

Pet Insurance Claim Appeal Letter

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

Claim Number: [Insert Claim Number]

To: [Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Claims Adjuster's Name],

I am writing to formally appeal the denial of my pet insurance claim for [Pet's Name], dated [Claim Date], regarding [specific treatment/incident]. I was informed that the claim was denied due to insufficient evidence of coverage.

Upon reviewing my policy details and the documentation submitted, I believe that [insert reasons supporting your case, e.g., the treatment is indeed covered as per your policy, provide any additional evidence or context].

I have attached additional documentation that further substantiates my claim, including [list any documents such as medical records, receipts, or policy excerpts].

I kindly request that you review this information and reconsider the coverage of this claim. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]