

Medical Insurance Inquiry: Billing Errors

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

To: [Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company Representative],

I hope this message finds you well. I am writing to formally inquire about some billing errors I have noticed related to my medical insurance policy ([Policy Number]).

Upon reviewing my recent statement, I found several discrepancies that require clarification:

- [Describe the first error, including dates and amounts]
- [Describe the second error, including dates and amounts]
- [Continue with any additional errors]

I kindly request that you investigate these matters and provide me with a detailed explanation or correction of the billing errors noted above. Additionally, please let me know if there are any further documents or information you require from my side to facilitate this process.

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

Sincerely,

[Your Name]