

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Request for Clarification on Health Insurance Terms

Dear [Recipient's Name or Customer Service],

I hope this message finds you well. I am writing to request clarification on certain terms and conditions related to my health insurance policy (Policy Number: [Insert Policy Number]).

Specifically, I would like to understand the following:

- Details about [specific term or condition].
- Explanation of coverage limits regarding [specific detail].
- Information on the claim process for [specific services or treatments].

I would appreciate if you could provide detailed information regarding these terms so that I can better understand my coverage and obligations.

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

Sincerely,

[Your Name]