

# Delay Notification for Insurance Claim Appeal

Date: [Insert Date]

Policyholder Name: [Insert Name]

Policy Number: [Insert Policy Number]

Claim Number: [Insert Claim Number]

Dear [Policyholder Name],

We hope this message finds you well. We are writing to inform you regarding the status of your appeal for your recent insurance claim associated with the above-mentioned claim number.

We acknowledge receipt of your appeal dated [Insert Appeal Date] and appreciate your patience in this matter. We want to assure you that our team is working diligently to review your appeal thoroughly, as we understand the importance of this issue.

However, due to [brief explanation of reason for delay, e.g., high volume of appeals, need for additional documentation, etc.], we regret to inform you that the review process has taken longer than anticipated. We are committed to providing you with a fair assessment, and therefore, we require additional time to finalize our review.

We expect to complete the review by [Insert New Expected Date]. We appreciate your understanding and assure you that we will keep you updated on any developments regarding your appeal.

If you have any questions or need further assistance, please do not hesitate to reach out to us at [Insert Contact Information].

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Title]

[Insurance Company Name]

[Contact Information]