

# Direct Insurance Authorisation & Information Form

To be completed in full by client prior to treatment.

## 1 . CLIENT DETAILS

Client Title

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Client First Name

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Client Surname

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Home Address, including postcode

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Home Telephone Number

Mobile Number

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Email Address

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## 2 . INSURANCE DETAILS

Insurance Company Name

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Policy number

Policyholder's name

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Policy Excess

Level of cover

---

Limit of vet fees £

Pet Name

---

Inception date

Breed

---

Other claims this year?

Sex

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Please show certificate of insurance on day of treatment to admission nurse

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## 3 . CLIENT AUTHORISATION

I hereby authorise my insurance company to pay fees relating to the above named animal to [insert practice name] \_\_\_\_\_ upon receipt of my completed forms. I confirm I am authorising [insert practice name] \_\_\_\_\_ to discuss my policy directly with the insurance company, and negotiate in respect of any matters relating to the policy, including on clinical and financial matters.

I confirm I have read and understood the Direct Claim T&Cs. I also accept that any amounts due, which are not covered by my insurance policy, or still outstanding by 60 days following initial treatment, will be my personal liability to settle immediately. Any issues regarding my policy or cover will be settled directly with my insurance company.

Signed

Dated

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# Terms & Conditions of Direct Insurance Claims

**To be discussed in full with the client, prior to completion of the direct insurance form.**

## **VALID INSURANCE COMPANIES**

Taylor Veterinary Practice are happy to deal directly with your insurance company to receive payment for claims of £150 minimum. However, we wish to advise you that we do not deal with direct claims from certain insurance companies. Please refer to the "Prohibited Direct Insurance Claim List" for details. If your insurer is on that list, we will be happy to assist you with submission of claim forms on your behalf, but payment must be made directly to us by yourself.

### **Administration Fee**

Claims being made directly to us, are subject to a £15 charge to cover the administration costs of dealing with your claim.

## **AUTHORISATION TO DISCUSS YOUR POLICY**

We are able to discuss insurance plans with Petplan and RSA brokered plans, under individual arrangements made with them. Under Financial Services Authority (FSA) rules, we are usually unable to discuss claims with other insurers.

## **UNDERSTANDING YOUR COVER**

Insurance companies offer different levels of cover, and we strongly recommend you check your policy details for level of cover, and items which are excluded. Prior to committing to treatment, we suggest you establish and confirm:

- That the condition being treated is covered by your insurance policy, and that in the event of an on-going claim, you check that there are no exclusions in place, or limits to what you can claim
- Your limit for claims per year on your policy
- How much you have already claimed (either at our practice, or in the case of referrals your local practice)

Please note that we do not track your policy, and it is your responsibility to ensure that your limits are not exceeded, or if they are you can personally cover the costs of any outstanding amounts.

## **STANDARD EXEMPTIONS**

Items that are not covered will vary between insurance companies. However, the following are usually not covered: Food, Cremation, vaccinations, flea and worming treatment, dental procedures, some complimentary therapies like Physio, Hydrotherapy and Behavioural consultants.

Some policies may also decline to cover out of hours consultations and house visits – unless life threatening. These items will be required to be settled in full at time of purchase.

## **PAYMENT OF INSURANCE EXCESS**

The majority of insurance companies charge an excess per condition. This amount must be paid at the start of each treatment, and is due each year for the condition. They can be a fixed amount, percentage of claim or combination of both.

If you are unsure you should speak to your insurance company to clarify.

## **PRE - AUTHORISATION**

If there is time, we recommend a pre-authorisation form is completed, so that they can confirm before treatment commences whether the condition is covered. Please note that not all insurance companies will provide this.

## **ESTIMATES**

We are happy to provide an estimate of the potential cost of treatment. You should note that this will not be an exact quotation – part of the treatment program involves investigation to establish the exact nature of the condition. We will commit to keeping you regularly informed of on-going costs.

## **TIMESCALES**

You will need to submit your claim form within 3 working days of receiving your first treatment. If you fail to do this, we will reverse your direct claim status, and you will become personally liable for the treatment. We can support your processing of an indirect claim to your insurance company.

## **PAYMENT OF OUTSTANDING BALANCES**

Payment of outstanding balances, either due to standard exemptions, or in the event of non-coverage from the insurance company (for example where limits have been breached) will be your personal liability to settle. **We require immediate payment for these items.**