Non-Disclosure Claim Rejection Response Letter

Use this when a claim is rejected for 'non-disclosure' or 'misrepresentation of material facts' at the time the policy was bought.

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] [Address from your policy document] [City, State, PIN]

RE: Appeal against rejection for non-disclosure | Policy No: [ ] | Claim No: [ ] | Rejection dated: [ ]

Dear Sir / Madam,

My health insurance claim **[claim number]** under policy **[number]** has been rejected by your letter dated **[date]** on the ground of non-disclosure / misrepresentation, specifically that I did not disclose **[the fact the insurer names]** on the proposal form.

Why the rejection should be reconsidered

[Use the points that apply:]
1. The proposal form did not contain a specific question covering this fact.
2. I did disclose it - see **[the enclosed proposal form / medical report / email to the agent]**.
3. The fact is not material to this claim - **[explain the lack of connection, with the treating doctor's note]**.
4. The proposal form was completed by the agent / tele-caller and the answers were not shown to me before the policy was issued.
5. My policy has been in force continuously for **[number]** months. After 60 months of continuous coverage the insurer cannot contest a claim on non-disclosure grounds except in proven fraud; the burden of proving deliberate concealment is on the insurer.

WHAT I AM ASKING FOR

Please review the enclosed documents and reverse the rejection, settling the claim of ₹[amount]. If the position is maintained, please identify the exact proposal-form question and explain how the undisclosed fact is material, and confirm that the Claims Review Committee approved the decision.

Failing a satisfactory reply within about 15 days, I will approach IRDAI via Bima Bharosa and 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
6. Copy of the proposal form submitted when the policy was bought
7. Treating-doctor letter on the date of first diagnosis (if a medical condition is in question)
8. Earlier medical records showing the condition was undiagnosed when the policy began (if relevant)

ClaimBhai note

The key questions are: was the fact material, were you asked about it, did you know it, and how old is the policy. Pair this with our guide on non-disclosure claim rejections.