

Pet Insurance Claim Appeal

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

Claim Department

[Insurance Company Name]

[Company Address]

[City, State, Zip Code]

Dear Claims Adjuster,

I am writing to formally appeal the decision regarding my recent pet insurance claim for reimbursement (Claim Number: [Insert Claim Number]). I appreciate the prompt handling of my claim; however, I would like to dispute the reimbursement amount that was provided.

After reviewing the claim summary and the decision letter dated [Insert Date], I believe that certain charges were not appropriately covered under my policy. Specifically, I am disputing the denial of reimbursement for [insert specific treatments or services], which I believe fall under the covered services per my policy agreement.

I have attached all relevant documents, including the original invoice, policy details, and any additional information that supports my case for a higher reimbursement. I trust that you will examine this matter closely and reconsider the reimbursement amount.

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

Sincerely,

[Your Name]