

SAMPLE for the demonstration: a fictional appeal letter.

In real use this is the PDF or screenshot the biller attaches, kept privately.

Appeal letter

From: Ridgeline Health Partners

To: Tallow Creek Health Plan, Appeals Department

Date sent: Sep 23, 2026

Our claim number: RHP100103

Payer claim number: 999010498002C

Payer reference #: TCH-APL-48213

Request: Appeal

We ask that this claim be reprocessed at the contracted rate. The fee schedule page in force on the date of service is enclosed.