

Health Insurance Benefits Clarification

Date: [Insert Date]

To: [Recipient's Name]

Address: [Recipient's Address]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request clarification regarding my health insurance benefits associated with policy number [Insert Policy Number]. There are a few specific areas where I need further information:

- Coverage details for [specific service/procedure].
- Co-payment amounts for [specific services].
- Any out-of-pocket maximums that may apply.

Understanding these benefits is crucial for my healthcare planning, and I would appreciate your assistance in providing detailed explanations.

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

Sincerely,

[Your Name]

[Your Address]

[Your Contact Information]