[Date]

[Patient Name]
[Patient Address]
[City, State, Zip Code]

Dear [Patient Name],

Our records show that you missed your scheduled chronic care follow-up appointment on [Date] at [Time] with [Provider Name].

Regular follow-up visits are essential for managing your long-term health conditions, monitoring the effectiveness of your medications, and preventing future complications. Missing these appointments can hinder our ability to provide you with the best possible care.

We would like to reschedule this appointment as soon as possible. Please call our office at [Phone Number] or visit our online portal to find a new time that works for you.

If you have already rescheduled or if you believe you received this letter in error, please disregard this notice. If you are experiencing any barriers to attending your appointments, please let us know so we can assist you.

We look forward to seeing you soon and continuing to partner with you in your health journey.

Sincerely,

[Provider Name/Clinic Name]
[Office Contact Information]