

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

[Date]

[Insurance Company Name]
[Appeals Department Address]
[City, State, Zip Code]

RE: Formal Appeal for Claim Downcoding
Member Name: [Patient Name]
Member ID: [ID Number]
Claim Number: [Claim Number]
Date of Service: [Date of Service]

To Whom It May Concern,

I am writing to formally appeal the decision to downcode the emergency room visit referenced above. Your company has reduced the reimbursement level based on a final diagnosis, rather than the presenting symptoms.

Under the federal "Prudent Layperson Standard," the determination of whether an emergency exists must be based on the patient's symptoms at the time of arrival, not the final diagnosis. I sought emergency care because I experienced [describe symptoms, e.g., severe chest pain, sudden numbness, acute abdominal pain]. A prudent layperson, possessing an average knowledge of health and medicine, could reasonably expect that the absence of immediate medical attention would result in placing my health in serious jeopardy.

The decision to downcode this claim ignores the severity of my presenting symptoms and the medical necessity of the diagnostic tests performed to rule out life-threatening conditions. I have attached [list supporting documents, e.g., medical records, ER discharge summary] which clearly document the acute nature of my symptoms upon arrival.

I request that you re-evaluate this claim in accordance with the Prudent Layperson Standard and process the claim at the original level of service billed by the provider.

I look forward to your written response within [30] days.

Sincerely,

[Your Signature]
[Your Printed Name]