



FEMA

# Fact Sheet

## Appealing Your Flood Insurance Claim

After experiencing a flood, flood insurance policyholders may file claims with their insurer. Most claims will settle without significant dispute. In some instances, however, policyholders may disagree with their insurer. When this happens, National Flood Insurance Program (NFIP) policyholders may appeal their insurer's final claim decision(s) to the Federal Emergency Management Agency (FEMA).

Because FEMA oversees the NFIP, the Agency reviews policyholder appeals concerning final claims determinations. FEMA recommends that policyholders work with their adjusters and insurance companies first, as they are often in the best position to address specific claim problems. However, when NFIP policyholders cannot come to agreement regarding the insurer's final claims determinations, they have the right to appeal these decisions to FEMA.

### **ELIGIBILITY**

A policyholder may appeal a written final claim decision, in whole or in part, from the insurer. The appeal must occur within 60 days of the date of the insurer's written final decision.

Policyholders who already filed suit against their insurer or who entered into appraisal to determine the amount of their loss are ineligible for the appeals process. With appraisal, a neutral third party determines the amount of loss when the insurer and policyholder disagree about the value of damaged property. Because the appraisal process and appeal process each involve review by an impartial third party, the use one of these processes makes the other process unavailable.

### **HOW TO FILE AN APPEAL**

In addition to the name of the insured and the property address, appeal letters should include:

- the flood insurance policy number (from the policy's declarations page);
- contact information; and
- if the author of the letter is a representative of the policyholder (e.g., a relative, a public adjuster, or an attorney), he or she should indicate the relationship and provide documents verifying and authorizing the relationship, including a waiver allowing access to personal information under the Privacy Act, 5 U.S.C. § 552a.

Upon receiving an appeal, FEMA requests the claim file from the insurer to make sure it has all current information relied upon by the insurer in adjusting the claim. In order to best address the issue(s) raised in appeal, FEMA encourages policyholders to provide as much detail as possible about the claim.

*"FEMA's mission is to support our citizens and first responders to ensure that as a nation we work together to build, sustain, and improve our capability to prepare for, protect against, respond to, recover from, and mitigate all hazards."*

For example, the appeal should include the names of the individuals who previously handled or were involved with the claim; copies of all relevant documentation concerning the claim; and all other information that may aid in the resolution of the appeal. Policyholders should err on the side of providing excess information. A list of example documentation types appears in the NFIP Flood Insurance Claims Handbook.

Depending on the circumstances of your claim, FEMA may still need to request additional information, in which case policyholders will have an additional 14 calendar days to supplement the appeal file.

## **WHAT TO EXPECT AFTER FILING AN APPEAL**

When a policyholder files an appeal, FEMA will review their claim file to determine whether the claim was evaluated and paid properly, applying the rules and criteria in the flood insurance policy.

FEMA begins its process by acknowledging receipt of the appeal in writing to the policyholder and requesting the claim file from their insurance company. Within 90 days of receiving all necessary documentation from the policyholder, FEMA will provide an appeal decision in writing with specific information concerning the resolution of the appeal.

FEMA's response will address each issue raised on appeal in one of three ways:

1. If FEMA agrees with the policyholder, FEMA will inform the both the policyholder and the insurer of its determination and recommend appropriate action(s) to the insurer.
2. If FEMA disagrees with the policyholder, FEMA will explain its rationale in detail.
3. The policyholder may raise new questions or provide documentation in the appeal that had not been presented to the insurer before the claim was denied. In an effort to preserve the policyholder's appeal rights, FEMA may recommend submitting any additional documentation the policyholder may have directly to the insurer in support of claims for additional payment.

## **FOR MORE INFORMATION**

For additional information about the NFIP, visit [FloodSmart.gov](http://FloodSmart.gov) or [FEMA.gov](http://FEMA.gov).

Policyholders should send appeal letters and documentation to the following address: Federal Insurance and Mitigation Administration, Federal Insurance Administrator, 1800 South Bell Street, Arlington, VA 20598-3010.