

Health Insurance Benefit Explanation Request

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Insurance Company Name]
[Insurance Company Address]
[City, State, Zip Code]

Dear [Insurance Company Representative/Claims Department],

I hope this message finds you well. I am writing to formally request a comprehensive explanation regarding my health insurance benefits related to my recent claim, [Claim Number], submitted on [Submission Date].

I would appreciate if you could provide detailed information about the following:

- Coverage details for the specific services rendered.
- Any exclusions or limitations that may apply to my policy.
- The reasoning behind any denied claims or out-of-pocket expenses.

Thank you for your prompt attention to this matter. I look forward to your thorough explanation at your earliest convenience.

Sincerely,

[Your Name]

[Your Policy Number]