

Pet Insurance Claim Appeal

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Appeal for Claim Denial - Policy #[Your Policy Number]

Dear [Claims Adjuster's Name],

I am writing to formally appeal the denial of my recent claim (Claim Number: [Claim Number]) for my pet [Pet's Name], who was diagnosed with [Diagnosis] on [Date of Diagnosis]. The unexpected health issue required urgent treatment, and I believe the claim should be reconsidered based on the following information.

On [Date of Incident], [Pet's Name] experienced [Brief Description of Incident/Symptoms]. Due to the nature of the situation, I promptly took [him/her] to [Veterinary Clinic Name] for evaluation and treatment. Attached, you will find the medical records from [Veterinary Clinic Name], along with the invoice detailing the costs incurred.

Per my understanding of my policy and the circumstances surrounding this health issue, I believe that these costs should be covered under my current plan. I kindly request that you review the attached documentation and reconsider your initial decision regarding the claim.

Thank you for your attention to this matter. I look forward to your prompt response and a resolution to my appeal. Please feel free to reach out to me at [Your Phone Number] or [Your Email Address] if you require any additional information.

Sincerely,

[Your Name]