

# Health Insurance Premium Clarification

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email]

[Your Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, ZIP Code]

Dear [Insurance Company Contact/Team],

I hope this message finds you well. I am writing to seek clarification regarding my health insurance premium for the policy number [Insert Policy Number].

Upon reviewing my recent bill, I noticed a discrepancy that I would like to understand better. Specifically, [describe the specific issue or confusion regarding the premium, e.g., an increase in price, unclear charges, etc.].

I would appreciate any information you could provide regarding this matter, including a detailed breakdown of the premium charges and reasons for any changes, as well as any options available to me.

Thank you for your assistance. I look forward to your prompt response.

Sincerely,

[Your Name]