

# Healthcare Cost Clarification

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to seek clarification regarding the healthcare costs associated with my recent treatment at [Healthcare Provider/Facility Name] on [Date of Service].

Specifically, I would like to understand the following:

- Detail breakdown of the charges incurred.
- Information regarding my health insurance coverage and what expenses are covered.
- Any outstanding balances I may need to address.

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

Sincerely,

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]