

Collection Letters To Patients

Subject: Outstanding Balance and Payment Reminder

Dear [Patient's Name],

I hope this letter finds you in good health. We appreciate your trust in our healthcare services and wanted to reach out to you regarding an outstanding balance on your account.

According to our records, there is an unpaid balance of \$[Amount] for the medical services provided to you on [Date(s)]. We understand that managing medical expenses can be challenging, and we want to ensure that you are aware of this balance and provide you with the opportunity to settle it.

We kindly request that you take the time to review your records and arrange for payment as soon as possible. We accept various payment methods, including:

1. Credit card payment: You can call our billing department at [Phone Number] to provide your credit card details securely over the phone.
2. Online payment: Visit our website at [Website URL] and navigate to the "Billing" or "Payment" section to make a payment online. Our website provides a secure platform for online transactions.
3. Mail-in payment: If you prefer to send a check or money order, please make it payable to [Your Name or Organization] and mail it to the address mentioned above. Please include your account number or invoice number on the memo line to ensure accurate processing.

If you have any questions or concerns regarding the balance or need assistance with setting up a payment plan, please do not hesitate to contact our billing department at [Phone Number]. Our dedicated team will be happy to assist you and address any queries you may have.

We understand that circumstances can arise, leading to difficulties in paying off medical bills promptly. If you are facing financial challenges, we encourage you to discuss your situation with our billing department. They can provide information about potential financial assistance programs or work with you to establish a suitable payment arrangement.

Please note that failure to address this outstanding balance may result in further collection efforts, including the involvement of a third-party collection agency. We aim to avoid such measures and

hope to resolve this matter amicably.

Thank you for your prompt attention to this matter. We value your partnership and look forward to continuing to serve your healthcare needs. If you have already made a payment, please disregard this letter.

Warm regards,

[Your Name]

[Your Title/Position]

[Your Organization]

[Phone Number]

[Email Address]