

How to Write a Patient Advocacy Letter for Nerivio Insurance Coverage, With an Example

Why Write a Letter?

If your insurance company does not currently cover Nerivio, writing a personal support letter can help make a case for coverage. A strong letter explains your medical history, past treatments, and the benefits Nerivio offers you. It also includes a clear request for coverage.

Key Components of an Effective Letter

1. **Introduce Yourself & Your Condition**
 - a. State your name and insurance provider.
 - b. Mention how long you've had migraine and how the disease impacts your life.
2. **Describe Past Treatments & Their Limitations**
 - a. List medications, therapies, and other treatments you've tried.
 - b. Explain why they haven't worked (e.g., side effects, lack of effectiveness).
3. **Explain Why Nerivio is the Best Option for You**
 - a. If your HCP recommended Nerivio, mention it.
 - b. Highlight it's drug-free and the clinical impact it has on you.
 - c. Share any personal experience you've had using Nerivio (if applicable).
4. **Request Insurance Coverage**
 - a. Ask for coverage under your medical benefits (Durable Medical Equipment or Pharmaceutical).
 - b. Mention that other insurance providers cover Nerivio and especially mention insurance in your area.
5. **Thank the Reader & Include Contact Information**
 - a. Express appreciation for their time and consideration.
 - b. Offer to provide further medical documentation if needed.

Disclaimer: This guide is for informational purposes only and does not constitute legal or medical advice. The sample letter is a general example and should not be considered a guarantee of insurance coverage approval. Each insurance provider has its own policies, and coverage decisions are subject to their discretion.

Sample Advocacy Letter (For Example Purposes Only)

[Your Name]

[Your Address: City, State, ZIP]

[Your Email, Your Phone Number]

[Date]

[Insurance Provider Name]

[Insurance Company Address: City, State, ZIP]

Subject: Request for Coverage of Nerivio for Migraine Treatment

Dear [Insurance Representative's Name],

My name is [Your Name], and I am a member of [Insurance Plan Name]. I have struggled with debilitating migraine disease for [X] years, which significantly affects my daily life, including my ability to work, care for my family, and perform daily activities.

Over the years, I have tried numerous treatments, including [list medications] and [list therapies, such as physical therapy, acupuncture, and cognitive behavioral therapy]. Unfortunately, many of these treatments have been ineffective or have caused severe side effects.

Recently, my doctor recommended Nerivio, a drug-free, FDA-cleared migraine treatment. I had the opportunity to try it, and I noticed a significant reduction in the severity and frequency of my migraine attacks. Unlike medications that cause intolerable systemic side effects, Nerivio provides effective relief without additional health risks.

I was disappointed to learn that [Insurance Provider Name] does not currently cover Nerivio, even though other insurance companies do. I am requesting that you reconsider coverage under either my Durable Medical Equipment or Pharmaceutical benefit. My neurologist believes Nerivio is the best treatment option for me, and I truly believe it could improve my quality of life.

I appreciate your time and consideration of this request. Please let me know if additional medical documentation is required. I look forward to your response.

Sincerely,

[Your Name]

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