Customer Support Request

Date: [Insert Date]

To: [Insurance Company Name]

Address: [Insurance Company Address]

Dear Customer Support Team,

I hope this message finds you well. I am writing to inquire about the co-payment details related to my insurance policy.

My policy number is [Insert Policy Number], and I have recently received a bill that includes a co-payment amount. I would like to understand the following:

- The specific co-payment amount for my recent claims.
- Any changes to the co-payment structure in my policy.
- Clarification on any services that may require a different co-payment amount.

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

Sincerely,

[Your Name]

[Your Address]

[Your Contact Information]