



## Pre-Authorisation Request Form

Policy Holder _____	Pet Name _____
Policy Number _____	Breed _____
Name of Procedure _____	
Total cost of procedure _____	
Scheduled date of procedure _____	
Date of condition's first signs or symptoms _____	
Previous Vet (If applicable) _____	

**Please note:** pre-authorization is only granted for reasonable and customary treatment and costs relating to the procedure.

Description of Procedure (Please include alternative procedures for this condition if available)

## Pre-Authorisation Paperwork Checklist

Prior to submitting this form, please ensure that you have a:

- Relevant clinical records and/or your pet's veterinary history.  
This includes all medical records from all facilities that have seen your pet (including emergency and specialist facilities). When requesting records from your veterinarians, please stress that they must include notes from veterinarian's exams. A medical summary is not acceptable.
- Description of procedure completed above.
- Full itemised estimate of costs relating to procedure from the treating veterinarian.

Once you have all of the necessary documentation please email it to support@9livesinsurance.com.au.

## Important things you should understand

Submission of this request does not guarantee pre-authorization. We will advise you in writing of the outcome, after your request has been reviewed.

It's important to know that pre-authorization of veterinary expenses will be approved based on the information that is provided to us by you and your vet. If the treatment provided by your vet differs from the approved pre-authorization of veterinary expenses, the reimbursement amount may vary.

Please remember, that you will still need to lodge a claim after your pet has received veterinary treatment in order to receive any claim benefits you are entitled to. Even if we do not approve the pre-authorization, we still urge you to submit a claim, as all information, including any new information, will be taken into consideration. We reserve the right to apply the policy Terms and Conditions to any claim, should further information become available.

Please note that general exclusions, including pre-existing conditions may not be covered under your policy. Refer to the Product Disclosure Statement (PDS) for more information.

## Important Note

The insurer is relying on the information provided in this form when providing pre-approval. A claim for reimbursement of veterinary expenses will still need to be made and assessed following treatment. If the treatment provided by your vet differs from the approved pre-authorization of veterinary expenses, the reimbursement amount may vary. Veterinary charges associated with the completion of this form are not covered under your policy. Once we have all the required information, we will aim to process your request within two business days.

Date \_\_\_\_\_ Preferred contact email address \_\_\_\_\_