

[Your Name]
[Your Address]
[Your Phone Number]
[Your Email]

[Date]

[Billing Department Name]
[Healthcare Facility or Doctor's Office Name]
[Address]

RE: Dispute of Diagnostic Charges for Well Woman Exam

Patient Name: [Your Full Name]
Account Number: [Your Account Number]
Invoice/Bill Number: [Bill Number]
Date of Service: [Date of Appointment]

Dear Billing Department,

I am writing to formally dispute the charges on the above-referenced statement. My appointment on [Date] was scheduled specifically as a preventive Well Woman Exam (Annual Physical).

Upon reviewing my bill, I noticed that I have been charged for [List specific diagnostic codes or descriptions, e.g., "Office Visit Code 99213"] in addition to the preventive care code. I believe these diagnostic charges were applied in error because:

- The primary purpose of the visit was a routine preventive screening.
- No new medical conditions were diagnosed, and no existing chronic conditions required significant management or treatment changes during this visit.
- Any discussion regarding my health history was incidental to the preventive exam.

Under the Affordable Care Act (ACA), preventive well-woman visits should be covered at 100% by my insurance without cost-sharing. The addition of these diagnostic codes has resulted in an unexpected balance that should have been included under the preventive care umbrella.

I request that you review the clinical notes for this encounter and re-code the visit as a 100% preventive exam. Please issue a corrected statement or provide a written explanation as to why these charges are being billed separately.

While this bill is under dispute, I request that no late fees be applied and that this account not be referred to a collection agency. I have attached a copy of the bill for your reference.

Thank you for your prompt attention to this matter. I look forward to your response within 30 days.

Sincerely,

[Your Signature]

[Your Printed Name]