

Insurance Claim for Cochlear Implants

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Insurance Claim for Cochlear Implants

Dear [Insurance Adjuster's Name],

I am writing to formally submit a claim for coverage of cochlear implants due to my hearing loss, as outlined in my policy number [Insert Policy Number].

As per the recommendation of my audiologist, Dr. [Doctor's Name], cochlear implants are medically necessary for my hearing condition. Attached, you will find the following documents:

- Medical reports detailing my hearing loss.
- Recommendation letter from Dr. [Doctor's Name].
- Invoices for the cochlear implants and related services.

According to my policy, I believe that these costs should be covered. I would appreciate your prompt attention to this matter and look forward to your response regarding the next steps.

Thank you for your assistance.

Sincerely,

[Your Name]