

Pet Insurance

**Metropolitan General Insurance
Company**

PetFirst.com

A MetLife Company

866-937-7387

This Policy is insured by Metropolitan General Insurance Company; a Rhode Island company with its principal place of business at 700 Quaker Lane, Warwick, Rhode Island, 02886. Administrative services are provided under the Policy by MetLife Pet Insurance Solutions LLC, an affiliate of Metropolitan General Insurance Company.



Ingrid Tolentino
President



Metropolitan General Insurance Company
A MetLife Company
700 Quaker Lane
Warwick, Rhode Island, 02886

PetFirst.com
866-937-7387

DECLARATIONS

Pet Parent

Policy, Sample	Policy Number	1044307-01
	Effective Date	07/01/2021
1 Main Street	Policy Duration	1 year
Montgomery, AL 36117	Renewal Date	07/01/2022

Insured Pet

Buddy

male, dog, dachshund (long haired)

Age: 3 years old

Waiting Period For Buddy:

Illness	14 days
Injury	No Waiting Period

Policy Limit	\$5,000 per Policy Period
Deductible	\$250.00 per Policy Period
Covered Percentage	80%

The Total cost of Your Policy per Policy Period is based on the following:

Premium	\$240.36
Enrollment Fee	\$12.00
Installment Fee	\$36.00
Discount	\$24.00
Total Cost of Your Policy	\$264.36

30-Day Free Look

If You are not satisfied for any reason, You may return this Policy to Us within 30 days from the Policy Effective Date and this Policy will be void from the beginning. If You have not submitted any claims prior to the date You return the Policy, We will refund the premium You paid.

Table of Contents

DECLARATIONS.....	2
30-Day Free Look.....	2
Table of Contents.....	3
Congratulations!.....	4
How This Policy Works.....	5
What We Cover.....	5
We pay for charges You incur for.....	5
That are Medically Necessary to Treat.....	5
This Includes Telemedicine.....	5
Additional Things We Cover.....	6
How Deductibles and the Covered Percentage Work	7
Your Claim History May Affect Your Deductible and Policy Limit.....	7
Healthy Pet Incentive.....	7
Automatic Policy Limit Increase.....	7
Limitations and Exclusions.....	8
There are some things We don't cover... ..	8
Claims.....	9
Steps for Submitting a Claim.....	9
Some Important Provisions	10
Coverage Start and End Times.....	10
Changes to Coverage.....	10
Paying Premiums.....	11
Policy Period, Cancellation, Renewal, and Non-Renewal.....	11
Transfer of Coverage for Insured Pets.....	12
Assignment.....	12
Reward Offers.....	12
Definitions.....	13
Appealing a Claim.....	15

Congratulations!

Owning a Pet is a great joy . . . and a great responsibility. At MetLife, We know Your Pet is a member of Your family. We'd like to help You protect this important family member so You can enjoy many happy and healthy years together. Let's get started . . .

This is a Policy of Pet Insurance from Metropolitan General Insurance Company for Buddy, a 3 year old dachshund (long haired) dog, who will be happily living with You at 1 Main Street, Montgomery, AL 36117

Insurance starts on July 1, 2021. There is a Waiting Period for Illness as follows: Buddy - 14 days. Your insurance comes with a deductible of \$250.00 and Covered Percentage 80%.

The amount We pay for all Pets insured under this Policy combined during the Policy Period is subject to a limit of \$5,000.

Please read the whole Policy carefully to understand what We cover, limit and exclude!

How This Policy Works

In exchange for payment of the premium, We will pay for certain types of Covered Charges for Buddy. The rest of this Policy describes all the details of how that works, and all coverage is subject to the limitations, exclusions, and terms of this Policy in its entirety – but basically, after You have completed the Waiting Period of 14 days for Buddy (if the Waiting Period applies to the claim), and after You have paid \$250.00 toward Covered Charges during the Policy Period, We will begin paying 80% of the Covered Charges up to the Policy Limit of \$5,000, and You will pay 20% of the Covered Charges. If the amount We pay You reaches the Policy Limit, You will pay 100% of the charges that go above the Policy Limit.

What We Cover

We pay for charges You incur for...

Exams

Performed by a Veterinary Provider, including primary, specialty and emergency exams.

Diagnostics

Prescribed or performed by a Veterinary Provider, such as lab work, blood tests, urinalysis, MRIs, CT scans and ultrasounds.

Treatment

Prescribed or performed by a Veterinary Provider, such as surgery, hospitalization, outpatient Treatments, physical therapy, and emergency dental Treatment.

Medications

Such as injections and take-home Medications, regardless of whether they require a prescription or are over-the-counter, as long as they are prescribed by a Veterinary Provider.

That are Medically Necessary to Treat...

Injury

An Injury to Your Pet that results from an Accident that occurs while the Policy is in effect, such as an animal bite or poisoning.

Illness

An Illness such as an ear infections, diarrhea, chronic condition or a congenital or hereditary disorders.

This Includes Telemedicine

We cover Veterinary services when provided through a telemedicine visit with a Veterinarian if We would cover those services when provided during an in-person visit, as long as telemedicine is a medically appropriate way to provide the Veterinary services. Telemedicine can be provided over the phone or online.

Additional Things We Cover

Prescription Foods

Food that can only be purchased from a Veterinary Provider with a prescription from a Veterinarian to treat a covered Illness or Injury.

Holistic Treatments

Holistic Treatments that are prescribed by a Veterinarian, such as aroma therapy, herbal remedies and CBD oil.

Boarding Fees While You're Hospitalized

Up to \$500 per Policy Period for the cost of boarding Your Pet if You or a member of Your household is hospitalized for more than 48 hours. Hospitalization begins with admission to the hospital. When You submit a claim for boarding fees under this provision, You must provide Us with Proof of the dates that the hospitalization occurred, and receipts for the charges incurred to board Your Pet.

Advertising and Reward

Up to \$500 for combined costs incurred for advertising or offering a reward if Your Pet is stolen or strays. You must provide us with receipts for the costs incurred, and for a reward, You must complete the form required by Us. We will not pay the costs for a reward paid to You, Your business partner, or a member of Your immediate family or household. We will not pay this benefit to You more than once in Your lifetime.

Loss Due to Theft or Straying

If Buddy is stolen or goes missing during the Policy Period and has not been found within 60 days, We will pay an amount up to the price You paid for Buddy, up to the maximum benefit of \$500. You must send Us a completed claim form including the receipt for the price You paid for Buddy. If You did not pay for Buddy, or have no formal Proof of how much You paid in the form of a receipt, We will pay You \$150. Your Policy will end and We will refund any leftover premium, on a prorated basis, that You have already paid Us. We will not pay this benefit more than once in Your lifetime.

We will not pay any benefits if You, or the person looking after Buddy, freely parts with Buddy.

Mortality Benefit

In the sad event of Your Pet's death, We will pay for the benefits described in the next two paragraphs. Your Policy will end, and We will refund any leftover premium, on a prorated basis, that You have already paid Us.

We will pay up to \$500 for cremation or burial expenses, or any combination of cremation and burial. You must provide Us with receipts for the costs incurred.

If (1) Your dog is less than eight years old at the time of death, and (2) Your Veterinarian is able to verify the death of Your Pet and signs the claim form, then We will pay the amount You paid to purchase or adopt Your Pet, but not more than \$500. If You did not pay to purchase or adopt Your Pet, or You no longer have a receipt evidencing the amount You paid, We will pay You \$150.

Grief Counseling Upon the Death of Your Pet

Certain grief counseling services are available to You at no additional premium because of Your coverage under this Policy. MetLife has arranged for these services to be provided to You through a third party service provider. MetLife is not responsible for providing or failing to provide these services nor is it liable for any negligence in the provision of such services by the third party service provider.

How Deductibles and the Covered Percentage Work

We will cover up to 80% of the cost of any Covered Charge up to the Policy Limit. There is also a Deductible of \$250.00 that applies to covered services, and what We pay is subject to a Policy Limit of \$5,000. The Deductible will apply once per Policy Period; after the Deductible is met, it will no longer reduce the amount We will pay during the Policy Period. Let's look at an example of how this works.

Suppose Your Pet swallows a toy, and the Veterinarian charges You \$2,000 to safely remove it. We would pay a claim as follows:

$$(\text{Treatment Cost } (\$2,000) - \text{Deductible } (\$250.00)) \times \text{Covered Percentage } (80\%) = \$1,400.00$$

In this example, We would pay You \$1,400.00.

If Your Pet gets sick or Injured later that Policy Period, We will pay 80% of that Covered Charge up to the Policy Limit, because We apply the Deductible only once per Policy Period.

Your Claim History May Affect Your Deductible and Policy Limit

Healthy Pet Incentive

For each Policy Period that You receive no payments from Us for claims while You are covered by the Policy with no break in coverage, Your Deductible will be reduced by \$50.00 upon Policy renewal until it results in a \$0.00 Deductible. If a claim is made and You receive payment, the Deductible will revert to its original amount (the amount of the Deductible before any reductions started) for the following renewal term and the process will start over. Coverage must be continuous, with no break, for this rule to apply.

Automatic Policy Limit Increase

If Your Policy Limit is at least \$5,000, and if You have an unused amount of \$1,000 or more at the end of the Policy Period, then upon renewal We will automatically increase the Policy Limit by \$500 for the renewed Policy Period at no additional cost to You. The automatic Policy Limit increase will not apply if You make any change to Your plan upon renewal, or if You have less than \$1,000 of the Policy Limit that is unused at the end of the Policy Period. The automatic Policy Limit increase, if applied, will not be in an amount other than \$500. The automatic Policy Limit increase cannot be "stacked," meaning that if the Policy Limit already includes an Policy Limit increase from a Prior Policy, You will not receive another one.

Limitations and Exclusions

There are some things We don't cover...

Pre-Existing Conditions

We don't cover any charges incurred for a Pre-Existing Condition

Preventive Care

We don't cover Preventive Care, except to the extent that coverage for Preventive Care is provided by a Preventive Care Coverage Endorsement, if any, that is included in this Policy. This Policy's Declarations Page shows whether a Preventive Care Coverage Endorsement is included.

Unlicensed Veterinarians

Whenever this Policy requires a service to be performed by a Veterinarian, the Veterinarian must be licensed in the United States, performing the service within the state or territory where he or she is licensed, and acting within the scope of the license.

Outside the United States

We do not cover any Treatment, services or supplies provided outside the United States.

Complications or Progression

We don't cover complications of conditions or procedures that are not otherwise covered by this Policy. Examples of this include, but are not limited to, complications from cosmetic surgery, such as tail docking or declawing, or progression of an Injury caused by an Accident that occurred before the Policy Effective Date.

Preventable or Intentional Incidents, Neglect, and Deliberate Endangerment

We don't cover Treatment for any Illness or Injury that is deliberately caused by You or a member of Your household, caused by persistent neglect, or that results from deliberate endangerment of Your Pet, such as organized fighting.

Working Pets

We don't cover Treatment for any Illness or Injury resulting from commercial use activities related to racing, exhibition of Your Pet for which You are paid, law enforcement or guarding.

Other Pets & Other Pet Parents

Coverage is only provided for Buddy who must reside with You and be under Your regular care and supervision at the physical address listed on the Declarations Page.

Not Medically Necessary

Unless explicitly covered elsewhere in this Policy, We don't cover Treatment, services or supplies that are not related to an Illness or Injury, such as cosmetic or aesthetic procedures, elective surgeries, anal gland expression, nail trims and grooming, obedience training, and vitamins, Pet foods or commercial Pet diets that can be purchased without a prescription, even if recommended by a Veterinarian for Treatment of Your Pet's Illness or Injury. Claims for Pets with no symptoms are not covered.

Claims

Steps for Submitting a Claim

When You are ready to submit a claim, follow the steps below:

- Step 1: Gather Proof to support Your claim. If You don't send Us all the required information, it could delay Our payment of Your claim. The Proof You must submit with the claim form includes:
- all itemized invoices and medical records from Your Veterinary Provider that cover the services for which You are filing a claim;
 - all Your Pet's medical and adoption records for the twelve-month period prior to the Date of Service (applicable only if this is Your first claim); and
 - any other information that is reasonably needed to support Your claim.
- Step 2: Submit Your claim. You can submit Your claim electronically or via mail. Complete submission details are available on the claim form included with Your Policy or can be requested by calling 866-937-7387. Make sure Your submission is complete and that all the information is accurate.

By submitting Your claim, You agree to obtain or release all medical records We request to support Your claim. You also authorize Us to obtain all records to support the claim. Upon request, You must provide us with Proof of identity of Your Pet as We may require.

We must receive the claim form or Proof from You within 90 days after the Date of Service. If We receive neither the claim form nor Proof within 90 days after the Date of Service We will not pay any benefit for that claim.

We will make a decision about Your claim within 30 days after We receive the claim form and all the necessary Proof that We determine We need in order to reach a decision. Any claim that is payable will be paid to You, not the Veterinarian. You are financially responsible to Your Veterinarian for payment of all Treatment.

If, at any time, We determine that the benefits paid under this Policy were more than the benefits due, We have the right to recover the amount of the overpayment from You.

Some Important Provisions

Coverage Start and End Times

Coverage begins at 12:00 A.M. Eastern Standard Time, or at 12:00 A.M. Eastern Daylight Time if Daylight Savings Time is then being observed on the Effective Date. Coverage will end at 11:59 P.M. Eastern Standard Time, or at 11:59 P.M. Eastern Daylight Time if Daylight Savings Time is being observed on the last day of the Policy Period.

Changes to Coverage

If Your address changes, You must notify Us within 30 days after the change. This may cause Your premium rate to change.

For a Policy with a 30 Day Policy Period

For a Policy with a 30 day Policy Period, no changes can be made to Your coverage under the Policy during the Policy Period.

For all other Policies

Benefit Increases are only allowed at Policy renewal. Benefit Increases means any of the following: raising the Policy Limit or Covered Percentage, decreasing the Deductible, or making any change to Your coverage that would cause Your Premium to increase. You may request to decrease Your benefits at any time. The benefit decrease will take effect on a date approved by Us. We will refund any premium that You have paid to Us that is no longer required as a result of such decrease or reduction.

A Benefit Increase upon renewal will apply to any Illness or Injury that first manifests itself after the effective date of the Benefit Increase.

During a period of Continuous Coverage, We will pay benefits for an Illness or Injury that first manifested itself during the policy period of a Prior Policy up to the policy limit that applied under that Prior Policy. If a Prior Policy with a 30 day policy period was in effect when the Illness or Injury first manifested itself, instead of basing the policy limit for that Illness or Injury on that 30 day policy, We will base the policy limit on the one year policy that was issued by Us immediately after the end of the 30 day policy.

A benefit decrease upon renewal will apply to any Illness or Injury of an insured Pet while the renewal policy is in effect, even if the Illness or Injury first manifested itself under a Prior Policy.

For purposes of this provision, when We state an Illness or Injury first manifested itself, We mean the first time, with respect to a covered Pet's Illness or Injury:

- a Veterinarian provided medical advice;
- the Pet received a diagnosis, care or Treatment; or
- the Pet displayed signs or symptoms consistent with the Illness or Injury.

Premium Rates on Renewal

When the Policy is renewed, We may change the premium rates. If the premium rates We charge for Your Policy will increase upon renewal, We will notify You in Writing not less than 30 days prior to the end of Your current Policy.

Paying Premiums

You are responsible for paying all premiums. We must receive the first payment to place coverage into effect. After that, premium payments will be due monthly unless We agree to accept premium payments on some other basis. You must pay Your premiums in full and on time to remain covered. Premiums may change during the Policy Period for changes in Your address, Your Pet's details, or other material Policy parameters.

Each premium due after the Effective Date of this Policy may be paid up to 31 days after its due date. This period is the grace period. The insurance provided by this Policy will stay in effect during the grace period. We will notify You in Writing that, if the premium is not paid by the end of the grace period, this Policy will end at the end of the last day of the grace period. If We fail to give You Written notice, this Policy will continue in effect until the date such notice is given. You are responsible for payment of premium for coverage provided during the grace period.

Policy Period, Cancellation, Renewal, and Non-Renewal

This Policy is valid for the Policy Period, beginning on the Effective Date, after which it will automatically be renewed for another year, unless We have provided notice to You that We are not renewing this Policy as explained below or the Policy has been canceled by You or by Us. You may cancel this Policy at any time. If You cancel it more than 30 days after the Policy Effective Date, We will return any leftover premium, on a pro-rata basis, that You have already paid Us. To cancel the Policy, You must notify Us in Writing that You wish to cancel the Policy, in which case the Policy will end on the date We receive Your notice or the date requested in Your notice if later.

If We choose to cancel or not renew Your Policy, We will notify You in Writing at least 30 days prior to the date the Policy will end.

After this Policy is in effect for more than 60 days, or if this is a renewal of a Prior Policy, We may only cancel for one or more of the following reasons:

1. You fail to pay Your premium by the due date;
2. The Policy was obtained through fraud, misrepresentation or concealment in Your application;
3. We have agreed to issue a new Policy with the same or an affiliated company; or
4. You fail to comply with the Policy terms and conditions in a manner that prejudices or negatively affects Our ability to properly assess or evaluate the claim or other material rights We have under the Policy.

Any cancellation will be effective for all coverage for all persons and all Pets. If this Policy is canceled, coverage will no longer be provided as of the effective date of the cancellation shown on the notice of cancellation.

Transfer of Coverage for Insured Pets

If You permanently give Your Pet to another person, You may be able to transfer ownership of this Policy to that person too. To do so, You'll have to pay any premium owed to Us, make the request for transfer in Writing, Sign the request, and have the other person sign it. We may require new evidence of insurability and apply new underwriting criteria and rates if You transfer the ownership of a Pet to someone else who wants to maintain insurance coverage with Us.

If You die, Your Pet will still be covered if the premium is paid. Your rights and duties will be transferred to Your legal representative, but only while acting within the course and scope of their duties as Your legal representative. Until Your legal representative is appointed, anyone having temporary proper custody of the insured Pet will have Your rights and duties under this Policy.

This Policy cannot be transferred between different Pets. Each Pet must undergo an individual application process and underwriting review.

Assignment

Your rights under this Policy are not assignable.

Reward Offers

We, or a partner organization, may reward You by:

- providing You or a relative with things of value, including, but not limited to airline miles, memberships, merchandise, points, rewards, services, or other items; or
- making or allowing others to make on Your or a relative's behalf a charitable contribution, donation, or gift.

We might not notify You when We start or stop providing any rewards.

Definitions

When defined terms are used in this Policy, they will appear with initial capitalization. The plural use of a term defined in the singular will share the same meaning.

Accident means an act or event which:

- is unforeseen, unexpected and unanticipated;
- is definite as to time and place;
- is not an Illness; and
- occurs while insurance is in effect under this Policy.

Continuous Coverage means the period of time that a Pet is insured continuously under policies issued by Us, without a break in coverage. For an Illness, if covered under the Policy, the term means the period of time that a Pet is continuously covered for Illness under policies issued by Us, without a break in Illness coverage.

Covered Charge means the charge for services or supplies described in the What We Cover section of this Policy. The charges must be incurred while Your Pet is insured under this Policy.

Covered Percentage means the percentage of the Covered Charge that We pay after the Deductible has been met.

Date of Service means the date upon which Your Pet received Treatment from a Veterinary Provider which is the subject of a claim, or for a claim that does not involve Treatment from a Veterinary Provider, the date You incurred the expense that is the basis of the claim.

Deductible means the amount You pay toward Covered Charges before We will begin to reimburse You.

Diagnostics means any X-ray, MRI, CT scan, laboratory test, or other diagnostic procedure performed by a Veterinarian for the purpose of determining what disease or condition explains symptoms exhibited by Your Pet.

Exam means any primary, specialty, or emergency examination administered by a Veterinary Provider.

Illness means:

- a physical sickness, physical infirmity or physical disease; or
- infection, but not an infection received through an Accidental cut or wound.

Injury means any physical harm caused by an Accident that occurs while insurance is in effect under this Policy.

Medically Necessary means medical services, supplies or care provided to treat a Pet that are consistent with the symptoms or diagnosis, accepted as good veterinary practice standards, not for the ease or the convenience of You or Your Veterinary Provider, and consistent with the proper supply or level of services which can be safely provided to the Pet.

Medication means any ingestible, topical, injectable, or other medication prescribed by a Veterinarian to Your Pet. Medication may be dispensed directly by a Veterinarian, dispensed or compounded by a pharmacist, or available over the counter, as long as it is prescribed by a Veterinarian.

Pet means any cat or dog named and described in the Declarations Page of this Policy, that is both owned by You and residing with You for companionship or as a service animal, and not owned for commercial reasons.

Policy Effective Date is the date specified on the Declarations Page.

Policy Limit means the maximum amount We will pay You for the Pets covered under this Policy during term of the Policy. The Policy Limit does not include the Deductible.

Policy Period means the one year period that begins on the Policy Effective Date and ends on the day before the first anniversary of the Policy Effective Date.

Prior Policy means a policy of Pet Insurance previously issued by Us.

Pre-Existing Condition means, with respect to a covered Pet's Illness or Injury, that prior to the date that Continuous Coverage begins or, for an Illness that begins during an applicable Waiting Period under this Policy or a Prior Policy issued during the period of Continuous Coverage:

- a Veterinarian provided medical advice;
- the Pet received a diagnosis, care or Treatment; or
- the Pet displayed signs or symptoms consistent with the stated Illness or Injury.

Preventive Care means any Treatment, service or procedure for the purpose of prevention of Injury or Illness or for the promotion of general health, where there has been no Injury or Illness.

Proof means Written evidence conclusively establishing that Your Pet has received one or more covered services as described in this Policy. When a claim is made for any benefit described in this Policy, Proof must establish the nature and extent of the loss or condition. Proof must be provided at Your expense.

Treatment means any Exam, consultation, hospitalization, anesthesia, Surgery, X-rays, MRI or CT scans, holistic treatment, laboratory tests, nursing, or other care provided and administered by a Veterinarian.

United States means the 50 States, United States military bases, and the District of Columbia. This term does not include other U.S. territories or possessions.

Veterinarian means a Doctor of Veterinary Medicine, currently licensed in the United States, other than You, Your business partner, or a member of Your immediate family or household.

Veterinary Provider means a Veterinarian or other person who provides a service or supply described in the What We Cover section of this policy. If a Veterinary Provider provides a service that requires licensing in the state where the service is performed, the Veterinary Provider must be licensed and acting within the scope of his or her license.

Waiting Period means one or more periods of days, shown on the Declarations Page, that immediately follow the date insurance takes effect for a Pet.

We, Us and Our mean Metropolitan General Insurance Company.

Written or Writing means a record which is on or transmitted by paper or electronic media which is acceptable to Us and consistent with applicable law.

You and Your mean the individual named on the Declarations Page as the Pet Parent.

Appealing a Claim

If We deny all or part of Your claim, You may appeal the decision. You must submit Your appeal to Us at the address indicated on the claim form within 90 days after You receive Our initial determination. Appeals must be in Writing and must include at least the following information:

- Your name;
- The name of Your Pet;
- Identification of the claim denial You are appealing; and
- An explanation of why You believe the denial was incorrect.

As part of Your appeal, You may submit Written comments, documents, records, or other information relating to Your claim.

Upon receipt of Your Written appeal submission, We will acknowledge receipt of Your appeal within five business days. You will receive Our final decision within 45 days after We receive Your Written request for review.

If We need an extension because You don't provide Us with sufficient information, We may need up to an extra 45 days to review Your appeal. The time period from when We tell You We need additional information to when We receive the requested information does not count toward the time allowed for Us to make a final decision. When You receive notice from Us that We need additional information, You must provide the information to Us within 45 days or We will deny Your appeal.

If We deny the claim on appeal, We will send You a final Written decision that states the reason why the appeal is being denied and references any specific provisions of this Policy on which the denial is based. Upon Your Written request, at no charge to You, We will provide You with copies of documents, records and other information relevant to Your claim.

If You disagree with Our decision on the first appeal, You may request an external review. You must do this within 30 days of the date of the first appeal decision. You will be responsible for the expense of the external review. An impartial Veterinarian will conduct the external review. The impartial Veterinarian will be selected by Us, but will be independent of Our company and You; the impartial Veterinarian will be someone who is not controlled by Us, and who has not been a part of Your Pet's veterinary team previously. We will provide the decision to You within ten days of receiving the independent Veterinarian's report.



How to Submit a Pet Insurance Claim



In the event that one of your furry family members suffers an illness or accident, MetLife is here to help. Our claims process is simple and straightforward so you can stress less and focus on what matters most: the health of your pet. For the quickest resolution of your claim, follow the steps below:



At the Vet's Office

- Make note of your vet's contact info. You'll need it later when you file your claim.
- Gather all medical records from your vet, including your pet's medical diagnosis and any notes associated with it. If it's your first claim with us, please provide medical records from the past 12 months (including adoption records if applicable).
- Ask for a copy of your invoice and an itemized receipt.



After Your Pet Is Home

- Download your claim form by logging into your My Pets online account.
- Attach all medical records and vet notes, along with your invoice and itemized receipt.
- Submit your claim via mobile app, our online portal, email, fax or mail.
- Make a copy of your paperwork to keep on file.
- That's it! Remember to submit your claim within 90 days of your pet's vet visit, and you'll receive reimbursement by check or direct deposit — most claims are processed within 10 days.



Need help along the way? Our team is available online or over the phone to assist with any questions you may have.

Pet Insurance offered by MetLife Pet Insurance Solutions LLC is underwritten by Metropolitan General Insurance Company ("MGIC"), a Rhode Island insurance company, headquartered at 700 Quaker Lane, Warwick, RI 02886. MetLife Pet Insurance Solutions LLC is the policy administrator authorized by MGIC to offer and administer pet insurance policies. MetLife Pet Insurance Solutions LLC was previously known as PetFirst Healthcare, LLC and in some states continues to operate under that name pending approval of its application for a name change. The entity may operate under an assumed name and/or fictitious name in certain jurisdictions as approved, including MetLife Pet Insurance Services LLC (New York and Minnesota), MetLife Pet Insurance Solutions Agency LLC (Illinois), and such other assumed names or fictitious names approved by certain jurisdictions. Like most insurance policies, insurance policies issued by IAIC contain certain exclusions, exceptions, reductions, limitations, and terms for keeping them in force. For costs, complete details of coverage and exclusions, and a listing of approved states, please contact MetLife Pet Insurance Solutions LLC.
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Claim Form

Underwritten and Issued by Metropolitan General Insurance Company.
All claims must be submitted in writing within ninety (90) days of the treatment or receipt date.



My Vet Info

Clinic/Vet Office

Vet Name: _____

Address: _____

Phone: _____

Email: _____

1 Member Info

Policy Number: PFH1044307-01
Pet Parent Name: Sample Policy
Address: 1 Main Street
City: MONTGOMERY State: AL
Zip: 36117 Phone: 565-498-1981
Pet Name: Buddy

2 Vet Visit Info

Please attach medical records (i.e. SOAP notes, vet notes, chart notes) from your veterinarian for the claimed incident.

Important Note: Medical records often differ from discharge instructions and invoices, so it is important to ask your vet specifically for chart/SOAP/vet notes.

*Please note: if this is your first claim, please provide 12 months of medical records. If you have recently adopted your pet and don't have 12 months of medical records, all you will need to submit is your adoption contract.

Attach invoices and/or itemized receipts along with this completed claim form.

3 Diagnosis and Invoice Info

/ /		\$
Treatment Date	Medical Diagnoses or Routine Treatment	Total Charges
/ /		\$
Treatment Date	Medical Diagnoses or Routine Treatment	Total Charges
/ /		\$
Treatment Date	Medical Diagnoses or Routine Treatment	Total Charges

4 Sign and Date

Policyholder declaration: I declare my veterinarian recommended the treatment for which I am claiming. The particulars given are correct to the best of my knowledge and belief. I authorize my veterinarian to release medical records and give consent to MetLife, to communicate with my veterinarian or veterinarian's staff.

Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act which is a crime and subjects the person to criminal and civil penalties.

All claims must be submitted in writing to MetLife within ninety (90) days of the treatment or receipt date.

Please allow at least 10 business days for processing.

Incomplete forms will delay claims processing.

Signature: _____ Date: _____

Submit Your Claim



MAIL TO:

MetLife - Claims Department
400 Missouri Avenue Suite 105
Jeffersonville, IN 47130



EMAIL TO:

Pet_Submit_Claim@metlife.com



FAX TO:

877-281-3348



UPLOAD TO:

MyPets Online Account
or our Mobile App

FRAUD WARNING NOTICE

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND CERTIFIES THE INFORMATION PROVIDED TO OBTAIN THIS COVERAGE IS ACCURATE TO THE BEST OF THEIR KNOWLEDGE, THIS INCLUDES ANY APPLICATIONS, LOCATIONS SCHEDULES, VALUATION STATEMENTS, LOSS HISTORY INFORMATION AND ENGINEERING REPORTS.

THE FOLLOWING STATEMENT APPLIES IN ALL STATES EXCEPT THOSE NOTED BELOW:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

Arkansas Fraud Warning: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information on an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

California Fraud Warning For your protection California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Colorado Fraud Warning: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida Fraud Warning: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Kansas Fraud Warning: An act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or agent, any written, electronic, electronic impulse, facsimile, magnetic, oral or telephone communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto.

Kentucky Fraud Warning: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

Louisiana Fraud Warning: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Maine Fraud Warning: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

Minnesota Fraud Warning: A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

New Jersey Fraud Warning: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

New Mexico Fraud Warning: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

New York Fraud Warning: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed \$5,000 and the stated value of the claim for each such violation.

Ohio Fraud Warning: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Oklahoma Fraud Warning: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Oregon Fraud Warning: Any person who knowingly and with intent to defraud or solicit another to defraud an insurer: (1) by submitting an application, or (2) by filing a claim containing a false statement as to any material fact, may be violating state law.

Pennsylvania Fraud Warning: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Tennessee Fraud Warning: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Virginia Fraud Warning: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits. READ YOUR POLICY. THE POLICY OF INSURANCE FOR WHICH APPLICATION IS BEING MADE, IF ISSUED, MAY BE CANCELLED WITHOUT CAUSE AT THE OPTION OF THE INSURER AT ANY TIME IN THE FIRST 60 DAYS DURING WHICH IT IS IN EFFECT AND AT ANY TIME THEREAFTER FOR REASONS STATED IN THE POLICY.

Washington Fraud Warning: It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

Vermont Fraud Warning: Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.