Health Insurance Denial Appeal Letter Template

Dear Health Insurance Company,

I am writing to appeal the decision to deny coverage for [medical treatment/procedure]. I believe that this treatment is medically necessary and would like to provide additional information for your consideration.

[Explain the medical necessity of the treatment, any supporting documentation from healthcare professionals, and how the treatment will contribute to your overall health and well-being.] I am committed to maintaining my health and seeking appropriate medical care.

I kindly request a review of my health insurance claim and hope for a positive reconsideration. Your support is crucial during this time of medical need.

Thank you for your understanding and consideration.

Sincerely,