

Health Insurance Claim Rejection Appeal Letter

Use this after your insurer has rejected (repudiated) a health claim, to formally appeal the decision to the Grievance Redressal Officer.

HOW TO USE THIS TEMPLATE

- Replace every [bracketed] field with your own details.
- Keep the tone factual. Quote the exact reason and clause from your rejection letter.
- Send it by email to the address in your policy document and keep the sent copy.
- Attach the enclosures listed at the end and refer to them by number.

DATE [DD Month YYYY]
TO The Grievance Redressal Officer
[Insurance Company Name]
[Branch / registered-office address from your policy document]
[City, State, PIN]

RE: Appeal against rejection of health insurance claim | Policyholder: [Name] | Policy No: [] | Claim No: [] | Rejection letter dated: []

Dear Sir / Madam,

I am the policyholder under **[policy name and number]**. I am writing to appeal the rejection of my health insurance claim **[claim number]**, for my hospitalisation at **[hospital name]** from **[admission date]** to **[discharge date]**. Your letter dated **[date]** rejects the claim on the following ground: **[quote the exact reason and the policy clause cited]**.

Why I believe the rejection is not correct

1. **[First reason, tied to a fact or an enclosed document.]**
2. **[Second reason, tied to a specific policy clause or IRDAI rule.]**
3. **[If it applies: my policy has been in force continuously for more than 60 months, so under the moratorium rule the claim cannot be contested on non-disclosure or pre-existing-disease grounds except in proven fraud.]**

WHAT I AM ASKING FOR

Please carry out a fresh review of the enclosed documents and reverse the rejection. I request settlement of [the full claim amount of ₹(amount) / the withheld balance of ₹(amount)] within the timeline IRDAI sets for grievance resolution. As this is a health claim, please also confirm in writing that the rejection was approved by your Claims Review Committee, and share its reasoning.

If I do not receive a satisfactory written response within about 15 days, I will escalate this matter to IRDAI through the Bima Bharosa portal and to the Insurance Ombudsman.

Yours faithfully,

[Signature]

[Your Name]

[Address] - [City, State, PIN]

[Phone] | [Email]

Enclosures

1. Copy of the claim rejection / repudiation letter dated [date]
2. Copy of the policy schedule and wording, with the relevant clauses marked
3. Discharge summary, itemised hospital bill and payment receipts
4. Investigation reports, prescriptions and other medical records
5. Copy of everything submitted with the original claim

ClaimBhai note

This appeal goes to your insurer's Grievance Redressal Officer first. If it fails, use the Insurance Ombudsman Complaint Letter template. Send by email; keep the acknowledgement and grievance reference number.