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# General Terms and Conditions

## Simpego Pet Insurance
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Translation: In case of disputes or unclear translations, the original German text shall be decisive. The English text does not alter the original German text in either a positive or negative sense.




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# A – General provisions

## A.1 Insured pets

The pets listed in the insurance contract whose keeper or owner is the policyholder are insured.

## A.2 Insured persons

The policyholder and all persons permanently living with them in the shared household are insured.

## A.3 Geographical scope of application

The insurance is valid worldwide.
There is no cover if treatment was carried out abroad that is not permitted in Switzerland according to the Animal Welfare Act or contradicts the ethical principles of the Society of Swiss Veterinarians (SVS).

## A.4 Relocation abroad

If the policyholder moves abroad, the cover expires immediately, i.e. as of the deregistration date at the previous municipality of residence.

## A.5 Change of keeper or owner or change of the insured pet

If the owner of the insured pet changes, for example as a result of selling or giving away the pet, simpego must be informed of the new owner/keeper in writing within 14 days of the change in ownership. The rights and obligations from the insurance contract then transfer to the new owner/keeper.

The new owner/keeper may decline to take over the insurance contract by giving written notice within 30 days of the change of ownership. If the insurance contract is declined, the insurance cover will end immediately.

Simpego reserves the right to withdraw from the contract within 14 days of receiving notification of the change of ownership. If simpego withdraws from the contract, the contract will terminate 30 days after the new owner/keeper has been notified of the withdrawal.

The insurance contract applies only to the pets specified in the contract. If one of the insured pets is replaced, for example following an exchange with the breeder, simpego must be informed without delay. The insurance cover does not automatically transfer to the new pet.

## A.6 Death of the insured pet

If the insured pet dies, the insurance contract expires as of the date of death.

## A.7 Waiting period

From the start date of the contract, a 30-day waiting period applies to all types of cover except Accident, Preventive Care Budget and Rescue & Recovery. If cover is added as part of a contract amendment, the waiting period for that cover will begin on the effective date of the contract amendment. No insurance benefits are payable during the waiting period. Any illness, condition, injury or loss that first occurs during the waiting period, and any related complications, consequential conditions, follow-on claims or associated costs, will not be covered, even after the waiting period has ended.

## A.8 Obligations in the event of a claim

1. The policyholder must report any incident that may result in a claim without undue delay – either online or by email/post/telephone – and follow the instructions issued by simpego:
   Website: https://www.simpego.ch/pet/damage
   Email: claims@simpego.ch
   Phone: +41 58 521 11 11
2. The policyholder and the insured persons must take all reasonable steps to prevent or minimise any loss or damage. In the case of damage to property (including damage to rented property), no alterations may be made to the damaged property without simpego's consent until the loss has been assessed.
3. All of the information relating to the claim and all of the facts that may affect the assessment of the circumstances under which the damage or loss occurred must be provided voluntarily, in a timely manner and in full, and must be correct in terms of content. This also applies to statements made to experts, veterinary surgeons, medical professionals or other service providers. If the insured person does not comply with these obligations, simpego can refuse to pay out the benefits. Simpego can demand a written damage report. The policyholder must prove the occurrence and extent of the damage. Simpego is authorised to carry out any investigations and obtain any information necessary to assess the claim, including information from the treating veterinary surgeon, specialists and clinics. Where necessary to establish the animal's medical history, simpego may also obtain information from previous veterinary practices. Upon request, the policyholder must provide simpego with all necessary documents and information, including details of previous veterinary practices and, where applicable, details of any third parties responsible for or involved in the insured event.
4. If the claim is submitted directly by the treating veterinary practice, simpego will inform the policyholder that a claim has been notified. Where necessary for treatment, simpego may provide the treating veterinary practice or other service providers with information regarding the insurance cover.
5. The policyholder remains responsible for the payment of invoices issued by veterinary practices or other service providers. Unless simpego has agreed a direct payment arrangement with the service provider, any claim settlement will be paid directly to the policyholder. Where such a direct payment arrangement exists, the service provider will inform the policyholder accordingly.
6. If the insured event was caused by a third party, another animal or a malicious act, the policyholder must report the matter to the police without undue delay. Where reasonably possible, the policyholder must obtain and record the details of the third party and provide this information to simpego to enable any potential recovery action.

## A.9 Annual deductible, co-payment and cost coverage

1. Annual deductible: If an annual deductible is agreed under the insurance contract, all costs submitted to simpego for insured events are borne by the policyholder until the annual deductible has been reached. The annual deductible applies per contract year. Example: an annual deductible of CHF 300 means that the first CHF 300 of the insured costs for the current contract year are borne by the policyholder.
2. Cost coverage: if cost coverage is agreed under the insurance contract, simpego bears the defined share of the insured costs for each insured event. Example: cost coverage of 80% means that simpego bears a maximum of 80% of the insured costs in the case of an insured event.



3. Co-payment: if a co-payment is agreed under the insurance contract, the policyholder is responsible for paying the co-payment for each insured event.
4. If cost coverage or a co-payment is age-dependent, the pet's age on the date of treatment is decisive.
5. Any benefit limitations (sum insured) will only be applied after deduction of the annual deductible or any co-payment and the application of cost coverage. This means that the annual deductible or any co-payment is deducted from the total cost of the insured event first, after which any cost coverage is applied, and only then is the agreed sum insured applied to the remaining amount.

### A.10 Annual deductible and annual sums insured

The annual deductible and the annual sums insured always refer to a full contract year. The contract year is always the full year (365 or 366 days) ending on the contract end date specified in the insurance contract. If, on conclusion of the contract, a specific date was set for the start of each new contract year (e.g. 1 January), this may result in the first contract year running for only part of a year, i.e. being shorter than a full year. Even if the contract term is shorter than one year, the annual deductible and the annual sums insured apply in full without any reduction.

### A.11 General exclusions

The insurance does not cover the following:

1. Losses or damage arising from acts of war, violations of neutrality, revolution, rebellion, insurrection or any measures taken in response to such events. Losses or damage arising from terrorism (whether threatened or actual, including any act committed for political, religious, ideological or similar purposes) or from any measures taken to control, prevent or suppress acts of terrorism. This exclusion shall not apply where the policyholder can demonstrate that the loss or damage is in no way connected with such events.
2. Losses or damage arising from civil unrest (including acts of violence against persons, property or animals occurring during riots, disturbances or public disorder) or from any measures taken in response thereto, unless the policyholder can demonstrate that they took all reasonable precautions to prevent the loss or damage.
3. Losses or damage arising from any alteration of the atomic nucleus, regardless of its cause.
4. Losses or damage arising in connection with infectious disease outbreaks, epidemics or pandemics.
5. Losses or damage arising from pets where the pet's age was incorrectly declared at the start of the contract and the pet was in fact under 8 weeks of age when the contract commenced.
6. Losses or damage caused by or arising from pets that have been trained to attack.
7. Losses or damage caused by or arising from pets used for guarding, fighting, breeding or commercial purposes.
8. Losses or damage caused by or arising from pets that have previously attacked and seriously injured a person or another animal.

### A.12 Information on the type of insurance cover

All sections of cover are provided on an indemnity basis. This means that, if an insured event occurs, any claim payment will be based on the actual loss incurred.

## B – Illness, pre-existing conditions and accidents

### B.1 Duty of care for your pet

The pet owner is responsible for the health and the well-being of the insured pet. The pet owner must take all reasonable precautions and measures to prevent the insured pet from suffering unnecessary illness or injury. This includes, in particular:

- Complying at all times with the provisions of the Swiss Animal Welfare Act.
- Ensuring that, if the insured pet becomes seriously ill or is involved in an accident, it is examined by a veterinary surgeon without delay.
- Following all treatment recommendations provided by the veterinary surgeon.

### B.2 Veterinarians and other recognised service providers

The following service providers are recognised by simpego:

- Veterinarians holding a Swiss federal diploma or an equivalent recognised qualification. Veterinary nurses and veterinary practice assistants, provided they are appropriately trained to carry out the treatment performed.
- Chiropractors
- For complementary and alternative veterinary treatments, recognised therapists and homeopaths.

A list of the recognised qualifications for chiropractors, therapists and homeopaths can be found here: https://help.simpego.ch/en/article/recognised-training-programmes-1rhtpz2/

### B.3 Definition of date of the insured event

The date of the insured event is the date on which the insured pet first shows symptoms of an illness. If no symptoms are apparent, the date of the insured event is the date of the first suspected diagnosis, confirmed diagnosis or first recorded clinical finding, including any incidental findings.

In the case of an accident, the date of the insured event is the date on which the accident occurred.

### B.4 Scope of the claim notification

The following documents and information must be submitted when making a claim:

- The original veterinary invoice showing the date of treatment, the pet that received treatment, the treatments and services provided, any medications prescribed or supplied, the total amount charged, the name, address and telephone number of the veterinary practice, and the name and address of the owner/keeper.
- Copies of all veterinary reports received to date that relate to the condition being claimed for, including the diagnosis and, in particular, the date of the initial diagnosis, unless these have already been submitted with a previous claim.
- Receipts, supporting documents and any prescriptions issued by the veterinary surgeon. Prescriptions must be valid at the time the insured benefit is used. For example, if a claim is submitted for prescription veterinary diet food, the prescription provided must have been valid on the date the food was obtained.



## B.5 Disputes in the event of a claim

If a dispute arises between the policyholder and simpego regarding a claim, the policyholder may request that the matter in dispute be assessed by an independent veterinary surgeon. The independent veterinary surgeon shall be appointed by mutual agreement between the parties and must not have any relationship of trust with either an insured person or simpego. Simpego will pay the costs of the veterinary surgeon's assessment. Any costs incurred by the policyholder, including travel expenses, time spent and any other personal expenses, shall be borne by the policyholder. The decision of the independent veterinary surgeon shall be final and binding on both parties.

## B.6 Insured benefits

For each insured event, simpego will pay for the following:

- The costs of treatments recommended by a veterinary surgeon, veterinary practice or chiropractor.
- The costs of any necessary inpatient stays for the insured pet (costs relating to the owner's or accompanying persons' stay are excluded).
- Medically necessary aids:
  - Complete or near-complete replacement of functions: aids that replace or compensate for a lost or largely impaired bodily function (e.g. prostheses or wheelchairs) are covered as part of the treatment.
  - Functional support: aids that merely support or stabilise an existing body function (e.g. orthoses, sunglasses or oxygen tents). The benefit per insured pet is limited to a one-off payment of CHF 200 for each aid. This means that if, over the course of the contract term, different aids are needed that do not serve the same purpose, the contribution is made on a per-aid basis. If an aid for which a contribution has already been made is merely replaced by the same or a similar aid that serves the same purpose, simpego will continue to contribute towards the costs until the one-off amount of CHF 200 has been exhausted.

The treatment or the required medical aid must have been provided or prescribed by a veterinary surgeon or another recognised service provider. simpego will not cover the cost of any treatment or aid that has not been prescribed, recommended or carried out by a veterinary surgeon or another recognised service provider.

## B.7 Compensation guidelines

1. Maximum benefit per contract year: The maximum benefit available for each type of cover during a contract year is stated in the insurance contract. The maximum insured amount for each contract year cannot be exceeded. For example, all claims made under the main Illness and Accident areas of cover are limited to the Illness and Accident sum insured per contract year specified in the insurance contract.
2. The usual and necessary costs of treatment and other insured services provided by a veterinary surgeon or another recognised service provider will be reimbursed, based on simpego's reference tariff. simpego's reference tariff is based on an analysis of historical claims data and reimbursements for past treatments and services. Where insufficient data is available to establish a reference tariff, reimbursement will be based on the usual and customary fees charged for equivalent treatment in Switzerland. Fees are considered usual and customary where similar charges apply for the same treatment at other veterinary practices in the same locality within Switzerland.
3. If the fees charged exceed simpego's reference tariff or the usual and customary fees, simpego reserves the right to reduce the reimbursement accordingly. For treatment received outside Switzerland, if the fees charged exceed the amount that the same treatment would have cost in Switzerland (based on simpego's reference tariff or the usual and customary fees in the policyholder's region of residence in Switzerland), simpego reserves the right to reduce the reimbursement accordingly.
4. All insured costs will be reimbursed to the policyholder in Swiss francs (CHF). Cost coverage will also be calculated in Swiss francs.

## B.8 Benefit limits/restrictions/reductions

### B.8.1 Benefit limit per illness or accident per contract year

Regardless of the annual sum insured, simpego will pay a maximum of CHF 25,000 per contract year for any one illness or accident. This includes all costs related to that illness or accident, including diagnostic investigations, treatment, follow-up treatment, prescription diet food, medication and any other associated veterinary expenses.

### B.8.2 Benefit restriction for hereditary conditions and congenital conditions

Insured benefits are limited to 50% of the eligible costs where the claim relates to a hereditary condition or a congenital condition. This restriction also applies to any secondary or consequential conditions that are directly caused by, or can be attributed with a high degree of certainty to, the hereditary or congenital condition. The 50% benefit restriction is applied before the annual deductible, the cost coverage and, subsequently, the annual benefit limit under the relevant cover section.

1. Definition of a hereditary condition: a hereditary condition is a disease or abnormality that is inherited, occurs more frequently within certain family lines or arises as the result of a new genetic mutation (a spontaneous change in the genetic material) in an otherwise unaffected population of the species. Such conditions (for example, hip dysplasia or elbow dysplasia) may develop at any stage of an animal's life, including at birth. A genetic predisposition to a disease is treated as a hereditary condition.
2. Definition of a congenital condition: a congenital condition is a disease, defect or developmental abnormality that is present from birth. Congenital conditions commonly arise as a result of abnormal foetal development during pregnancy.

This benefit restriction does not apply to the Pre-existing Conditions and Accident cover.

This benefit restriction does not apply if the additional benefit "Full cover in the event of hereditary/congenital conditions" has been included in the policy.

### B.8.3 Reduction of benefits for failure to follow veterinary advice

If veterinary-recommended or prescribed measures, including but not limited to treatment, follow-up examinations or the administration of medication, are not carried out, or are not carried out in a timely manner, and compliance with those measures could have prevented the insured event from occurring or significantly reduced the extent of the claim, the benefits payable may be reduced.

## B.9 Insured event – illness

An illness is any impairment of the insured pet's physical or mental health that is not the direct result of an accident and requires examination or treatment by a veterinarian. Behavioural disorders are also considered mental health disorders and are covered under this policy.

The following are regarded as insured events:



- The first occurrence of an illness affecting the insured pet (i.e. the illness occurs for the first time).
- The recurrence of an illness that was recognised as a covered first-time illness during the contract term.
- Any secondary conditions or consequential illnesses arising from an illness that was recognised as a covered first-time illness during the contract term.
- The recurrence of an illness that existed before the start of the contract, provided it had been medically resolved before cover commenced, treatment had been completed in full and there was no indication that the condition was chronic, likely to recur or had persisted.

## B.10 Insured event – accident

An insured accident is defined as a sudden, unintended and harmful event caused by an external factor. The following are not considered accidents: events where the external factor does not exceed the normal stresses of everyday activity or conditions resulting from wear and tear or degeneration. The policy also covers: dental treatment required as a direct result of an insured accident, including any necessary dental prostheses, and behavioural disorders directly attributable to the insured accident, provided the treating veterinary surgeon confirms the causal link between the accident and the behavioural disorder.

Provided they are attributable to an insured event for which simpego has paid benefits, late-onset consequences of accidents are also covered. These include, but are not limited to, chronic pain, complications relating to surgical implants and reduced mobility associated with ageing or following prolonged or intensive physical strain. Degenerative musculoskeletal conditions resulting from wear and tear or abnormal loading, such as osteoarthritis, muscle tension or musculoskeletal pain, are also regarded as illnesses.

## B.11 Pre-existing conditions

### B.11.1 Definition of pre-existing conditions

Pre-existing conditions include all illnesses, health complaints, clinical symptoms, injuries, consequences of accidents (including late-onset consequences), malformations, developmental disorders, congenital or hereditary conditions, as well as behavioural disorders of the insured animal that first occurred before the start of the contract, were identified, investigated, treated or documented by a veterinary surgeon, or were known to the policyholder.

Pre-existing conditions also include any complaints or findings which, before the start of the contract, had not yet been conclusively diagnosed but were already identifiable through symptoms, suspected diagnoses, veterinary advice, recommended investigations, treatments, medication, diets, follow-up appointments or other medical measures.

The relevant date is the point in time when the first symptoms, complaints, findings, suspected diagnoses or veterinary indications occurred or were documented.

### B.11.2 Insured event – pre-existing conditions

Treatment costs relating to pre-existing conditions that existed at the start of the contract are covered. Treatment, investigations, recurrences, deterioration, complications, consequential illnesses, late-onset consequences and secondary diagnoses, provided there is a medically justifiable link to the pre-existing condition, are covered.

A medical link is deemed to exist, in particular, in the following cases:

- The same body region, organ system or disease complex is affected.
- The same, similar or recurring symptoms are present.
- The later diagnosis can medically explain earlier symptoms or clinical findings.
- Where further investigation, monitoring or treatment had already been recommended before the start of the contract.
- The later treatment is undertaken to investigate, confirm, monitor or treat symptoms that already existed before the start of cover.

Exclusion: there is no cover for pre-existing conditions, nor for any related consequential conditions (unless the attending veterinary surgeon can confirm that there is no connection to the pre-existing condition), where the pre-existing condition first occurred within the three months immediately preceding the start date of the first policy. This includes cases where the first symptoms, clinical signs, findings, suspected diagnoses or veterinary observations arose or were recorded during this period, even if no definitive diagnosis had yet been made.

Addition of pre-existing condition cover after contract inception: Where cover for pre-existing conditions is added to an existing contract at a later date, such cover applies only to pre-existing conditions that existed before the original start date of the contract, meaning that the first symptoms, clinical signs, findings, suspected diagnosis or veterinary indications had already occurred or been documented before that date. Any pre-existing condition that first occurred within the three months immediately preceding the original start date of the contract, or during the applicable waiting period, is not covered, including any related treatment costs, consequential illnesses or complications. The effective date of the contract amendment determines only the date from which, subject to the applicable waiting period, costs relating to covered pre-existing conditions may be claimed. Any costs incurred before the effective date of the contract amendment are not covered under any circumstances.

Claims requirements: when assessing a claim, and where requested by simpego, the policyholder must provide complete and accurate information regarding all symptoms, clinical signs, suspected diagnoses, confirmed diagnoses, known or apparent illnesses, accident-related conditions, veterinary treatment, prescribed medication, therapeutic diets, recommended investigations and planned treatment relating to the insured pet. Incomplete or inaccurate information may, in accordance with the applicable law and the terms of this contract, result in claims being declined, exclusions or endorsements being applied, or the contract being amended or terminated.

### B.11.3 Examples of pre-existing conditions

Pre-existing conditions include, in particular, but are not limited to:

- Chronic or recurring skin, ear or allergy problems, e.g. atopy, recurring otitis, itching, paw licking or chronic skin inflammation.
- Tumour-related conditions, growths, masses or findings suspected to be cancerous.
- Heart conditions, heart murmurs or cardiac abnormalities.
- Chronic kidney, urinary tract or bladder conditions, e.g. chronic kidney disease, recurring cystitis, urinary stones or crystals.
- Orthopaedic or neurological conditions, e.g. lameness with a chronic underlying condition, osteoarthritis, patellar luxation, hip or elbow dysplasia, intervertebral disc disease, cruciate ligament disorders, seizures or epilepsy.
- Endocrine or metabolic conditions, e.g. diabetes mellitus, thyroid disorders, Cushing's syndrome or Addison's disease.
- Chronic or recurring gastrointestinal problems, e.g. recurring vomiting, chronic diarrhoea, food intolerances or chronic inflammatory bowel disease.
- Congenital, hereditary or developmental conditions and abnormalities, e.g. cryptorchidism, brachycephalic-related conditions, structural deformities or genetically inherited disorders.



- Dental and jaw conditions, where these existed, were documented or required treatment before the start of insurance cover.

### B.11.4 Distinction regarding pre-existing conditions

The following shall not be considered pre-existing conditions: one-off, acute and fully resolved minor incidents, provided that there are no indications of a chronic, recurring or ongoing condition and there is no medical connection to the claim subsequently submitted.

These may include, in particular:

- One-off, uncomplicated skin irritations or hot spots.
- Flea, tick or insect bites without any lasting effects.
- Short-term, uncomplicated gastrointestinal complaints lasting less than seven days.
- Torn claws without any lasting effects.
- Temporary lameness where there is no diagnosed chronic condition, no lasting effects and no recurrence.
- Minor injuries that have fully healed and require no further treatment.

However, such events are considered a pre-existing condition if they recur, persist for a longer period, require further diagnostic investigation or are medically related to later symptoms or if there are indications of an underlying condition.

## B.12 Additional benefits

Depending on the agreement stated in the insurance contract, the following benefits are covered up to the amount specified for each individual benefit in the contract per contract year.

A benefit is always structurally linked to a main area of cover (illness and/or accident, pre-existing condition, etc.). This means that:

- the agreed annual deductible and cost coverage for the relevant main area of cover also apply to each individual benefit; and
- the agreed sum insured for a main area of cover is the maximum compensation per contract year. All benefits paid under the main area of cover and the additional benefits insured under that main area of cover are added together and are collectively limited to this total.

### B.12.1 Dental illness benefit

Covered are costs relating to dental illnesses, diseases of the supporting structures of the teeth (periodontal disease) and any resulting secondary conditions. Costs for dental prostheses, such as crowns, are not covered.

### B.12.2 Complementary medicine treatment benefit

In connection with an insured event, the following forms of treatment are covered:

- Hydrotherapy
- Homeopathy
- Acupuncture
- Physiotherapy
- Osteopathy
- Laser therapy

This list is exhaustive. Other forms of treatment are not covered.

In the event of an insured accident, complementary medicine treatments are covered for a maximum period of one year after the injury has successfully healed. An accident is considered to have fully healed where, in the veterinary surgeon's opinion, no further examinations, monitoring or veterinary treatment are required. If complementary medicine treatment following an insured accident continues for longer than one year, any costs incurred thereafter are no longer covered.

### B.12.3 Veterinary diet and nutritional supplements benefit

Covered are veterinary diets, nutritional supplements and nutritional advice prescribed by a veterinary surgeon or another recognised service provider as part of the treatment of an insured event. Veterinary diets and nutritional supplements must be obtained directly from the veterinary surgeon or supplied with an appropriate prescription.

### B.12.4 Emergency treatment costs benefit

If an emergency occurs in connection with an insured event, the additional treatment costs arising from the emergency are covered, including any applicable emergency surcharges. This also includes the costs of a veterinary ambulance (excluding helicopter transport), where medically necessary, for transporting the pet to an emergency clinic or for the emergency transfer of the pet from a veterinary surgeon to a larger veterinary hospital. If no other means of transport is available that would allow the quickest possible transport of the pet for emergency treatment, the costs of a taxi or similar transport service will be covered. This applies only to the transport of the sick or injured pet to the nearest emergency clinic or emergency veterinary surgeon. Where home visits are medically necessary, we will cover the additional costs incurred as a result.

An emergency is defined as a sudden illness or injury requiring immediate, unforeseen and unplanned medical treatment because otherwise the pet's health would be seriously at risk. This means that symptoms occur acutely or worsen suddenly to such an extent that any delay in treatment would be dangerous. No emergency treatment costs will be covered for conditions that have existed for some time and have not suddenly deteriorated.

### B.12.5 Preventive care budget benefit

Preventive care includes the following treatments:

- Vaccinations;
- Planned neutering (medically necessary neutering – meaning neutering required due to a life-threatening emergency situation or pathological changes affecting the ovaries, uterus or testicles – is not considered preventive care);
- Dental scale and polish, including any anaesthetic required for the procedure; other dental treatments, including any necessary dental X-rays, are not considered preventive care, even if carried out at the same time as the dental scale and polish;
- Flea and worm treatments;
- Annual general veterinary health check-up/consultation; for animals aged nine years and over, this includes a senior blood health check (geriatric blood profile for the early detection of diseases). Further examinations such as ultrasound scans or X-rays are not considered preventive care.

This list is exhaustive.

### B.12.6 Full cover in the event of hereditary/congenital conditions benefit

If the insured illness event is a hereditary or congenital condition as defined in Article B.8.2., the benefit restriction does not apply.

## B.13 Exclusions

The following are not covered:



1. Behavioural medicine treatments where, according to the treating veterinarian, the condition is attributable to inadequate training, or where the pet is or has been kept in a manner that does not comply with the requirements of the Swiss Animal Welfare Act (TSchG) and Animal Welfare Ordinance (TSchV).
2. Costs for cosmetic surgery and reconstructive surgery carried out for aesthetic reasons, including any resulting consequences.
3. Costs for veterinary reports and certificates prepared at the request of the policyholder.
4. Costs for registering the animal and fitting microchips.
5. Costs relating to the treatment of an illness or injury that has been caused directly or indirectly by negligent or intentional behaviour by an insured person, whether through an act or omission.
6. Pets belonging to members of the armed forces, police, fire services, military services or security services of any kind, where the animal is used in a professional capacity. However, pets that take part in voluntary non-commercial activities (e.g. rescue dogs) remain insured during such voluntary deployments and during training for these activities.
7. Accidents occurring during events with a competitive nature (e.g. races or coursing competitions). Accidents occurring during training are, however, covered.
8. Costs for euthanasia (unless medically necessary), as well as costs for post-mortem examinations and cremation, including urns.
9. Costs for treatments that are not based on recognised medical or complementary medical practices.
10. Costs for dietary treatments, treatments or illnesses resulting from obesity, as well as specific foods, medicines and dietary supplements intended for this purpose. This does not apply where the weight gain is the result of a diagnosed illness.
11. Costs associated with reproduction (for example pregnancy, birth, infertility, genetic testing, etc.), including any resulting consequential costs, follow-up treatments and related illnesses.
12. Costs and consequential costs relating to damage to the insured pet caused by a third party, where that third party has been identified and can be held liable for the damage. If the third party does not have suitable liability insurance, or if their insurance does not cover the damage despite liability being established, simpego will cover the costs and will subsequently recover these from the person responsible.
13. Costs associated with the insured pet travelling abroad or entering Switzerland (e.g. rabies antibody titre testing, quarantine stays and any veterinary examinations required for these purposes).

# C – Additional coverage

Where agreed in the insurance contract, the following additional coverage are included.

## C.1 Emergency pet care

### C.1.1 Insured benefit

The costs of accommodating the insured pets in a boarding facility or the costs of a professional pet sitter are covered up to the amount per day and the maximum number of days per contract year specified in the insurance contract.

### C.1.2 Insured circumstances

1. An insured person is admitted to hospital unexpectedly and as an emergency.
2. A planned hospital stay of an insured person must be extended unexpectedly due to complications that arise.
3. An insured person is unable to commence their return journey from holiday on time, through no fault of their own, due to a failure of the means of transport, and the return journey must therefore be postponed. In this situation, only the number of days until the earliest possible return journey will be covered. If the holiday is extended beyond the earliest possible return opportunity due to the transport failure, no benefit will be paid for the additional days. If the return journey cannot be made (e.g. a missed flight or train) because insufficient and reasonable time was not allowed for transfers, check-in procedures, etc., this will be deemed to be the insured person's own fault.

### C.1.3 Compensation guidelines

1. The benefit applies per insured pet and for all pets insured under the contract.
2. The benefit is limited to the number of days per contract year specified in the insurance contract, regardless of the number of claims made.
3. The benefit is limited to the daily amount specified in the insurance contract. If the insured number of days is not fully used, there is no entitlement to a higher daily reimbursement amount.
4. No reimbursement will be provided if the insured pet is cared for during this period by another insured person or by a private, non-professional pet sitter.
5. If emergency pet care is required due to an unexpected hospital admission or an unexpectedly extended hospital stay, and the insured person is still unable to care for the pet themselves after being discharged from hospital, the care costs will be covered for a maximum of a further seven days. However, the maximum number of insured days per contract year may not be exceeded.

## C.2 Rescue & recovery

### C.2.1 Insured benefits

Up to the amount specified in the insurance contract, the insurance covers the costs of recovering and rescuing the insured pet. This includes assistance provided by specialist rescue organisations, such as air rescue services or animal ambulances, as well as rescue operations carried out by the police, fire brigade, or other organisations and persons equipped to perform rescue and recovery operations.

### C.2.2 Insured circumstances

1. The insured animal is in an acute emergency situation and must be rescued. A rescue must be carried out where the person responsible for the pet is unable or cannot reasonably be expected to carry out the rescue themselves, for example because the necessary equipment is unavailable, the pet is panicking and/or an injury cannot be ruled out, the terrain is inaccessible, in the case of a trapped pet, the building or location is inaccessible, and/or the person attempting the rescue would put themselves at risk.
2. The person responsible for the pet is themselves in an emergency situation and requires rescue assistance, while the insured pet remains behind.

### C.2.3 Compensation guidelines

- Simpego will contribute towards the costs up to the amount stated in the insurance contract but does not arrange or coordinate the rescue operation.
- The benefit is limited to the amount specified in the insurance contract and applies per insured event.
- The benefit is limited to the recovery and rescue of the insured pet. Recovery and rescue costs for any persons rescued at the same time are not covered under this section.



### C.2.4 Exclusions

The insurance does not cover the following:

- Losses and damage arising when the pet is taken on routes that are not suitable for pets, or where the pet has not received the appropriate training for such routes.
- Losses and damage that could reasonably have been expected with a high degree of probability.
- Losses and damage arising on alpine sections rated Grade III or above (UIAA). Insurance cover is provided for sections from Grade II onwards only if the pet has been appropriately secured or transported in a backpack designed for this purpose.