

Log of Calls or Communication to Insuror

Date of call or e-mail	Time of call or e-mail	Name of person contacted	Discussion	Follow-up
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

You may need this log as evidence of your attempt to secure reimbursement for your disc arthroplasty. Please keep this log together with other papers proving your attempt(s) to secure reimbursement from your insuror. If you used e-mail, attach copies to this log.