

Charge-Off Negotiation Proposal for Medical Bills

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Email]
[Your Phone Number]

[Billing Department's Name]
[Hospital/Clinic Name]
[Address]
[City, State, Zip Code]

Dear [Billing Department's Name],

I hope this letter finds you well. I am writing to you regarding my outstanding medical bills totaling [Insert Amount] which were sent to collections. Due to [brief explanation of financial hardship], I am unable to make the full payment at this time.

In light of these circumstances, I would like to propose a charge-off negotiation to settle this account. I kindly request that you consider accepting a reduced payment of [Insert Proposed Amount] in full settlement of the balance. I believe this offer would benefit both parties as it would allow me to resolve this issue promptly.

If you agree to this proposal, please provide me with a written confirmation stating that upon receipt of the agreed amount, the balance will be considered paid in full and that the account will be removed from collections.

Thank you for considering my request. I look forward to your prompt response. Please feel free to reach me at [Your Phone Number] or [Your Email] for any further discussions.

Sincerely,
[Your Name]