

PET HEALTH PLAN

COMBINED PRODUCT DISCLOSURE STATEMENT, POLICY
TERMS AND CONDITIONS AND FINANCIAL SERVICES GUIDE
ISSUE DATE 1 JULY 2014

PET INSURANCE
FOR GREAT AUSTRALIANS



INSURANCELINE

InsuranceLine Pet Health Plan is distributed and promoted by:
TAL Direct Pty Limited (TAL Direct) ABN 39 084 666 017,
AFSL 243260 of Level 16, 363 George Street,
Sydney NSW 2000.

InsuranceLine Pet Health Plan is arranged and administered through:

PetSure (Australia) Pty Ltd (PetSure) ABN 95 075 949 923,
AFSL 420183 of Level 9, 465 Victoria Avenue, Chatswood,
NSW 2067.

InsuranceLine Pet Health Plan is issued by:

The Hollard Insurance Company Pty Ltd (Hollard)
ABN 78 090 584 473, AFSL 241436 of Level 12,
465 Victoria Avenue, Chatswood, NSW 2067.

IF YOU HAVE ANY QUESTIONS:

Call our friendly customer service team on:

1300 880 750, Monday to Friday (except public holidays)
8:30am to 5:00pm (AEST)

Write to us:

InsuranceLine Pet Health Plan,
Locked Bag 9021,
Castle Hill, NSW 1765

Visit us:

www.insuranceline.com.au

Email us:

insuranceline@insuranceline.com.au

Where words or expressions used in the PDS and Policy Terms and Conditions have a special meaning, we have used the same terms in both sections. Refer to Section 1 – Definitions on page 18 for a full explanation.

In addition, references to:

- **we, our, us, insurer** and **Hollard**, mean The Hollard Insurance Company Pty Ltd.
- **you** and **your** mean the applicant for an InsuranceLine Pet Health Plan policy and, if a policy is issued, the insured.

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INTRODUCTION

This policy booklet contains three parts, your:

- Product Disclosure Statement;
- Policy Terms and Conditions; and
- Financial Services Guide.

PRODUCT DISCLOSURE STATEMENT (PDS)

The PDS is designed to help you understand what you need to know about InsuranceLine Pet Health Plan so that you can decide whether to proceed with this cover. The PDS has been prepared by Hollard, who is the insurer and product issuer. Hollard has sole responsibility for the PDS, for each Pet Health Plan policy issued, and for the assessment and payment of claims.

The PDS describes the main features and benefits of the InsuranceLine Pet Health Plan. Any information contained in the PDS is general information only and does not take into account your individual objectives, financial situation or needs. Before acting on this general information, you should consider the appropriateness of the general information having regard to your individual objectives, financial situation and needs.

POLICY TERMS AND CONDITIONS

The Policy Terms and Conditions of InsuranceLine Pet Health Plan have been written in plain language to help you understand the insurance cover offered, as well as an insured's rights and obligations under a Pet Health Plan policy.

You should carefully read the PDS and the Policy Terms and Conditions in this booklet before making any decision about whether to purchase InsuranceLine Pet Health Plan. Note that you have a cooling off period and certain cancellation rights.

FINANCIAL SERVICES GUIDE (FSG)

The FSG contains important information about the services provided by TAL Direct and other persons or organisations listed in the FSG in relation to InsuranceLine Pet Health Plan, how they are remunerated in relation to the services offered, and their internal and external dispute resolution procedures. It is designed to assist you in deciding whether to use any of their services. TAL Direct and other persons or organisations providing the services are responsible for information relevant to them in the FSG.

FREQUENTLY ASKED QUESTIONS*

QUESTION	ANSWER
ARE ALL ACCIDENTS COVERED UNDER 'ACCIDENTAL INJURY ONLY' COVER?	A broad range of accidental injuries are covered as specified under the Accidental Injuries section on page 22. Accidental Injuries not specified, may be covered under the Illness Cover section if you have selected Illness Cover, subject to the policy Terms and Conditions (refer to your Certificate Of Insurance for details of your cover).
WHAT PERCENTAGE OF MY VET EXPENSES AM I COVERED FOR?	We will reimburse you the Benefit Percentage selected by you which will be shown on your current Certificate of Insurance. <i>For example, for an 80% Benefit Percentage we will reimburse you up to 80% of the eligible Vet Expenses (Excess and limits may also apply. The applicable Excess will be deducted from your benefit amount).</i>
WHAT WAITING PERIODS APPLY?	The Waiting Periods that apply are: - 30 days – for Conditions covered under the Illness and tick paralysis sections. - 6 months – for cruciate ligament Conditions (may be waived on application, refer to the 'Waiting Period' definition on page 21).
WHAT IS A PRE-EXISTING CONDITION?	If any symptoms or signs of a Condition occur or the Condition exists in any form prior to insurance or during the applicable Waiting Period, then it will be considered to be a Pre-existing Condition and it will not be covered (refer to the 'Pre-existing Condition' and 'Bilateral Condition' definitions on pages 18 and 20). <i>For example, if your pet shows first signs of cancer prior to insurance or within the Waiting Period, then cancer will be considered as Pre-existing and all expenses incurred for cancer will not be covered.</i>
WHAT IS AN EXAMPLE OF A BILATERAL CONDITION	An example would be, if your pet displays clinical signs of a cruciate ligament Condition in the left leg prior to insurance or during the Waiting Period (a Pre-existing Condition), Vet Expenses for a subsequent cruciate ligament Condition in the right leg will not be covered (Refer to the 'Bilateral Condition' definition on page 18).
WILL I HAVE LIFELONG COVER FOR MY PET?	Once your pet is accepted and as long as you continue to renew your policy, your pet will be covered for eligible Vet Expenses for life. You can apply for Illness Cover as long as your pet is over 8 weeks old and younger than 9 years. There is no upper age limit to qualify for Accidental Injury cover.
WHAT EXCLUSIONS APPLY?	As with most insurance products, there are certain situations where you will not be covered. It is important that you read all of your policy documentation for full details (including the General Exclusions on page 27).

* Information about insurance coverage in this section is a summary only. You should read the Combined PDS, Policy Terms & Conditions and FSG for full details of Terms and Conditions, Waiting Periods and Exclusions.

PRODUCT DISCLOSURE STATEMENT

Hollard is solely responsible for the PDS and is the insurer under each InsuranceLine Pet Health Plan policy issued. PetSure has been given a binding authority by Hollard which authorises it to enter into, vary and cancel InsuranceLine Pet Health Plan on behalf of Hollard as if it were Hollard, subject to the limits of authority agreed with Hollard. PetSure does not act for you. TAL Direct is authorised to distribute and promote InsuranceLine Pet Health Plan but does not issue policies and is not involved in the assessment or payment of claims.

This PDS contains important information about:

- significant features and benefits of InsuranceLine Pet Health Plan;
- your Duty of Disclosure when applying for InsuranceLine Pet Health Plan;
- our internal and external dispute resolution procedures; and
- your cooling off rights when purchasing InsuranceLine Pet Health Plan.

Please note that, while this PDS provides a summary of the significant features and benefits of InsuranceLine Pet Health Plan, you must also read the Policy Terms and Conditions in this booklet to understand the insurance provided (including what terms, conditions, exclusions and limitations may apply to your Cover).

Sometimes we need to change the wording of the policy before it is issued to you because your insurance varies depending on a number of factors. We do this by adding what is called an endorsement. You will find any endorsements that apply to your policy printed on your Certificate of Insurance.

We may need to update this PDS from time to time if certain changes occur and where required by law. If the change results in a material change from the PDS you hold, we will provide you with a new PDS or supplementary PDS.

PROTECTION FOR YOUR PETS

Subject to the terms, conditions, exclusions and limitations that apply to your Cover (as set out in this document), InsuranceLine Pet Health Plan provides:

- financial protection for Vet Expenses in respect of the insured Pet resulting from sudden and unexpected Accidental Injury or Illness (depending on the level

of Cover selected by you) occurring or first showing clinical signs within the Policy Period and after any applicable Waiting Period; and

- cover for eligible Vet Expenses (as well as allowing you to use the services of any Vet in Australia and, in some cases, overseas).

'Vet Expenses' are defined in Section 1 – Definitions on page 21 and may be subject to stated limits, Excesses and applicable Waiting Periods.

UNDERSTANDING THE LIMITS OF THE INSURANCE

InsuranceLine Pet Health Plan transfers many of the financial risks pet owners face for Vet Expenses from the insured to the insurer. However, InsuranceLine Pet Health Plan does not cover every circumstance or expense and we have certain terms, conditions, exclusions and limitations that help keep premiums low. These include, but are not limited to, conditions such as pregnancy, elective procedures, pet foods/diets, grooming and medical conditions that are present or that you were aware of (or that a reasonable person in your circumstances should have been aware of) prior to the policy Commencement Date or that arise during the applicable Waiting Period.

Full details are specified in the Policy Terms and Conditions (pages 16 to 36).

YOUR OBLIGATION TO US (DUTY OF DISCLOSURE)

Before you enter into a contract of general insurance with us, you have a duty, under the Insurance Contracts Act 1984, to disclose to us every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to accept the risk of the insurance and, if so, on what terms. This includes but is not limited to matters relating to the health of your Pet and the nature and extent of the insurance cover provided.

You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of a matter:

- that diminishes our risk;
- that is of common knowledge;
- that we know or, in the ordinary course of our business, ought to know; or
- as to which compliance with your duty is waived by us.

This duty applies to everyone who is insured under the policy. The duty applies until your InsuranceLine Pet Health Plan policy is entered into and again, where relevant, when it is renewed, extended, varied or reinstated. If anything changes between the time you provide answers or make disclosure and the time the policy is entered into or renewed, extended, varied or reinstated (whichever is relevant), you need to tell us.

If you fail to comply with your Duty of Disclosure or make a misrepresentation, we may be entitled to reduce our liability under the contract of general insurance in respect of a claim (this may be to nil) and/or may cancel the contract.

If your non-disclosure or misrepresentation is fraudulent, we may also have the option of avoiding the contract from its beginning.

CALCULATING YOUR PREMIUM

Your premium is calculated when your InsuranceLine Pet Health Plan policy begins, and at each policy anniversary (and if you vary or extend cover). The premium is calculated based on a number of factors, including the risks associated with the insured Pet and is printed on the relevant Certificate of Insurance. In calculating your premium, we may consider the Cover you have chosen, the Excess selected and the Benefit Percentage applicable to the Cover you have chosen, where you and your Pet permanently live, the species, breed and age of your Pet. The amount you pay includes allowances for government fees, taxes and charges (including stamp duty and GST).

COOLING OFF PERIOD

You have a full 30 days from the policy Commencement Date (or any renewal date) to make sure you are happy with every aspect of your InsuranceLine Pet Health Plan policy. This is known as the “cooling off” period. During this time you may cancel the policy simply by writing to us. If we receive your written request to cancel your policy within the 30 day period after the policy Commencement Date (or any renewal date), we will give you a refund of any monies received since commencement or renewal, less any reasonable administrative and other transaction costs incurred by us, which we are unable to recover and any taxes or duties that we are unable to refund.

You cannot return your InsuranceLine Pet Health Plan policy if you have exercised any of your rights or powers under the policy (e.g. you have made a claim) within the 30 day cooling off period. After the cooling off period ends you continue to be able to cancel your policy and you have rights upon cancellation in certain circumstances under the policy. These rights are set out in Section 8 – Cancellations on page 31.

YOUR PRIVACY

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

In connection with each Recipient:

- personal information is collected in various ways, including via telephone, our website, hard copy forms or email. Whenever you deal with us we will collect this information directly from you unless it is unreasonable or impracticable for us to do so. In some instances we may collect your information from someone else. This may include our authorised representatives, our distributors or referrers, agents or related entities, veterinary service providers, another party involved in a claim, family members, anyone you have authorised to deal with us on your behalf, and/or our legal or other advisers;
- personal information is collected that is reasonably necessary in order for us to provide and offer you our products and services, or otherwise as permitted by law. Such purposes include responding to your enquiries, providing you with assistance you request of us, maintaining and administering our products and services (for example processing requests for quotes, applications for insurance, underwriting and pricing policies, issuing you with a policy, managing claims, processing payments); processing your survey or questionnaire responses; market research and the collection of general statistical information using common internet technologies such as cookies; providing you with marketing information regarding other products and services (of ours or a third party); quality assurance and training purposes; performing administrative operations (including accounting and risk management) and any other purpose identified at the time of collecting your information;
- or disclose all or some of the personal information we request, we may not be able to provide you with our products or services, such as processing your application for insurance, your claim or any payment due to you. It may also prevent us from maintaining or administering your policy or the provision of information regarding our products or services or those of any third party;
- we may collect your personal information so that we or our related entities or other third parties with whom we have a relationship can develop or offer you products and services which we believe may be of interest to you, but will not do so if you tell us not to by contacting us (our contact details are provided in this section);
- where appropriate, we will disclose your information to our related entities and third parties who provide services to us or on our behalf, including our authorised representatives, distributors or referrers, mailing

houses and marketing companies, insurance reference bureaus, reinsurers, credit providers, external IT service providers, other insurance providers and advisers. In the case of claims (or likely claims) it may be disclosed to persons involved in the claim, veterinary service providers, external claims data collectors and verifiers. Your personal information may also be disclosed to the Financial Ombudsman Service or other dispute resolution providers, government bodies, regulators, law enforcement agencies and any other parties where required by law;

- Your personal information may also be disclosed to some of our service providers who are located overseas, including but not limited to the Philippines. Details of who they are may change from time to time. You can contact us for details. In some cases we may not be able to take reasonable steps to ensure they do not breach the Privacy Act and they may not be subject to the same level of protection or obligations that are offered by the Act. By proceeding to acquire our services and products you agree that you cannot seek redress under the Act or against us (to the extent permitted by law) and may not be able to seek redress overseas.

You consent to the use and disclosure of your personal information as set out in this section. Your consent applies whether you become or remain the insured unless you tell us otherwise by contacting us. You can read more about how we collect, use and disclose your personal information or how to make a complaint about a breach of the Australian Privacy Principles in our Privacy Policy which is available on our website or you can request a copy. If you wish to gain access to your personal information (including correcting or updating it), have a complaint about a breach of your privacy or have any other query relating to privacy, please contact the Privacy Officer at:

Hollard

Telephone: **13 19 48**

Email: privacy@hollard.com.au

Mail: The Hollard Insurance Company Pty Ltd
PO Box 199,
Chatswood, NSW 2057

Website: www.hollard.com.au

TAL Direct

Telephone: **1300 880 750**

Email: insuranceline@insuranceline.com.au

Mail: InsuranceLine Pet Health Plan,
Locked Bag 9021,
Castle Hill, NSW 1765

Website: www.insuranceline.com.au

PetSure

Telephone: **(02) 9842 4800**

Email: privacy@petsure.com.au

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

Website: www.petsure.com.au

CODE OF PRACTICE

We are a member of the Insurance Council of Australia and also a signatory of the General Insurance Code of Practice. The objectives of the Code are:

- Promote better, more informed relations between insurers and their customers;
- Improve consumer confidence in the general insurance industry;
- Provide better mechanisms for the resolution of complaints and disputes between insurers and their customers; and
- Commit insurers and the professionals they rely upon to higher standards of customer service.

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

GST GOODS AND SERVICES TAX (GST)

All monetary limits in your policy are inclusive of GST. In the event of a claim, if you are not registered for GST, we will reimburse you the GST component in addition to the amount we pay you. If you are registered for GST, we will not pay you the GST component, you will need to claim the GST component from the Australian Taxation Office.

You must advise us of your correct input tax credit percentage where you are registered as a business and have an Australian Business Number. You are liable to us for any GST liability we incur arising from your incorrect advice or inaction.

IF YOU HAVE ANY QUESTIONS

For more information about InsuranceLine Pet Health Plan, to confirm policy transactions, or if you have any questions about the information contained in the PDS or Policy Terms and Conditions, please call us on **1300 880 750**.

Our lines are open Monday to Friday (except public holidays) 8:30am to 5:00pm (AEST). Alternatively, you can write to InsuranceLine Pet Health Plan, Locked Bag 9021, Castle Hill NSW 1765.

IF YOU HAVE A COMPLAINT

We hope that you never have reason to complain, but if you do we will do our best to work with you to resolve it. Our complaints resolution process has three steps.

1 – Immediate Response

Usually when you have a concern, we can resolve it immediately on the phone. If we can't immediately resolve your concern we will treat it as a complaint and take steps to resolve your matter as soon as possible. Please contact us using one of the following means:

Phone: **1300 880 750**
(Weekdays between 8:30am and 5:00pm
AEST – except public holidays)

Writing: Customer Service Complaints
InsuranceLine Pet Health Plan
Locked Bag 9021
Castle Hill NSW 1765

Please supply your policy number to enable the enquiry to be dealt with promptly. Your complaint or enquiry will be dealt with by someone with appropriate authority.

2 – Internal Dispute Resolution

If we haven't resolved your matter to your satisfaction, at your request (refer to contact details provided for "1 – Immediate Response"), we will escalate your complaint for review by our Internal Disputes Resolution team. All escalated matters will be acknowledged within 2 business days of being escalated. After full consideration of the matter a written final response will be provided that will outline the decision reached and the reasons for the decision.

3 – External Dispute Resolution

In the unlikely event that your complaint is not resolved to your satisfaction, or a final response has not been provided within 45 days, you may be eligible to refer your matter to the Financial Ombudsman Service (FOS), providing your matter is within the scope of the FOS Terms of Reference. The FOS is an independent dispute resolution service provided free of charge. You may contact the FOS at:

Financial Ombudsman Service

Mail: GPO Box 3, Melbourne VIC 3001

Phone: 1300 780 808 (local fee applies)

Fax: (03) 9613 6399

Website: www.fos.org.au

Email: info@fos.org.au

FINANCIAL CLAIMS SCHEME AND COMPENSATION ARRANGEMENTS

We are an insurance company authorised under the Insurance Act 1973 (Cth) (Insurance Act) to carry on general insurance business in Australia by the Australian Prudential Regulation Authority (APRA) and are subject to the prudential requirements of the Insurance Act.

The Insurance Act contains standards designed to ensure that, under all reasonable circumstances, financial promises made by us are met within a stable, efficient and competitive financial system. Because of this we are exempted by the Corporations Act 2001 (Cth) from the requirement to meet the compensation arrangements Australian Financial Services licensees must have in place to compensate retail clients for loss or damage suffered because of breaches by the licensee or its representatives of Chapter 7 of that Act. We have compensation arrangements in place that are in accordance with the Insurance Act.

If we were to fail and were unable to meet our obligations under your policy, a person entitled to claim under insurance cover under the policy may be entitled to payment under the Financial Claims Scheme (access to the Scheme is subject to eligibility criteria). Information about the Financial Claims Scheme can be obtained from the APRA website at <http://www.apra.gov.au> and the APRA hotline on 1300 558 849.

AUTHORISED FOR ISSUE

This PDS including the Policy Terms and Conditions was prepared by Hollard. InsuranceLine and PetSure have given their consent to all statements by or about them in the form and context in which they are included and have not withdrawn as at the date of the PDS.

These statements appear throughout the PDS.

POLICY TERMS AND CONDITIONS

THE INSURANCELINE PET HEALTH PLAN

Upon acceptance of application for your Cover, you will be issued a Certificate of Insurance. We will issue a new Certificate of Insurance:

- on renewal of your policy each year; or
- if you or we change your Cover.

Your policy will continue for a period of twelve (12) months from the policy Commencement Date unless cancelled by you under the cooling off period as explained on page 10 or cancellation provisions of the policy as explained in Section 8 – Cancellations on page 31. We also have certain cancellation rights at law. For your convenience and to ensure continuity of cover for your Pet, we will automatically renew your policy each year, refer to the “Automatic renewal of your policy” section on page 17).

Your policy comprises of the Certificate of Insurance, PDS, Policy Terms and Conditions, FSG and any endorsements issued by us from time to time.

THE BASIS ON WHICH WE INSURE YOU

Subject to the terms and conditions of the policy, we will reimburse the Vet Expenses incurred by you as a result of a Treatment to the insured Pet for covered Accidental Injury or Illness Conditions up to the specified Benefit Percentage and Benefit Limit, less any Excess which may apply provided that:

- you have paid or agreed to pay the premium to us for the Cover provided;
- the Accidental Injury or Illness Conditions (whichever is applicable) arose during the Policy Period; and
- the Treatment occurred during the Policy Period.

Where we agree to provide Cover under the policy we rely on the representations made by you during your application for insurance.

Cover under the policy will depend on the level of Cover you have chosen. Your Certificate of Insurance will state whether your Pet is covered for Accidental Injury only, or for both Accidental Injury and Illness.

Additional and optional benefit(s) may also be provided if specified on your Certificate of Insurance.

AUTOMATIC RENEWAL OF YOUR POLICY

We will advise you regarding renewal of your policy prior to the expiration of the current policy. We reserve our rights to change the terms and conditions of the policy upon renewal to reflect the risk associated with insuring your Pet based on factors such as (but not limited to) your Pet's age, location and medical history.

Unless otherwise notified, your Cover will be automatically renewed on the terms contained in the renewal offer. We require you to notify us in writing should you decide not to renew your policy.

DELIVERY OF YOUR POLICY DOCUMENTS

If you have agreed to receive your policy documents and notices electronically (via email), all notifications successfully delivered to the last notified email address will be deemed to have been received by you on the transmission date recorded in our systems. If at law we are not obligated to provide printed versions of material delivered electronically, we may nevertheless choose to deliver certain notifications by mail in printed form. All such notifications will be deemed to have been successfully delivered once mailed by us to you at your last notified postal address.

SOME IMPORTANT THINGS YOU SHOULD KNOW

Benefits do not accumulate across Policy Periods. The policy benefits will expire at the end of each Policy Period.

Your rights and duties under the policy cannot be transferred without our prior written consent.

It is a condition of cover that your Pet must regularly reside with you and be under your regular care and supervision at the physical address you provided to us.

1 | DEFINITIONS

When interpreting these Policy Terms and Conditions:

- references to the singular include the plural and vice versa, and to the masculine include the feminine and vice versa; and
- monetary references are in Australian dollars.

Words that are capitalised have the special meaning explained below:

Accidental Injury means physical harm or injury arising from an accident. For the purposes of this policy, an accident is:

- a single specific, unpredictable, unusual and unintended external event which occurs at a particular time and place, with no apparent or deliberate cause but with marked effects; and
- is independent of any other cause including any Pre-existing Condition.

Note: Conditions covered by the Accidental Injury Cover Section of the policy are specified in Section 2 on page 22.

Benefit Limit means the total amount payable under your policy for each Cover selected. This is the annual maximum amount, inclusive of any applicable sub-limits that we will pay within the Policy Period as shown on your Certificate of Insurance. Note: The Benefit Limit may be subject to any Excess payable.

Benefit Percentage means the stated percentage of each claim for eligible Vet Expenses for which we will reimburse you, subject to any applicable Benefit Limits and Excesses. Note: The applicable Benefit Percentage will be shown on your Certificate of Insurance.

For example: for an 80% Benefit Percentage we will reimburse you for 80% of the eligible Vet Expenses, subject to Benefit Limits and Excesses payable. Refer to page 10 for an example of how claim payments are calculated.

Bilateral Condition means any Condition affecting body parts of which the Pet has at least two, one each side of the body (e.g. ears, eyes, knees, cruciate ligaments). Note: When applying a Benefit Limit or exclusion, a Bilateral Condition will be considered a single Condition.

For example: if your Pet displays clinical signs of a cruciate ligament Condition in the left leg prior to the Commencement Date of the policy or during the Waiting Period, Vet Expenses for a subsequent cruciate ligament Condition in the right leg will not be covered.

Certificate of Insurance means the relevant certificate we provide outlining the key details of the contract of insurance between you and us, and identifying the policy number, Commencement Date, Cover End Date, insured Pet, schedule of benefits including Benefit Limits.

Commencement Date means 23h59 on the date when Cover for your Pet first started as shown on your Certificate of Insurance.

Condition means any Accidental Injury, or any manifestation of an Illness.

Cover means:

- Accidental Injury Cover only; or
- Accidental Injury and Illness Cover.

Note: The Cover applying to your Pet is shown on your Certificate of Insurance. The Cover includes the Additional Benefits explained in Section 4 on page 24 and if selected the Optional Benefit explained in Section 5 on page 26.

Elective Treatment means a Treatment or surgery that is beneficial to your Pet but is not essential for your Pet's survival or does not form part of the Treatment for a Condition. Refer to Section 6 – General Exclusions on page 27.

End Date means 23h59 on the date upon which your policy terminates and benefits cease. Note: The End Date is shown on your Certificate of Insurance. If the policy is cancelled, then the date of cancellation will be deemed to be the End Date.

Excess means the first amount of a claim we do not pay and which you are required to pay yourself as shown on your Certificate of Insurance. Note: The Excess is deducted from your benefit for each Condition treated during the Policy Period that is not related to any other Condition treated during the same Policy Period. Refer to page 33 for an example of how claim payments are calculated.

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

Illness means a sickness or disease diagnosed by a Vet which is not included under Accidental Injury Cover.

Pet means a dog or cat covered under the policy and named on your Certificate of Insurance.

Policy Period means the time during which we provide Cover as specified on your Certificate of Insurance.

Pre-existing Condition means any Condition(s) or symptoms or signs of that Condition occurring or existing in any form prior to the Commencement Date or during any applicable Waiting Period. Including but not limited to:

- any cruciate ligament Condition;
- any Skin Condition (as defined);
- latent infectious Conditions that manifest within a known incubation period indicating clear evidence that the Condition had existed prior to the Commencement Date;
- any Condition in remission at the time of the insurance application;
- any seasonal Condition;
- Conditions currently or previously being controlled by medication(s);

and whether or not diagnosed or treated by a Vet. (If your Pet has a Pre-existing Condition, please also refer to definitions for a “Related Condition” and a “Bilateral Condition”).

Related Condition means a Condition that even though it has shown first signs or symptoms during the Policy Period (outside of the Waiting Period), is considered to be a Pre-existing Condition if it has the same clinical symptoms, diagnostic classification or results from the same disease process as a Pre-existing Condition regardless of the number of areas of your Pet’s body affected.

For example: if your Pet suffers from arthritis in its legs prior to the Commencement Date of the policy or during the Waiting Period, all future occurrences of arthritis for example in the back or neck, will be considered to be Related Conditions and will not be covered.

Routine Care means stated benefits provided for certain listed preventative healthcare treatments for your Pet. The list of allowable treatments and the benefit amounts applicable to these are shown on your Certificate of Insurance.

Skin Condition means any Condition regardless of cause or origin presenting in or affecting the skin (as an organ) in any way whatsoever. Note: For the purposes of the policy Skin Conditions are:

- deemed to include skin lumps;
- regarded as one Condition.

Treatment means reasonable and customary examinations, consultations, hospitalisation, surgery, x-rays, medication, diagnostic tests, nursing and other care and procedures provided by a Vet to relieve or cure a disease, illness or Accidental Injury during the Policy Period.

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

Vet Expenses means the reasonable, customary and essential expenses incurred and paid in respect of Treatment provided by a Vet during the Policy Period.

Waiting Period means a period starting from the Commencement Date of the first Policy Period during which a Condition that occurs or shows symptoms or signs will be excluded from Cover unless otherwise stated on your Certificate of Insurance.

Note: The Waiting Period for:

1. Conditions covered under Section 3 – Illness Cover on page 23 and, if applicable, Section 4.3 – Paralysis Tick Benefit on page 25, are subject to 30 days; and
2. Cruciate ligament Conditions and any Conditions arising therefrom irrespective of cause or origin, are subject to 6 months, unless:
 - we have received a completed and signed ‘Cruciate Ligament Exam Form’ from your Vet within fourteen (14) days of the cruciate examination date certifying that your Pet has been examined, at your expense, on or after the policy Commencement Date; and
 - you receive written notification from us confirming our agreement to waive this Waiting Period following our assessment of the information provided on the ‘Cruciate Ligament Exam Form’.

Any waiver is at our discretion and we are not required to provide justification for declining a request under this provision.

2 | ACCIDENTAL INJURY COVER

Accidental Injury Cover is applicable if:

- it is shown on your Certificate of Insurance; and
- your Pet was at least 8 weeks of age at the Commencement Date.

2.1 WHAT WE WILL PAY

We will pay you the Benefit Percentage for the Vet Expenses incurred by you for Treatment during the Policy Period up to the Benefit Limits, as a result of your Pet suffering an Accidental Injury in one of the circumstances described below. You will be responsible for any Excess as shown on the applicable Certificate of Insurance.

To qualify for Cover under this section of the policy, the Accidental Injury must have occurred during the Policy Period and:

- (a) be a direct consequence of at least one of the following:
1. a motor vehicle incident;
 2. a burn or electrocution; or
 3. an allergic reaction to an insect bite other than tick or flea bites;
- or
- (b) result in:
4. a bone fracture;
 5. snake bite toxicity;
 6. a traumatic ligament or tendon injury;
 7. a bite wound or fight wound abscesses; or
 8. lacerations or abrasion of tissue, skin or mucous membrane due to external violence.

2.2 WHAT WE WILL NOT PAY

We will not pay any Vet Expenses attributable to or resulting from:

1. a Pre-existing Condition, a Related Condition or a Condition arising within the applicable Waiting Period;
2. patella luxations (dislocating kneecap), elbow dysplasia, fractured teeth, toxicity (other than that resulting from a confirmed snake bite) and intervertebral disc disease (IVDD) under Accidental Injury Cover no matter how the Condition arises. These Conditions will only be covered (where eligible) under Section 3 - Illness Cover on page 23 if you have selected that level of Cover; or
3. any of the excluded matters listed in Section 6 - General Exclusions on page 27.

3 | ILLNESS COVER

Illness Cover is applicable if:

- it is shown on your Certificate of Insurance; and
- your Pet was over 8 weeks old and younger than 9 years of age when Cover first commenced.

Pets over 9 years of age will not qualify for Illness Cover where there has been a break, lapse or change in the level of Cover after reaching the age of 9.

3.1 WHAT WE WILL PAY

We will pay you the Benefit Percentage for Vet Expenses incurred by you for Treatment provided during the Policy Period up to the Benefit Limits, as a result of your Pet suffering an Illness. You will be responsible for any Excess as shown on the applicable Certificate of Insurance.

3.2 WHAT WE WILL NOT PAY

We will not pay any Vet Expenses incurred by you as a result of your Pet suffering an Illness which is attributable to or resulting from:

1. a Pre-existing Condition, a Related Condition or a Condition arising within the applicable Waiting Period;
2. an Illness caused by endoparasites (such as worms) or ectoparasites (such as ticks, fleas, skin mites) unless covered under Section 4.3 - Paralysis Tick Benefit which is detailed on page 25;
3. Treatment of the following irrespective of whether your dog or cat was vaccinated or not:
 - a. for dogs: infectious canine hepatitis (canine adenovirus), parvovirus, canine distemper, parainfluenza and all forms of kennel cough; or
 - b. for cats: panleukopaemia, chlamydia, leukaemia (FeLV), Feline Immuno Deficiency Virus (FIV) and Feline Infectious Peritonitis (FIP), viral rhinotracheitis, calicivirus, herpes virus and all forms of cat flu;
4. any declared pandemic disease that causes widespread Illness affecting dogs or cats;
5. more than one (1) incident of swallowing a foreign object that causes a blockage or obstruction requiring surgical or endoscopic removal per Policy Period; or
6. any of the excluded matters listed in Section 6 – General Exclusions on page 27.

4 | ADDITIONAL BENEFITS

The following Additional Benefits under this section are included in the Benefit Limit and will provide benefits up to the specified sub-limit as shown on your Certificate of Insurance.

4.1 EMERGENCY BOARDING

What we will pay

If you, (the insured and sole carer of the Pet) are hospitalised (other than in the circumstances specified below) for five (5) or more consecutive days during the Policy Period, we will pay for the cost of boarding your Pet at a licensed kennel or cattery up to the Benefit Limit.

We will not pay

1. If you are hospitalised for:
 - a. cosmetic surgery or other forms of elective surgery;
 - b. pregnancy; or
 - c. any sickness known or foreseeable prior to the Commencement Date;
2. Any costs under this benefit if someone else living with you can reasonably be expected to look after your Pet whilst you are in hospital.

4.2 ESSENTIAL EUTHANASIA

What we will pay

We will pay you the Benefit Percentage for Vet Expenses incurred by you up to the Benefit Limit to euthanase your Pet during the Policy Period provided that this was deemed a humane and essential course of action by the Vet. You will be responsible for any Excess as shown on the applicable Certificate of Insurance.

We will not pay

We will not pay any Vet Expenses incurred by you during the Policy Period for:

1. voluntary euthanasia (i.e. non-essential euthanasia);
2. euthanasia attributable to or resulting from an event or circumstances specified in “What we will not pay” sections 2.2 on page 22 or 3.2 on page 23 and in Section 6 – General Exclusions on page 27;
3. an autopsy; or
4. disposal, burial or cremation of a deceased Pet (unless cover for this expense is noted on your Certificate of Insurance).

4.3 PARALYSIS TICK BENEFIT

What we will pay

We will pay you the Benefit Percentage for Vet Expenses incurred by you up to the sub-limit shown for tick paralysis Treatment on your applicable Certificate of Insurance, less any Excess.

What we will not pay

1. any tick preventative Treatments or measures (e.g. tick baths, sprays, etc.) whether recommended by your Vet or not;
2. any costs incurred in relation to the Treatment of Conditions arising in your Pet caused by the bite of any other species of tick; or
3. for any tick paralysis Treatment or Related Conditions unless your Pet is covered under Section 3 - Illness Cover on page 23.

4.4 PET OVERSEAS TRAVEL INSURANCE

What we will pay

We will pay for Vet Expenses incurred for the Treatment of your Pet whilst it is overseas with you in destinations where Australian quarantine regulations do not require the Pet to be quarantined on its return, subject to:

- the Cover selected, the Benefit Percentage, Benefit Limits and any Excess as shown on your applicable Certificate of Insurance; and
- the payment of the benefits under this section to you in AUD at the exchange rate applicable on the date your claim is received by us.

What we will not pay

1. any amount if you or your Pet live permanently outside of Australia;
2. any benefit under this section where the Pet has been (or is going to be) out of Australia for a period of more than sixty (60) consecutive days;
3. exchange commissions or bank charges incurred for foreign payments made by you for the Treatment of your Pet;
4. claims incurred for any Condition arising when your Pet was not under your direct care;
5. costs covered by any other insurance policy covering the same risk; or
6. any travel or repatriation charges to return your Pet to Australia.

5 | ADDITIONAL BENEFITS

5.1 ROUTINE CARE

InsuranceLine encourages responsible Pet ownership by providing stated benefits towards certain listed preventative healthcare treatments for your Pet if the Routine Care Benefit option is shown on your Certificate of Insurance.

What we will pay

If the Routine Care Benefit option is shown on your Certificate of Insurance, we will pay the cost of Routine Care your Pet has received during the Policy Period up to the Routine Care limits as shown on your applicable Certificate of Insurance.

6

GENERAL EXCLUSIONS

(what we do not cover)

The intention of InsuranceLine Pet Health Plan is to help cover unforeseen Vet Expenses associated with pet ownership. However not all expenses are covered.

Unless stated on your Certificate of Insurance, Vet Expenses and/or costs related to the following are not covered:

- 1 Pre-existing Conditions** - refer to page 20 for definition. Also refer to the 'Pre-existing Condition review' section on page 29.
- 2 Dental Care** - dental procedures; dental diseases; gingivitis; Treatment of teeth fractures; teeth cleaning/ scaling; orthodontics; removal of deciduous or fractured teeth or any oral disease.
- 3 Day to Day Care**
 - a. regular, prescription or dietary pet food, vitamins, mineral supplements, whether recommended by your Vet or not;
 - b. preventative procedures and treatments (including, but not limited to, vaccinations, routine anal gland expression, flea/tick/worm control);
 - c. grooming and bathing of your Pet (including medicated baths and shampoos);
 - d. accessories such as but not limited to - pill poppers, cage hire, crates, bedding and collars;
 - e. training, socialisation, therapy and alternative therapies (including, but not restricted to, consultations and Treatments involving homeopathic remedies, acupuncture, laser therapy, chiropractic treatments and/or physiotherapy) whether recommended by your Vet or not; or
 - f. Treatment while your Pet is used for commercial or occupational purposes including but not limited to racing, breeding, organised fighting, law enforcement, guarding or pig hunting dogs. Guide Dogs and Assistance Dogs are exempt from this exclusion.

4 Certain Treatments & Conditions

- a. Treatment of or Conditions attributable to behavioural problems regardless of the cause (including but not limited to anxiety disorders, phobias or chemical imbalance);
- b. cell-replacement therapies, including but not limited to stem cell therapy. This exclusion does not include blood transfusions, which are covered when medically necessary;
- c. a Condition where the diagnosis is inconclusive, but where the Treatment protocol is consistent with a Treatment protocol typically applied to an Accidental Injury or Illness which is not covered (e.g. Treatment for coughing where kennel cough is suspected but not diagnosed or excluded as a diagnosis);
- d. Treatment for Conditions excluded by the policy and/or due to complications and/or adverse reactions arising from any Policy Exclusion;
- e. medication not approved or listed by the APVMA (Australian Pesticides and Veterinary Medication Authority) unless specifically agreed to by us in writing;
- f. the provision of medication(s) for your Pet that covers a period of more than thirty (30) days beyond the policy End Date;
- g. your decision to pursue a course of Treatment other than that which was recommended to you by your Vet unless specifically authorised by us prior to Treatment. For example: ignoring a Vet's recommendation to remove an eye, which then results in extra costs associated with chronic eye issues; or
- h. breeding or obstetrics, or Treatment of Conditions arising as a result of breeding or obstetrics.

5 Certain Services & Procedures

- a. transport or boarding expenses other than the benefits provided in Section 4.1 – Emergency Boarding on page 24, regardless of reason;
- b. ambulance fees and non-essential hospitalisation;
- c. house calls and out-of-hours Treatment unless the Vet believes an emergency consultation was necessary, in which case our liability is limited to the amount that would have been payable had the Treatment been provided at a Vet practice during normal consultation hours;
- d. genetic/chromosome testing including procedures to determine the suitability or categorisation of your Pet for breeding or genealogical purposes; or

- e. organ transplant surgery, artificial limbs, prosthetics, pacemakers and any associated expenses unless authorised and agreed to by us in writing prior to any Treatment.

6 Elective Procedures and Treatments

- a. routine examinations; cosmetic procedures; experimental Treatments or therapies; desexing; cryptorchidism; hip and elbow scoring; Elective Treatments, including but not limited to nail clipping, tail docking, debarking, pre-anaesthetic blood tests, declawing, ear cropping and nasal fold, skin fold, stenotic nares and soft palate resections.

7 Your Pet not being Protected

- a. a malicious act, deliberate injury or gross negligence caused by you or anyone living with you; or
- b. your failure to take all reasonable precautions to protect your Pet from situations that may result in injury or Illness (such as ingestion of hazardous substances) or from aggravating a treated Condition.

8 Policy Conditions

- a. any consequential loss, economic or otherwise, loss of enjoyment or other such loss not mentioned in the policy; or
- b. a Condition specifically excluded on your Certificate of Insurance.

PRE-EXISTING CONDITION REVIEW

You may apply to us to review a Pre-existing Condition exclusion provided that your Vet certifies and provides (at your expense) veterinary records verifying that your Pet has been free of clinical signs, symptoms or recurrence of the Pre-existing Condition (or any Condition(s) arising directly therefrom) up to the date of receipt of your Review Application Form, which shall be no less than a period of eighteen (18) months from the original policy Commencement Date.

Your request for this review must be made in writing after the completion of the eighteen (18) month period using our prescribed Review Application Form. The Pre-existing Condition exclusion(s) shall not be deemed to have been lifted unless agreed to by us in writing. Agreement to lift all or part of the exclusion(s) is at our sole discretion and we are not obligated to provide reasons for declining a request.

7 | PREMIUMS

Cover under the policy is provided on the basis that you have paid or agreed to pay us the premium for the Cover provided. The amount you pay is shown on your Certificate of Insurance and includes all premium, administration fees, commissions and any applicable government taxes, fees and/or charges.

7.1 PAYING YOUR PREMIUM

1. The premium is payable when you take out a new policy and when you renew your policy.
2. You may choose to pay the premium:
 - annually by credit card or direct debit; or
 - monthly or fortnightly by instalment by credit card or direct debit.
3. When premiums are paid monthly or fortnightly by instalment, claims are paid on the basis that you agree to pay the remaining premiums for that Policy Period.

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

7.2 PAYING ON THE DUE DATE

1. Your policy will not operate until you have paid your premium (or your first instalment if you have elected to pay by instalments).
2. Your premium must be paid on or before its due date.
3. If you don't pay a premium instalment by the due date then:
 - if the unpaid premium remains in arrears for more than thirty (30) days we may cancel your policy without notification; and
 - if at least one instalment has remained unpaid for a period of at least fourteen (14) days then we may refuse to pay your claim/s.
4. If we cancel your policy due to non-payment of an instalment premium you need to be aware that:
 - no benefits or entitlements can be paid under the policy,
 - you may be refused cover in the future under any policy administered by PetSure, and
 - any application for general insurance products in the future may be affected because you had a policy cancelled as a result of unpaid premiums.

8

CANCELLATIONS

8.1 CANCELLATION BY YOU

You may cancel your policy at any time by giving us notice in writing of your intention to do so. The cancellation will be effective at the time the notice of cancellation is received by us.

We will only accept notices of cancellation given in writing and signed by you. We will not accept cancellation requests by telephone or email unless agreed to by us. If you do cancel your policy for any reason other than the death of your pet, you will be charged a cancellation fee.

If you return your policy during the 30 day cooling-off period, we will refund any premiums paid since commencement or renewal, less any reasonable administrative and other transaction costs incurred by us, which we are unable to recover and any taxes or duties that we are unable to refund. You cannot return your policy if a claim has been made or other right exercised under the policy.

If you cancel the policy after the cooling off period and you have paid the annual premium in full, provided no claim has been made or other right exercised under the policy, we will refund the premium less an amount that covers the period for which your Pet was insured, and any statutory fees.

If you cancel your policy for whatever reason (other than the the death of your Pet) after having made a claim, no premium refunds are payable and the remaining premium for that Policy Period must be paid. Any outstanding premium may be deducted from any claim payment owed, or alternatively, charged to your nominated bank/credit card account. This clause survives termination of this contract.

8.2 CANCELLATION BY US

We may cancel your policy where the law allows us to do so. If we cancel your policy, we will refund any money we owe you less any non-refundable statutory fees. If we cancel your policy due to fraud, we will not refund any money to you.

For more information about cancellations refer to Section 7 - 'Premiums' on page 30.

9 | CLAIMS

9.1 WHAT YOU NEED TO DO

1. All claims must be completed carefully and honestly on an InsuranceLine Pet Health Plan claim form, and then submitted by mail to InsuranceLine Pet Health Plan. Claim forms are available on request by calling 1300 880 750 or can be downloaded from www.insuranceline.com.au.
2. If submitting a claim for the first time, please include a full veterinary history from the attending Vet and any previous Vets who have treated your Pet. Failure to include this may result in delays in processing your claim.
3. All claims should be submitted and received within ninety (90) days of the relevant Treatment being provided.
4. The attending Vet must complete the section on the claim form where designated.
5. Both you and the attending Vet must sign the claim form.
6. Please attach the original itemised invoices and payment receipts to the completed claim form. All claim documentation must be originals. Incomplete claim forms will be returned to you and this may result in a delay in processing your claim.
7. You agree that your Vet (current or previous) is authorised to release information and/or records to us about your Pet.
8. You agree that we are authorised to discuss with the Vet, details relating to your claim or Treatment provided to your Pet in relation to a claim made under the policy.
9. You agree that we have the right to decline a claim where you or your Vet refuse or are unable to provide information reasonably requested by us to process your claim.
10. We will not reimburse you for the provision of any information required in the administration or execution of the policy including the provision of any information in relation to a claim made under this policy nor for the assistance provided to you in the completion of any form relating to the policy.

9.2 WHAT WE WILL DO

1. We will deal directly with you regarding settlement of the claim.
2. We will pay you, not the Vet.
3. If the Vet Expenses:
 - a. are considered by us to be excessive or unreasonable; or
 - b. are higher than the Vet Expenses normally charged by a general or referral practice; or
 - c. in our opinion may not be required; or
 - d. are regarded to be excessive when compared with the Treatment normally recommended to treat the same Condition by general or referral practices, then claim payments will be adjusted and paid based on the reasonable and customary Treatment or fees typically charged for the Treatment of that Condition. We reserve the right to request a second opinion from a Vet that we choose. If the Vet we choose does not agree that the Treatment provided or fees charged were reasonable, we may decide to pay only the cost of the Treatment that was necessary and/or reasonable to treat the Condition (as advised by the Vet from whom we have requested the second opinion).
4. We will send you a letter/remittance advice regarding the settlement of your claim that will provide details of how your claim has been dealt with.
5. If you submit a fraudulent claim, or solicit your Vet to behave in a fraudulent manner regarding a claim, then the claim may be denied and we may cancel your policy altogether. We may also be entitled to reclaim any payments already made to you in respect of such claims.
6. When we settle your claim, we reserve the right to deduct from the benefit amount any amount due to us.
7. In the event that we pay a benefit contrary to the Policy Terms and Conditions for whatever reason, this will not constitute a waiver of our rights to apply the Policy Terms and Conditions retrospectively as they stand to any paid claims or to any future claims for that or any Related Condition. We also reserve our right to recover from you any benefit amount received by you as a result of such error.

9.3 EXAMPLES OF HOW WE SETTLE YOUR CLAIM

The following calculations provide examples of how claims will be settled where Cover is provided (these examples are indicative of the manner of calculation only and include GST):

Example 1

80% Benefit Percentage with a NIL Excess	
Total amount of eligible Expenses paid by you to the Vet	\$2,000
Total amount claimable after 80% Benefit Percentage applied	\$1,600
Total payment	\$1,600

Example 2

80% Benefit Percentage with a \$100 Excess option	
Total amount of eligible Expenses paid to Vet	\$2,000
Total amount claimable after 80% Benefit Percentage applied	\$1,600
Less \$100 Excess	(\$100)
Total payment	\$1,500

9.4 OUR RIGHTS OF RECOVERY

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

9.5 OTHER INSURANCE ARRANGEMENTS

If we accept your claim and there is any other similar insurance under which you are entitled to claim, you are required to advise us at the time you submit your claim if you hold such other insurance. Total benefits paid to you across all insurance cannot exceed your actual expenses.

10 | DIRECT DEBIT REQUEST SUMMARY

When you provide us with your bank details, you are instructing us to directly debit the relevant premiums calculated by us from your nominated account.

If your premium cannot be paid (for example there is not enough money in your nominated account) your bank may dishonour that payment, and you may be charged a dishonour fee by your bank. Neither Hollard, InsuranceLine nor PetSure will be responsible for dishonour fees charged by your bank or financial institution. If your direct debit is dishonoured we will automatically retry for the outstanding amount within fourteen (14) days.

If you have concerns about the operation of the direct debit authority or you subsequently need to change any aspects of the authority, please notify us.

11 | GENERAL INFORMATION

CHANGING LEVEL OF COVER

1. If you opt to transfer your Pet to a level of Cover with higher or additional benefits (including but not limited to a higher Benefit Percentage or lower Excess) then the additional or higher benefits will not apply to claims for Conditions first noted, diagnosed, or treated prior to the policy upgrade. In such cases, benefits will be restricted to the lesser of the maximum benefits payable under the:
 - a. current level of Cover; or
 - b. policy that applied during the Policy Period in which such Condition(s) was/were first noted, diagnosed, or treated.

For the sake of clarity, maximum benefits referenced in this section include taking the following factors into consideration:

- the policy Benefit Limit;
 - applicable sub-limits;
 - applicable Benefit Percentage and Excess; and
 - any applicable policy exclusions.
2. If you opt to transfer your Pet to a level of Cover with additional benefits, for example Accidental Injury Cover to the Accidental Injury and Illness Cover, then the applicable thirty (30) day Waiting Period for the Illness Cover will apply.

FINANCIAL SERVICES GUIDE (FSG)

PetSure and TAL Direct are responsible for this FSG as it relates to the financial services provided by them. This FSG provides you with information about the financial services that they provide in relation to InsuranceLine Pet Health Plan (to help you decide whether or not to use those services) as well as information on how they are remunerated in relation to the services, how they deal with complaints and how they can be contacted.

In this FSG:

- **Hollard** means The Hollard Insurance Company Pty Ltd.
- **TAL Direct** means TAL Direct Pty Limited.
- **PetSure** means PetSure (Australia) Pty Ltd.
- **You**, and **your** means the applicant for an InsuranceLine Pet Health Plan policy and, if a policy is issued, the insured.

InsuranceLine Pet Health Plan is promoted by TAL Direct, insured by Hollard and administered by PetSure. Full details about these companies are given at the start of this booklet on page 2. The InsuranceLine Pet Health Plan PDS including the Policy Terms and Conditions are set out in this booklet. The InsuranceLine Pet Health Plan PDS contains information on the benefits and significant characteristics of the product and is aimed to assist you in making an informed decision about whether to purchase it or not. Before you acquire the product, you should read the PDS carefully and use it to decide whether to purchase the product.

ABOUT HOLLARD, INSURANCELINE, PETSURE AND OTHER RELEVANT PERSONS/ ORGANISATIONS

Hollard is an Australian Financial Services Licensee (AFSL 241436) authorised to provide advice and deal in relation to all general insurance products. Hollard is the insurer and issuer of InsuranceLine Pet Health Plan policies. In providing the financial services set out in this FSG, Hollard does not provide personal advice and does not act for you.

TAL Direct is authorised to promote InsuranceLine Pet Health Plan which is issued by Hollard. TAL Direct holds an Australian Financial Services Licence (AFSL 243260) and is part of the TAL Dai-ichi Life Australia Pty Limited ABN 97 150 070 483 group of companies. TAL Direct does not act for you.

PetSure, a related company to Hollard, is an Australian Financial Services Licensee (AFSL 420183) authorised to deal in and provide general advice on general insurance products. It administers pet insurance policies on behalf of the insurer Hollard and determines, on behalf of Hollard, whether a policy can be issued to you by Hollard.

PetSure has been given a binding authority from Hollard which authorises it to enter into, vary and cancel these policies on behalf of Hollard as if it were Hollard. PetSure's authority is subject to the limits of authority agreed with Hollard. PetSure has also been appointed by Hollard as its agent to manage, administer and settle claims made under InsuranceLine Pet Health Plan policies. This means PetSure makes decisions about claims on behalf of Hollard. In providing the financial services set out in this FSG PetSure does not provide personal advice and does not act for you.

IMPORTANT INFORMATION YOU SHOULD KNOW

The organisations in this section have not and will not consider whether InsuranceLine Pet Health Plan is appropriate for your personal objectives, financial situation or needs as they do not provide such services to you. Any information provided in relation to this product is of a general nature only and is not based on a consideration of your personal needs, objectives or financial situation. Therefore you need to consider the appropriateness of any information given to you, having regard to your personal circumstances before buying InsuranceLine Pet Health Plan. You need to read the PDS including the Policy Terms and Conditions to determine if the product is right for you. The PDS contains information on the relevant risks, benefits and significant characteristics of the product and is aimed to assist you in making an informed decision about whether to buy it or not. If you require personal advice, you need to obtain the services of a suitably qualified adviser.

HOW EACH PARTY IS PAID FOR ITS SERVICES

When you purchase an InsuranceLine Pet Health Plan policy you pay the premium to Hollard for the product. This amount is provided to you before the product is purchased.

TAL Direct may receive a commission of up to twenty percent (20%) of the net premium (this is the premium less any government taxes and charges) for promoting InsuranceLine Pet Health Plan policies. This commission is used by TAL Direct to cover costs associated with the marketing and distribution of this product to you and may include any referral fees to people or organisations that refer new customers to TAL Direct.

PetSure receives a portion of the underwriting profit, if any, for administering InsuranceLine Pet Insurance products. You may request particulars about the above remuneration (including commission) or other benefits from the relevant entity providing the relevant financial service; however, the request must be made within a reasonable time after you have been given this document and before the relevant financial service has been provided to you by them. The contact details for each of TAL Direct and PetSure are set out on pages 39 and 40.

COMPENSATION ARRANGEMENTS

The Corporations Act 2001 (Cth) requires Australian Financial Services licensees to have arrangements for compensating retail clients for losses they suffer as a result of a breach by the licensee or its representatives of Chapter 7 of that Act, unless an exemption applies.

To this end TAL Direct and PetSure have Professional Indemnity Insurance in place which meets the legislative requirements covering their activities and includes the conduct of any employees who are no longer employed by InsuranceLine or PetSure but were so at the time of the relevant conduct.

Refer to the “Financial Claims Scheme and Compensation Arrangements” section on page 15 in the PDS for further information on Hollard’s compensation arrangements.

YOUR PRIVACY

Refer to the “Your Privacy” section on page 11 of the PDS for further information on what we do with your information.

HOW ARE COMPLAINTS RESOLVED?

Refer to the “If you have a complaint” section on page 14 of the PDS for further information on how complaints are dealt with.

CONTACT DETAILS AND OFFICE HOURS

For more information about InsuranceLine Pet Health Plan and PetSure:

Call us:

1300 880 750

Monday to Friday (except public holidays)
8:30am to 5:00pm (AEST)

Write to us:

InsuranceLine Health Plan
Locked Bag 9021
Castle Hill, NSW 1765

Visit us:

www.insuranceline.com.au

Please retain this document for your future reference.

Authorised for issue

This FSG was prepared by PetSure and InsuranceLine (as it relates to the financial services provided by them) on 14/04/2014 and Hollard has authorised the distribution of this FSG by them.

Monday to Friday (except public holidays)

8:30am to 5:00pm (AEST) or visit

www.insuranceline.com.au

InsuranceLine Pet Health Plan

Locked Bag 9021, Castle Hill, NSW 1765

P 1300 880 750

W www.insuranceline.com.au

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1300 880 750 8.30am – 5.00pm (AEST) Monday to Friday
InsuranceLine Pet Health Plan
Locked Bag 9021, Castle Hill, NSW 1765
insuranceline.com.au



SUPPLEMENTARY PRODUCT DISCLOSURE STATEMENT (“SPDS”)

(Notice of Policy Changes & Amendments)

Effective Date: 18 December 2015

This notice sets out important changes, additions and deletions made to the Combined Product Disclosure Statement, Policy Terms and Conditions and Financial Services Guide for the InsuranceLine Pet Health Plan dated 1 July 2014. It is important that you read this SPDS and the policy booklet together to familiarise yourself with the policy Terms and Conditions as they now apply. The following are some examples of changes required in the combined Product Disclosure Statement, Policy Terms and Conditions and Financial Services Guide.

Section	Change Action	Description of Change
Understanding the limits of the insurance	Change to understanding limits of insurance.	Insert the following sentence at the end of the first paragraph under the heading “Understanding the limits of the insurance”: “Maximum monetary limits also apply to the benefits payable in any one Policy Period. These are called the Benefit Limit and can vary depending on the relevant cover.”
Your obligation to us (Duty of Disclosure)	Changes brought about by <i>The Insurance Contracts Amendment Act (2013)</i>	Replace all content and heading under the title “Your obligation to us (Duty of Disclosure)” with: “Your duty of disclosure Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, which may affect our decision to insure you and on what terms. You have this duty until we agree to insure you. You have the same duty before you renew, extend, vary or reinstate an insurance contract. You do not need to tell us anything that: <ul style="list-style-type: none"> • reduces the risk we insure you for; or • is common knowledge; or • we know or should know as an insurer; or • we waive your duty to tell us about. If you do not tell us something If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both. If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.”
Calculating your premium	Changes to the way your premium is calculated.	Replace all content under the heading “Calculating your premium” with: “Your premium is calculated when your InsuranceLine policy begins, and at each policy anniversary (and if you vary or extend cover) and is printed on the relevant Certificate of Insurance. The premium is calculated based on a number of factors. Some are pre-set and don’t vary for each insured (e.g. amounts we take into account for certain internal costs and expenses). Others can affect the premium amount up or down depending upon whether we believe it increases or decreases the risk to us, such as the Cover you have chosen, the Excess selected, the Benefit Percentage applicable to the Cover you have chosen, where you and your Pet permanently live and the species, breed and age of your Pet. The amount you pay includes allowances for government fees, taxes and charges (including stamp duty and GST). You can ask us for further information. Minimum premiums and discounts / entitlements may apply, subject to certain criteria. Discounts / entitlements / premiums may be rounded up or down and only apply to the extent any minimum premium is not reached. They are also applied in a predetermined order (excluding amounts for government taxes and charges) as reduced by any prior applied discounts / entitlements. They are applied to the base premium calculated prior to any taxes being added.”
The basis on which we insure you	Changes to the basis on which we insure you.	Replace the first paragraph under the heading “The basis on which we insure you” with: “Subject to the Terms and Conditions of the policy, we will reimburse the Vet Expenses incurred by you as a result of a Treatment to the insured Pet for covered Accidental Injury or Illness Conditions up to the specified Benefit Percentage, but subject to any applicable Benefit Limit and less any Excess which may apply, provided that:”

Continued overleaf

Automatic Renewal of your Policy	Changes to how we will renew your policy.	<p>Replace all content under the heading “Automatic renewal of your policy” with; “Automatic Renewal of your Policy”</p> <p>We will advise you regarding renewal of your policy prior to the expiration of the current policy. We may change the terms and conditions of the policy upon renewal to reflect the portion of the risk associated with insuring your Pet based on factors such as (but not limited to) your Pet’s age, location and medical history.</p> <p>Unless otherwise notified, your Cover will be automatically renewed on the terms contained in the renewal offer and we will deduct/charge the renewal premium from your nominated account/credit card unless you tell us not to. If the account/credit card is not yours, you confirm you have the authority of the relevant person to use it and they have agreed to these terms.</p> <p>We require you to notify us in writing should you decide not to renew your policy.</p> <p>Should you renew your policy you must tell us if the information you have previously supplied is incorrect or incomplete in order to comply with your Duty of Disclosure. If you do not we may reduce or refuse to pay a claim or cancel the policy.”</p>
Policy Terms and Conditions Section 1 – Definitions	Changes to the definition of “Benefit Limit”.	<p>Replace the definition of Benefit Limit” with:</p> <p>“Benefit Limit(s) means the applicable total amount payable under your policy in relation to the relevant Cover as specified in your Certificate of Insurance (determined as follows);</p> <ul style="list-style-type: none"> • if a specified limit or sub limit for a particular Cover, item, condition or treatment on an individual or per claim basis is specified to apply in the Certificate of Insurance, we will not pay more than that amount (subject also to the following annual limits and sub limits not having been exceeded); and • we will never pay more than the overall annual benefit level specified in your Certificate of Insurance, unless a special annual limit or annual sub limit is specified as applicable to the particular Cover, item, condition or treatment (in which case the lesser annual limit or annual sub limit will apply). <p>Note: The Benefit Limit is subject to any applicable Excess.”</p>
Policy Terms and Conditions - Section 9.1 – Claims	Revised changes to the submission of claims	Replace all content in section 9.1 – “What you need to do” with the following:

9.1 – What you need to do

All claims must be completed carefully and honestly and can be submitted online or by post. If submitting a claim by post claim forms are available on request by calling 1300 880 750 or can be downloaded from www.insuranceline.com.au. The table below sets out the procedure when submitting a claim.

How to make a claim and your consent	
All Claims (Online and Post)	1. All claims must include itemised tax invoice/s, payment receipt/s and applicable consultation notes. If submitting a claim by post all claim documentation must be originals and must be accompanied by a completed claim form. Incomplete claim forms will be returned to you and this may result in a delay in processing your claim. We recommend that you retain copies of all documentation for your records.
	2. If submitting a claim for the first time, please include a full veterinary history from the attending Vet and any previous Vets who have treated your Pet. Failure to include this may result in delays in processing your claim.
	3. All claims should be submitted to us and received within ninety (90) days of the relevant Treatment being provided and all accounts must be paid in full prior to submission of your claim.
	4. You agree that your Vet (current or previous) is authorised to release information and/or records to us about your Pet.
	5. You agree that we are authorised to discuss with the Vet, details relating to your claim or Treatment provided to your Pet in relation to a claim made under the policy.
	6. You agree that we have the right to decline to process a claim where you or your Vet refuse or are unable to provide information reasonably requested by us in order to process your claim.
	7. We will not reimburse you for the provision of any information required in the administration or execution of the policy nor for the assistance provided to you in the completion of any forms relating to the policy including the provision of any information in relation to a claim made under this policy.
If submitting a claim by Post	8. The attending Vet must complete all sections on the claim form where designated and both you and the attending Vet must sign the claim form.
If submitting a claim online	9. If your Vet has agreed to submit your claim electronically on your behalf, you agree we are authorised to receive each such claim submitted.

Contact us on 1300 880 750 if you would like a more detailed explanation of how these changes affect your cover.