

# Letter of Explanation for Denied Insurance Claim

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To Whom It May Concern,

I am writing to formally request an explanation regarding the recent denial of my insurance claim (Claim Number: [Insert Claim Number]) submitted on [Insert Submission Date]. According to the notification I received on [Insert Denial Date], my claim was denied due to [Briefly State Reason for Denial].

I believe that additional information may warrant a reevaluation of this decision. [Briefly explain your reasons, additional evidence, or circumstances that support your claim].

Attached are copies of relevant documents that support my case including [List Documents]. I kindly request that you review these documents and reconsider your decision regarding my claim.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]