

Inquiry Regarding Hospitalization Policy Coverage

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To,

[Insurance Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Insurance Company Representative/Customer Service],

I hope this message finds you well. I am writing to inquire about the hospitalization policy coverage under my current insurance plan (Policy Number: [Insert Policy Number]).

Specifically, I would like to understand the following:

- The extent of coverage for hospitalization treatments.
- Any limitations or exclusions related to specific medical conditions.
- The procedure for pre-authorization and claims filing.
- Information on deductibles and co-payments.

Please let me know if there are any additional documents or information you need from my side to assist with my inquiry.

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

Sincerely,

[Your Name]