

Drug Cost Renegotiation Inquiry

Date: [Insert Date]

[Your Name]

[Your Title]

[Your Organization]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [Recipient Name]

[Recipient Title]

[Recipient Organization]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

I hope this letter finds you well. I am writing to formally request a renegotiation of the pricing structure for [specific drug name] currently supplied to [Your Organization]. Given the recent changes in [market trends, patient needs, etc.], we believe that a review of the current pricing is warranted.

Our organization is committed to providing the best care to our patients, and we are facing challenges due to rising costs. We value our partnership with your organization and hope to find a mutually beneficial resolution.

We would appreciate the opportunity to discuss this matter further and explore potential options for cost adjustments. Please let us know a convenient time for a meeting or call.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]