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Description automatically generated

Neutral Letter One Collection Template

*Letter One (Neutral tone) intent:*

* *The intent of this letter is to inform the patient of an outstanding balance on their account and to provide them with options for payment.*
* *It prompts the patient to address the matter quickly.*
* *It maintains a neutral and professional tone.*

[Your clinic’s letterhead]

[Date]

[Patient's Name]

[Patient's Address]

[City, State, Zip]

We hope this letter finds you well. Our records indicate an outstanding balance of [$Amount] on your account.

Please review the enclosed statement for details of the different payment options we offer. If you have any questions or concerns regarding the balance, please do not hesitate to contact our billing department at [Billing Department Phone Number].

We kindly request that you address this matter promptly to avoid any collection actions. Your cooperation is greatly appreciated.

Thank you for your attention to this matter.

Sincerely,

[Name of Billing Department Contact]

[Practice Name]

[Phone Number]

[Practice Address]

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Neutral Letter Two Collection Template

*Letter Two (Neutral Tone) Intent:*

* *The intent of this letter is to remind the patient of an outstanding balance on their account and to encourage them to settle the debt.*
* *It offers help to set up a payment plan and provides contact information for further inquiries.*
* *The tone remains neutral and professional.*

[Your clinic’s letterhead]

[Date]

[Patient's Name]

[Patient's Address]

[City, State, Zip]

Dear [Patient's Name],

This is a follow-up to our previous correspondence regarding the outstanding balance of [amount] on your account. Despite our previous communication, the balance remains unpaid. We understand that unforeseen circumstances may have contributed to the delay in payment.

Please take a moment to review the enclosed statement and select from one of our payment options. If you have any questions or require assistance in setting up a payment plan, please contact our billing department at [Billing Department Phone Number].  
  
Thank you for your attention to this matter. We look forward to your prompt response.

Sincerely,

[Name of Billing Department Contact]

[Practice Name]

[Phone Number]

[Practice Address]

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Description automatically generated

Neutral Letter Three Collection Template

*Letter Three (Neutral tone) intent:*

* *The letter is a final notice to a patient regarding an outstanding balance owed to the clinic.*
* *It stresses the urgency of settling the debt to avoid escalation to a collection agency.*
* *It provides the billing department’s contact information and expresses a willingness to help.*
* *It maintains a neutral tone.*

[Your clinic’s letterhead]

[Date]

[Patient's Name]

[Patient's Address]

[City, State, Zip]

Dear [Patient's Name],

This is our final notice regarding the outstanding balance of [$Amount]. Despite our previous attempts to resolve this matter, the balance remains unpaid.

If the outstanding balance is not settled promptly, the balance will be transferred to a collection agency. This action may impact your credit score and lead to more fees and legal proceedings.

Please review the enclosed statement for details regarding the services rendered, the outstanding balance, and payment options. If you are experiencing financial hardship or require assistance in resolving this matter, please contact our billing department at [Billing Department Phone Number] as soon as possible.

We are committed to working with you to find a solution. Thank you for your cooperation.

Sincerely,

[Name of Billing Department Contact]

[Practice Name]

[Phone Number]

[Practice Address]