

Request for Clarification on Out-of-Network Billing

Date: [Insert Date]

[Your Name]

[Your Address] [City, State, Zip Code]

[Your Email] [Your Phone Number]

To: [Billing Department or Appropriate Contact] [Insurance Company's Name] [Insurance Company's Address] [City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request clarification regarding my recent out-of-network billing statement (Account Number: [Account Number]) received on [Date of Statement].

Upon reviewing the charges, I noticed several discrepancies that I believe need further explanation. Specifically, I would like clarity on the following items:

- Service Date: [Insert Date] - [Description of Service]
- Charge Amount: [Insert Amount] - [Reason for Clarification]
- [Any additional items]

Additionally, I would appreciate any information regarding your out-of-network billing policy and whether there are any potential remedies or adjustments that may apply to my account.

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

Sincerely,

[Your Name]