**Request to insurer for complete file on the disputed claim**

**INSTRUCTIONS**:

This letter template may be used by a patient to request that the insurer provide all relevant documentation pertaining to their handling of the claim.

This request can be made initially by phone to an insurer customer service rep, though it should also be made in writing.

**TEMPLATE**:

Date

Member: [patient]

Member DOB: […]

Member ID number

To Whom It May Concern:

This letter requests that [HEALTH INSURER] provide all claim documentation related to the services provided to [PATIENT] by [PROVIDER] from [START DATE] to [END DATE].

This documentation should include, but is not limited to, the following:

* A copy of the insurance policy and any additional documentation related to claims determinations policies and procedures
* A copy of any medical guidelines or standards used to render the claim decision
* Any medical or physician reports generated internally by [HEALTH INSURER]
* Any medical reports generated by contractors or others on behalf of [HEALTH INSURER]
* Reports of any kind submitted to [HEALTH INSURER] by [PROVIDER]
* Any claims-related documentation, such as Explanations of Benefits (EOBs), prior authorizations, denials or any other documentation related to the level of care determinations
* Call logs and recordings of calls pertaining to these services and claims
* Designated record set as specified in the HIPAA Right of Access

This information is essential to my understanding of how insurance claims and determinations for these services have been processed by [HEALTH INSURER] and to my assessment of a potential appeal.

Please provide this information at your earliest convenience, though no later than 15 business days from receipt that I may make a timely decision regarding a potential appeal.

As this request includes certain personal health information, please send this documentation by overnight delivery to [ADDRESS]. Please provide a tracking number following shipment.

Thank you.