malocclusion, periodontal disease, root canals, caps, crowns, or abscessed teeth, incidental findings of fractured teeth, and teeth fractured due to chewing behaviours.

1. Any medical **condition** that happens because of a repetitive activity that results in your pet requiring repeated medical treatment. After (3) three separate but similar incidents of such claims, these medical **conditions** would be considered preventable. They include but are not limited to foreign body ingestions, porcupine quills, fight/bite wounds/lacerations, motor vehicle injuries, and poison Ingestions.
2. Experimental or investigational medical procedure, treatment, or service, including behaviour modification techniques considered experimental, and their complications.
3. Euthanasia of a pet due to an excluded **condition**, or not related to an **eligible accident or illness**, or performed because of financial or behavioural reasons.
4. Additional memorial options elected by you at the time of cremation including but not limited to urns, caskets, paw prints, and memorial stones, and equipment required for private burial.
5. Post-mortem examinations and tests.
6. Any claims for monies over and above the maximum benefit amount stated in the policy and/or Summary of Coverage.
7. Any claim submitted later than 180 days after the treatment date, or more than 60 days after cancellation of the policy.
8. Claims for losses covered by another insurance policy or company.
9. Any fees related to obtaining or submitting medical records to us.
10. Any administrative fees for completing or filing forms and prescribing and/or dispensing medication.
11. Any loss claimed because of:
 - a. War activities such as terrorism, bombardment, civil war, rebellion, or any armed forces action, whether or not war has been declared.
 - b. Any nuclear incident or radioactive contamination;
 - c. Epidemic or Pandemic.

1. Glossary

These words are used throughout the guide. Wherever the following words or expressions appear in your policy guide, product coverage chart or Summary of Coverage, they have the meaning that we explain here in the glossary.

ACCIDENT

A sudden and unexpected event, specific to time and place, brought about by an external influence resulting in an acute injury to your pet, identified and unintended. (For the purposes of this policy, bloat, dietary indiscretion, contaminated water ingestion, cruciate ligaments, patellar luxation, elbow dysplasia, hip dysplasia, and lameness are specifically defined as an illness medical condition).

ACCIDENT WAITING PERIOD

The period of time from the policy effective date during which there is no coverage for accident conditions. Any accident that appears, occurs, displays signs or symptoms, causes laboratory changes, was treated, diagnosed or has been known by you, your veterinarian, or another keeper during this period will be excluded from coverage. In other words, the accident waiting period is the length of time after you enrol your pet in the policy that must pass before an accident qualifies for coverage.

ALTERNATIVE THERAPY

A system of practices and treatments, performed under the direction of a licensed veterinarian, that are not generally considered part of conventional veterinary medicine. For the purposes of this policy, alternative therapy includes acupuncture, chiropractic services, hydrotherapy, massage therapy, physiotherapy, and laser treatment performed by, or under the supervision of a veterinarian.

ASSOCIATED CONDITION

Any condition or complication that develops because of the presence, diagnosis, or treatment of another primary condition.

BEHAVIOURAL THERAPY

The consultations, treatments, and medications required to manage abnormal behaviour or behavioural problems in a pet.

BENEFIT

A payment that we owe you after you experience a covered pet related expense.

BILATERAL CONDITION

Any condition that may affect both the right and left sides of the body (example: cruciate ligaments, joints, eyes, ears, kidneys, limbs, and lameness). All conditions are considered to be bilateral unless otherwise noted.

CHRONIC CONDITION

Any medical condition that is persistent and long-lasting in its effects.

CLAIM

A request that you make to us for payment of veterinary expenses covered by this policy.

CLINICAL SYMPTOMS/ CLINICAL SIGNS

Any changes in your pet's normal healthy state, its functions, or behaviour.

CLOSED INVOICE

A closed invoice is a document you get from your veterinarian after a visit is complete. It includes an invoice number, your pet's name, and an itemized list of products, services, and discounts provided. It is a summary of treatment costs associated with your claim

CONDITION

Any illness, disease, injury, sign, symptom or change to your pet's health, function, or behaviour, whether or not a formal diagnosis has been made. A single condition can have multiple incidents and may affect multiple areas of the body. Example: Arthritis in your pet's legs, back and neck are considered one condition. Also referred to as medical condition.

CONTAMINATED WATER

Water containing nutrients, bacteria, algae and/or plant matter that contributes to gastrointestinal illness, excluding defined toxins.

COVERAGE

The insurance protection for the pet that is named on your Summary of Coverage.

COVERAGE EFFECTIVE DATE

The date the coverage goes into effect as stated on your Summary of Coverage.

CURE

The complete recovery and resolution of an illness or injury, with no lasting health impacts and no influence on future disease risk.

DAYS

Days shall mean calendar days whether capitalized or not.

DEDUCTIBLE

The dollar amount you must pay for a payable and covered claim before we become liable for benefits listed on the policy. In other words, the amount for covered veterinary bills that you must pay at the beginning of each policy year before your insurance starts to pay.

DENTAL

Pertaining to the teeth.

DIAGNOSTIC TEST

Tests provided by a licensed veterinarian to detect, diagnose, or monitor diseases, disease processes, susceptibility, and determine a course of treatment.

DIETARY INDISCRETION

When a pet ingests something they should not have, causing vomiting, diarrhea, and other illness. Dietary indiscretion does not include the ingestion of poison, or objects that cause an obstruction and need to be removed by medically induced vomiting, surgery, or endoscopy.

ENROLMENT

The steps that you take to initiate your policy with us, including sharing information about you and your pet, agreeing to these terms and conditions, and paying your premium.

EXCLUSION

A provision within this insurance policy that eliminates or restricts coverage. In other words, an exclusion is a specific test, treatment, or condition that we will not pay for.

FRAUD

Intentional deception with false statements, omissions, or misleading conduct in order to influence insurance eligibility, rates, underwriting, and claims.

HOSPITALIZATION

For a human being, medically necessary confinement in a legally constituted and accredited hospital in North America which provides 24-hour nursing care by registered nurses, has organized facilities for diagnosis and major surgical procedures, and operates primarily for the care and treatment of sick and

injured persons.

For your pet, "hospitalization" means a medically necessary confinement in an animal hospital that is operated under the supervision of one or more licensed veterinarians.

ILLNESS

A sickness or disease, or any change to your pet's normal health state, that is not caused by an accident.

ILLNESS WAITING PERIOD

The period of time from the policy effective date during which there is no coverage for illness conditions. Any illness that appears, occurs, displays signs or symptoms, causes laboratory changes, was treated, diagnosed or has been known by you, your veterinarian, or another keeper during this period will be excluded from coverage. In other words, the illness waiting period is the length of time after you enrol your pet in the policy that must pass before an illness qualifies for coverage.

IMMEDIATE FAMILY

Your spouse (legal or common law), and any of your children, parents, brothers, or sisters.

INCIDENT

An identifiable accident, illness, or medical condition affecting your pet. Also, an identifiable occasion that triggers the additional benefits. Onset and recovery dates can distinguish one incident from another.

INNOVATIVE THERAPIES

Practices or treatments that are not generally considered part of conventional veterinary medicine including but not limited to: Regenerative therapy, stem cell therapy, prolotherapy, platelet rich plasma therapy, hyperbaric oxygen therapy, veterinary orthopedic manipulation, osteopathy, colour therapy, and cryotherapy.

INSURER

Northbridge General Insurance Corporation - as named on the Summary of Coverage.

MEDICAL DEVICE

A device necessary for the treatment or monitoring of a covered medical condition, or an orthopedic device to support independent ambulation where it is impeded by a covered medical condition. A medical device must be prescribed or explicitly recommended by a veterinarian. Examples include slings, braces, wheelchairs, and glucometers. Restraint devices are not considered medical devices.

MEDICALLY NECESSARY

Required care that a veterinarian prescribes or performs to resolve or control a medical condition.

MEDICATION

A drug or medicine, recommended by a veterinarian, that is approved for veterinary use and has a valid DIN, NHP, VHP, or INP number. Compounded drugs and licensed and released Monoclonal Antibody Therapy may also be available for coverage for labeled species.

MATERIAL MEDICAL CONDITION

A medical condition of a serious nature that would have either resulted in a declined claim or resulted in an exclusion to your coverage.

MAXIMUM BENEFIT AMOUNT

The most we can pay as stated in your Summary of Coverage.

MEDICAL CONDITION

See "condition," above.

MEDICAL RECORDS

Your pet's history including examination notes, imaging, lab reports, and all communications between you and your pet's care providers indicating the overall condition of your pet. Medical records may be recorded

by a licensed veterinarian, a care provider working under the supervision of a vet, or any veterinary staff member.

NAMED INSURED, YOU, YOUR

The primary owner of the insured pet, also known as the member, as named on the Summary of Coverage. Secondary owners can be listed on the policy, and submit or ask about claims. If you consider more than one person an owner of the pet, the owners must select one person to be the primary owner and policyholder. Only the primary owner can make changes to coverage.

ONSET DATE

The date the signs and symptoms of a condition first appeared. In most cases, the onset date is different from the date the pet received treatment or the date a diagnosis was made. Onset is when you first notice something is wrong or different.

PET

The insured pet, a domestic cat or dog owned for companionship by you, whose name and details are given on the Summary of Coverage.

POISON

A distinct chemical substance that can cause injury or death when ingested by a pet in inappropriate amounts. Examples of poison include warfarin, strychnine, metaldehyde, prescription drugs, and plants identified and known to be toxic. For the purposes of this coverage, poison does not include ingestion of human food, rotting food, garbage, or illicit drugs.

POLICY (also called Contract)

Your insurance agreement with us, including the terms and conditions explained in this guide, the most recent Summary of Coverage, Product Coverage Chart, and any amendments and additional forms that apply. Your contract also includes any trial coverage or vouchers you may have held with us that were continuous to the date that we issued this current policy.

POLICY ANNIVERSARY DATE

The first anniversary of your policy effective date, and each anniversary thereafter.

POLICY EFFECTIVE DATE

The date your contract with us came into effect, as stated on your Summary of Coverage. The waiting period starts at 12:01 on the policy effective date.

POLICY EXPIRATION DATE

Our policies are intended to offer one (1) year of coverage. Please review your Summary of Coverage for policy effective and expiry dates. You will be offered renewals annually. Your annual limits will renew with your policy. Waiting periods do not apply upon renewal.

POLICY YEAR (also called Term)

A one (1) year period specified on the Summary of Coverage, beginning on the policy effective date, and ending on the expiration date.

PRE-EXISTING CONDITION

Any condition for which a veterinarian provided medical advice, the pet received treatment for, or the pet displayed signs or symptoms consistent with, or associated with, the stated condition prior to the effective date of the policy or during any waiting period. This also includes any complication or associated condition that is caused by a pre-existing condition.

PREMIUM

The monthly or annual cost for your pet's insurance coverage. The amount of the premium is shown on your Summary of Coverage.

PRESCRIPTION FOOD

Food designed and clinically proven to treat a particular condition, prescribed by a licensed veterinarian. Also known as therapeutic food.

PRESCRIPTION MEDICATIONS

Any medicine that is dispensed legally when ordered with a written prescription from a licensed Veterinarian.

RECOVERY COSTS

Actual costs related to finding a lost pet, via advertising and reward.

REIMBURSEMENT (also called Our Share)

The amount of money that we pay you after you experience an eligible veterinary expense.

REPRODUCTIVE SYSTEM

For the purposes of this policy, the reproductive system includes the ovaries, uterus, uterine tubes, cervix, vagina, mammary glands, testes, prostate gland, ductus deferens, and penis.

SECONDARY/JOINT OWNER

A secondary owner is a person who lives with the pet, and may make or inquire about claims and billing. A secondary owner cannot make changes to coverage.

STATUTORY CONDITIONS

Conditions that, by law in some provinces, must be included in your contract. In other provinces, they are included in part of your contract, but are not required by statute.

SUMMARY OF COVERAGE

The document that accompanies the User Guide setting out the policy effective date, your selected benefit options, and other details of your coverage. The Summary of Coverage forms part of your contract. If you make any changes to your policy, your information, or your pet's information, we will issue a new Summary of Coverage to replace the earlier version.

SUPPLEMENT

A dietary supplement, vitamin, probiotic, or nutraceutical used for the treatment of a diagnosed medical condition. CBD is not considered a supplement under this policy.

TRAUMA

Injury caused to the body, either by blunt force – when an object strikes the body—or by penetration – when an object pierces the skin or body—resulting in concussions, contusions, lacerations, broken bones, or open wounds.

TREATMENT

The examination, consultation, tests, imaging, prescribed medication, hospitalization, surgery, and nursing provided or prescribed by your pet's licensed veterinarian. This includes alternative therapy.

TREATMENT DATE

The date treatment is provided by a licensed veterinarian.

US, WE, OUR:

PTZ Insurance Services Ltd. on behalf of the Insurer.

VETERINARIAN

A licensed and registered veterinarian in active practice in the area where your pet is treated or examined.

VETERINARY FEES

The actual cost (or fees) a veterinarian charged for the treatment of a medical condition(s).

VETERINARY FEES COVERAGE

The insurance coverage for the actual cost (or fees) a veterinarian charged for the treatment of a medical condition(s).

WELLNESS CARE

Any treatment intended for the prevention of an illness or medical condition. Wellness care is also known as preventative care.

YOU/YOUR

The person named in the Summary of Coverage as the policyholder who is the party to the insurance contract with us.

YOUR SHARE (CO-INSURANCE)

The percentage amount of each covered and payable veterinary bill (or loss) that you are responsible for paying, before you satisfy your deductible.

1. Legal Information and statutory conditions.

Pets Plus Us is underwritten by Northbridge General Insurance Corporation.

1.1 Settling claims

Once we receive your completed claim form and all required supporting documentation, we will communicate our claim decision with you within 60 days, unless state or provincial law provides for a shorter period. For up-to-date claim status, please visit our Member Portal.

1.2 Your privacy

We may record phone calls to train our staff, avoid misunderstandings, and give protection to the caller. This helps us maintain the quality of our service to you. We may share information about you with other insurance companies, directly or through a database. This allows us to check information you give us and helps us to prevent fraud. We will give your information to a regulatory body if they make an official request. Please refer to our website, petsplusus.com for our complete Privacy Statement.

1.3 Fraud

You must give us true and complete information about yourself, your pet, and all claims you make. If you provide information that you know is false, dishonest, altered, misleading or purposely incomplete, we may cancel your insurance. You will then have to pay back any money we have given you under this policy.

1.4 Additional coverage

You must tell us the name, address and effective date of any other insurance company that provides coverage for your pet, and the applicable policy number.

1.5 Policy provisions

When this policy's provisions conflict with the statutes, laws, and regulations of the province in which this policy is issued, the provisions are amended to conform to such statutes.

1.6 Legal actions

We have the right to subrogate. This means that if someone else is found to be responsible for an accident for which we pay an amount, we have the right to legally pursue them, in your name, and recover any incurred amounts that we paid. You must help us if we ask you, by providing necessary documents and by cooperating with us. Every legal action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act or other legislation applicable in your province.

We will not make payments for claims for which you are entitled to recovery under any other insurance, except for any additional sum that is payable over and above such other insurance and any contribution that we are obliged to make by law. If we make a payment to you and you are also entitled to receive a payment from a third party, our obligation is subrogated to that right. You will help us recover any payments that were subject to subrogation and reimburse us to the extent you recover from a third party (up to the amount of our payments to you).

Notwithstanding anything to the contrary in this agreement and without prejudice to any other right or remedy we may have, we may set off or recoup any liability owed to you pursuant to this policy against any amount we determine, in good faith, that you are liable for to us, including, without limitation, any overpayments We may have made to You due to subrogation, error, or otherwise.

You must fully comply with all terms and conditions of your contract. You may only start legal action against us within one year after you have provided us with written proof of loss. You also have up to one year from the date we require written proof of loss to take legal action in order to recover a reimbursement amount under this coverage.

In the event of a dispute not able to be resolved between you and us all laws will be governed by the laws of Ontario and all lawsuits will attorn to the Region of Halton.

1.7 Cancellation by Us

We may cancel your policy if you do not pay your premium. Insufficient funds, declined payments, and cancelled or expired credit cards can result in failed payments. Policy cancellation will affect your coverage and claims reimbursement. Please keep your payment method up to date with us. Requests to change your billing date can be made by phone at 1-800-364-8422 or in writing, and are subject to our approval.

If we are unable to collect your premium payment from your authorized payment method, we will contact you by email and attempt to collect whatever is outstanding. After two missed premiums, the policy will be cancelled.

We may cancel your policy if we discover fraud or material misrepresentation, as described in 8.3 above.

If we cancel your policy, we will provide advanced notice of the cancellation and the cancellation reason in writing at least fifteen (15) days before the cancellation is effective. Notice of cancellation will be sent to your preferred method of contact, either via email or mail.

Please ensure you are keeping your contact details up to date in order for communications to reach you. If the notice is mailed, proof of mailing will be considered sufficient proof of notice.

If you have had your policy for longer than one month, we will issue a refund for any unearned premium. This means that if we have collected premium for longer than you remain insured, we will refund you the difference as soon as reasonably possible. Refunds will be processed back to the method of payment you have selected for your premium collections.

The statutes, laws, and regulations regarding cancellation within the province in which this policy is issued will prevail, and the provisions in this policy are amended to conform to such statutes.

You cannot make claims for accidents, illnesses or treatments that occur after the day your cancellation takes effect. If you have outstanding claims for things that occurred while your policy was active, you have 60 days from your date of cancellation to send them in. Submission time frames still apply.

1.8 Notice of change

We reserve the right to make any changes to this policy upon notice. We will only make changes once in every 12-month period. Changes can include (but are not limited to) rates, fees, premiums, coverage, exclusions, maximum benefit amounts, deductibles and/or **your share** (co-insurance). Changes to your premium will happen at the time of renewal. We will notify you in writing 30 days before the effective date of the change. If we make any other change to your policy, we will send you written notice of our intent 30 days before the effective date of the change. Notice will be emailed or delivered to your last known address.

1.9 Notice by you

If you want to make a change to your policy, or if there are changes to your address, your other details, or your pet's details, you must notify us. Changes to your address may result in an adjustment to your premium – if that is the case, we will notify you of the updated monthly premium. If you are absent or unable to give us notice,

your authorized agent or representative can give the notice. Changes to your policy will take effect at the next month's billing date after we receive your notification.

Any written notice to us may be delivered at, or sent by proof of mailing to, the chief agency or head office.

C/O: Pets Plus Us 710 Dorval Drive, Suite 400 Oakville, Ontario L6K 3V7

1.10 Statutory conditions

You might be alarmed by what follows. It may seem to be unusual language. That is because the following conditions are statutory conditions, and they must be included in your policy under the laws of some provinces. In other provinces, they are included as part of the insurance contract you have with us.

We recognize that your pets are very important members of your family. However, pet insurance is considered within the class of property insurance for insurance law purposes. So, "property" refers to your

pet in the following statutory conditions. We are stuck with this wording. "Insured" refers to you, the policyholder.

Misrepresentation

If a person applying for insurance falsely describes the property to the prejudice of the insurer, or misrepresents or fraudulently omits to communicate any circumstance that is material to be made known to the insurer in order to enable it to judge of the risk to be undertaken, the contract is void as to any property in relation to which the misrepresentation or omission is material.

Property of others

Unless otherwise specifically stated in the contract, the insurer is not liable for loss or damage to property owned by any person other than the insured, unless the interest of the insured therein is stated in the contract.

Change of interest

The insurer is liable for loss or damage occurring after an authorized assignment under the Bankruptcy and Insolvency Act (Canada) or change of title by succession, by operation of law, or by death.

Material change

Any change material to the risk and within the control and knowledge of the insured avoids the contract as to the part affected thereby, unless the change is promptly notified in writing to the insurer or its local agent, and the insurer when so notified may return the unearned portion, if any, of the premium paid and cancel the contract, or may notify the insured in writing that, if the insured desires the contract to continue in force, the insured must, within fifteen days of the receipt of the notice, pay to the insurer an additional premium, and in default of such payment the contract is no longer in force and the insurer shall return the unearned portion, if any, of the premium paid.

Termination

- (1) This contract may be terminated,
- (a) by the insurer giving to the insured fifteen days' notice of termination by registered mail or five days' written notice of termination personally delivered;

Note: On a day to be named by proclamation of the Lieutenant Governor, clause 5 (1) (a) of the Statutory Conditions set out in section 148 of the Act is repealed and the following substituted: (See: 2019, c. 7, Sched. 33, s. 5 (1))

- (a) by the insurer giving to the insured fifteen days' notice of termination by registered mail or five days written notice of termination personally delivered or delivered by prepaid courier if there is a record by the person who delivered it that the notice has been sent;
 - (b) by the insured at any time on request.
- (2) Where this contract is terminated by the insurer,
- (a) the insurer shall refund the excess of premium actually paid by the insured over the proportionate premium for the expired time, but, in no event, shall the proportionate premium for the expired time be deemed to be less than any minimum retained premium specified; and
 - (b) the refund shall accompany the notice unless the premium is subject to adjustment or determination as to amount, in which case the refund shall be made as soon as practicable.
- (3) Where this contract is terminated by the insured, the insurer shall refund as soon as practicable the excess of premium actually paid by the insured over the short rate premium for the expired time, but in no event shall the short rate premium for the expired time be deemed to be less than any minimum retained premium specified.
- (4) The refund may be made by money, postal or express company money order or cheque payable at par.
- (5) The fifteen days mentioned in clause (1) (a) of this condition commences to run on the day following the receipt of the registered letter at the post office to which it is addressed.

Requirements After Loss

- (1) Upon the occurrence of any loss of or damage to the insured property, the insured shall, if the loss or damage is covered by the contract, in addition to observing the requirements of conditions 9, 10 and 11,
- (a) forthwith give notice thereof in writing to the insurer;
 - (b) deliver as soon as practicable to the insurer a proof of loss verified by a statutory declaration,
 - (i) giving a complete inventory of the destroyed and damaged property and showing in detail quantities, costs, actual cash value and particulars of amount of loss claimed,
 - (ii) stating when and how the loss occurred, and if caused by fire or explosion due to ignition, how the fire or explosion originated, so far as the insured knows or believes,
 - (iii) stating that the loss did not occur through any willful act or neglect or the procurement, means or connivance of the insured,
 - (iv) showing the amount of other insurances and the names of other insurers,
 - (v) showing the interest of the insured and of all others in the property with particulars of all liens, encumbrances and other charges upon the property,
 - (vi) showing any changes in title, use, occupation, location, possession or exposures of the property since the issue of the contract,
 - (vii) showing the place where the property insured was at the time of loss;
 - (c) if required, give a complete inventory of undamaged property and showing in detail quantities, cost, actual cash value;
 - (d) if required and if practicable, produce books of account, warehouse receipts and stock lists, and furnish invoices and other vouchers verified by statutory declaration, and furnish a copy of the written portion of any other contract.
- (2) The evidence furnished under clauses (1) (c) and (d) of this condition shall not be considered proofs of loss within the meaning of conditions 12 and 13.

Fraud

Any fraud or willfully false statement in a statutory declaration in relation to any of the above particulars, vitiates the claim of the person making the declaration.

Who may give notice and proof

Notice of loss may be given and proof of loss may be made by the agent of the insured named in the contract in case of absence or inability of the insured to give the notice or make the proof, and absence or inability being satisfactorily accounted for, or in the like case, or if the insured refuses to do so, by a person to whom any part of the insurance money is payable.

Salvage

(1) The insured, in the event of any loss or damage to any property insured under the contract, shall take all reasonable steps to prevent further damage to such property so damaged and to prevent damage to other property insured hereunder including, if necessary, its removal to prevent damage or further damage thereto.

(2) The insurer shall contribute proportionately towards any reasonable and proper expenses in connection with steps taken by the insured and required under subcondition (1) of this condition according to the respective interests of the parties.

Entry, control, abandonment

After loss or damage to insured property, the insurer has an immediate right of access and entry by accredited agents sufficient to enable them to survey and examine the property, and to make an estimate of the loss or damage, and, after the insured has secured the property, a further right of access and entry sufficient to enable them to make appraisal or particular estimate of the loss or damage, but the insurer is not entitled to the control or possession of the insured property, and without the consent of the insurer there can be no abandonment to it of insured property.

Appraisal

In the event of disagreement as to the value of the property insured, the property saved or the amount of the loss, those questions shall be determined by appraisal as provided under the Insurance Act before there can be any recovery under this contract whether the right to recover on the contract is disputed or not, and independently of all other questions. There shall be no right to an appraisal until a specific demand therefor is made in writing and until after proof of loss has been delivered.

When loss payable

The loss is payable within sixty days after completion of the proof of loss, unless the contract provides for a shorter period.

Replacement

- (1) The insurer, instead of making payment, may repair, rebuild, or replace the property damaged or lost, giving written notice of its intention so to do within thirty days after receipt of the proofs of loss.
- (2) In that event the insurer shall commence to so repair, rebuild, or replace the property within forty-five days after receipt of the proofs of loss, and shall thereafter proceed with all due diligence to the completion thereof.

Action

Every action or proceeding against the insurer for the recovery of a claim under or by virtue of this contract is absolutely barred unless commenced within one year next after the loss or damage occurs.

Notice

Any written notice to the insurer may be delivered at, or sent by registered mail to, the chief agency or head office of the insurer in the Province. Written notice may be given to the insured named in the contract by letter personally delivered to the insured or by registered mail addressed to the insured at the insured's latest post office address as notified to the insurer. In this condition, the expression "registered" means registered in or outside Canada.

Note: On a day to be named by proclamation of the Lieutenant Governor, section 15 of the Statutory Conditions set out in section 148 of the Act is repealed and the following substituted: (See: 2020, c. 36, Sched. 22, s. 3)

Notice

- (1) Written notice may be given to the insurer in the following ways:
 - (a) It may be personally delivered at the chief agency or head office of the insurer in the Province.
 - (b) It may be sent by registered mail to the chief agency or head office of the insurer in the Province.
 - (c) It may be delivered by electronic means. 2020, c. 36, Sched. 22, s. 3.
- (2) Written notice may be given to the insured named in the contract in the following ways:
 - (a) It may be personally delivered.
 - (b) It may be delivered by prepaid courier to the latest address of the insured on the records of the insurer if there is a record by the person who has delivered it that the notice has been sent.
 - (c) It may be sent by registered mail to the latest address of the insured on the records of the insurer.
 - (d) It may be delivered by electronic means, if the insured consents to delivery by electronic means. 2020, c. 36, Sched. 22, s. 3.
- (3) In this condition, the expression "registered" means registered in or outside Canada. R.S.O. 1990, c. 1.8, s. 148; 2016, c. 5, Sched. 14, s. 3