

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

[Date]

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

RE: Request for Coding Review and Claim Resubmission

Patient Name: [Patient Full Name]
Date of Service: [Date of Visit]
Account Number: [Account/Patient ID Number]
Invoice/Claim Number: [Invoice Number]

To the Billing Department,

I am writing to formally dispute the charges for the visit mentioned above. I was recently billed \$[Amount] for services that I believe should have been processed as a "Preventive Service" (Annual Wellness Exam) under the Affordable Care Act (ACA) guidelines.

The visit was intended and scheduled specifically as a routine preventive screening. However, it appears the claim was submitted using a diagnostic or office visit code rather than a preventive code, resulting in an unexpected balance or co-pay.

I request that your coding department review the medical notes for this encounter. If the primary purpose of the visit was preventive, please update the ICD-10 and CPT codes accordingly and resubmit the corrected claim to my insurance provider, [Insurance Company Name].

Please place a hold on this account while the review is pending to ensure it does not proceed to collections. I look forward to receiving a confirmation that this change has been made or a detailed explanation as to why the service does not qualify as preventive.

Thank you for your time and assistance.

Sincerely,

[Your Signature]

[Your Printed Name]