

Follow-Up Letter for Pre-Authorization of Mental Health Services

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Insurance Company Name]

[Claims Department Address]

[City, State, Zip Code]

Dear [Insurance Company Representative's Name],

I am writing to follow up on my previous request for pre-authorization of mental health services submitted on [Insert Date of Initial Request]. My policy number is [Insert Policy Number], and the details of the requested services are as follows:

- Provider Name: [Insert Provider's Name]
- Service Requested: [Insert Type of Service]
- Date of Service: [Insert Date]

As of today, I have not received a response regarding the pre-authorization status. I would appreciate your prompt attention to this matter as these services are vital for my ongoing mental health treatment.

Please let me know if you require any further information or documentation. I look forward to your swift reply.

Thank you for your attention to this matter.

Sincerely,

[Your Name]