

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Insurance Company Name]  
[Claims Department Address]  
[City, State, Zip Code]

Subject: Request for Coverage of IUD

Dear [Insurance Company/Claims Department],

I hope this letter finds you well. I am writing to request coverage for an Intrauterine Device (IUD) as part of my family planning and reproductive health needs.

My policy number is [Your Policy Number]. I have reviewed my insurance benefits, and I believe that the IUD falls under the preventive services covered by my plan. I have consulted with my healthcare provider, [Provider's Name], and they have recommended the IUD as the most suitable option for my situation.

Enclosed with this letter, you will find the following documents:

1. A copy of my insurance card
2. A letter from my healthcare provider detailing the medical necessity for the IUD
3. Any relevant medical records

I would appreciate your prompt attention to this matter and look forward to your response. Should you have any questions or need additional information, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]