

SHERIFF HIGHWAY VETS

Pet Insurance Protocol

When you claim on your pet insurance policy it should be simple, straightforward and cause as little stress as possible to yourself.

We have put together some information to help make this process go as smoothly as we can for all our clients. The information that follows is intended to help us do just that.

When making a claim on your pet insurance please be aware of the following:

- 1) We have to disclose a **full medical history** to the insurance company, upon their request. This may also include medical histories from previous veterinary practices.
- 2) Insurance companies **will** charge **separate excesses for each medical condition being claimed for per policy year**. Some insurance policies will charge an excess plus a percentage of treatment cost, these may vary from policy to policy. Please make sure you are aware of all charges that may/will be deducted from any final settlement.
- 3) It is best to process an insurance claim as quickly as possible. This may mean that not all treatment has been completed, in such cases we can submit **continuation claim** forms. You can complete and hand in continuation claim forms for any further treatment the same way in which you would to start a new claim.
- 4) If a condition has been noted on your pets' record before you took out the insurance policy, the insurance company may rule it to be a '**pre-existing condition**'. Even if no treatment had been advised or undertaken. **Pre-existing conditions are usually excluded from claims under policy conditions**. It is not the practice who decides if conditions are or are not pre existing, in cases where you feel this is wrongly added to your policy we advise you speak direct to the insurance company and they will explain the reasons for their decisions. Most companies upon taking out a policy will advise if there are any exemptions to be applied to your policy, this is also usually documented on paper work you receive from the company.
- 5) Most insurance companies have a cut off or **processing time frame**. This is generally in the policy year. So all treatment you wish to claim for one said condition should be submitted and processed within your policy year. If this is not done the insurance company may take another excess, or in an event where the condition is outside a policy year the company may choose not to cover the claim at all. Some companies have deadlines of 90 days for a claim to be made from the first date of treatment commencing. Please make sure you are fully aware of what your insurance company guidelines are before making a claim. This information should be in your terms and conditions.

Submitting a claim to your insurance company:

- 1) Bring in a **claim form and the policy paper work**. You may already have one at home, or you may need to request one by contacting your insurance company direct. Most insurance companies have websites where forms can be downloaded.
- 2) You will find different sections on the form for you (the owner) and for us (the veterinary practice) to complete. Please ensure the form is filled out fully on the **policyholder's section** before submitting the form. If you are unsure on any part, please ask a team member for assistance. Please ensure the **policyholder has signed the form. The policy number is filled out fully and also the condition field**.

On some continuation forms it may only ask for set information. Please make sure these are also filled out fully. Failure to fully complete forms may cause a hold up in your claim being processed. Please make sure the form is also signed and dated in the relevant section. If it is to pay the policy owner it may ask how the payment should be made.

If you are eligible to do a **direct claim**, the form should be filled out in the **'to pay the vet'** section and signed by the policyholder.

When filling in the date section, if the form has been handed in before the treatment date please leave the date section blank. If the date is filled out with a date pre-treatment some insurance companies will request a new form to be filled out, this delays the processing of the claim.

3) Payment for all treatment, procedures and services should be made in full to Sheriff Highway Veterinary Group.

4) We will complete the section for the veterinary practice, provide all the supporting receipts. Once the completed form has been checked over by the vet in charge of your pet's case, it will be emailed or posted by us to the insurance company on your behalf.

5) If you are not authorised to make a direct claim you will have to pay your bill in FULL and then you will receive payment directly from your insurance company.

If you are authorised to make a direct claim, following the above steps, please note the following terms and conditions apply:

1) Direct claims have to be authorised by the vet in charge of your animal's case.

2) We are **Unable** to process direct claims **under £500.00**.

3) The **excess** and the **percentage excess** as well as products and services not covered by the insurance **are payable on the day of treatment**. If the excess is not known, you will be asked to pay £100 excess. If the excess is less, the difference will be refunded to you, minus any exclusions the insurance company make, if it is more, you will be liable to pay the difference within 30 days.

Any payments made to the practice before a claim is submitted will be incorporated in the direct claim. This will **NOT** be used as towards or as an excess. The excess payment must still be made. All moneys claimed that are returned to the practice from the insurer and leave the client in a positive balance (once deductions have been made) with the practice can be requested by the client as a cheque, or it can be kept as a positive balance on the pets file for future use.

4) We are unable to process direct claims from the following companies - Equine and Livestock (E&L), and those insurance providers underwritten by them.

5) In the event of the claim being declined you will be liable to pay all outstanding balances within 30 days of notification from the insurance company.

6) If your policy does not cover the full amount of the fees you will be liable to pay the balance within 30 days of the claim being processed.