



How to Ask for an Itemized Medical Bill

(Copy the content of the letter below)

To Whom It May Concern:

This bill is in dispute until I have received an itemized bill and reviewed it. Please forward me an itemized medical bill before consideration of payment can be made. Specifically, I need a copy of the hospital UB-04 billing form, or if another provider type, the HCFA 1500 form.

This itemized bill request is made as part of HIPAA right to access all personal health information. 45 CFR 164.501 Defines the "designated record set" as a group of records that includes medical records, billing records, and other records used to make decisions about individuals.

45 CFR 164.524 States that individuals have a right to access a broad array of health information about themselves, including medical records and billing records.

The definition of an itemized medical bill includes:

1. The current procedural terminology (CPT) billing code for every care item for which you wish to be paid. Also, provide the DRG code for inpatient care, if applicable.
2. The full name of each medical care item for which you wish to be paid. Abbreviations will not be accepted. Each medical care item name must be spelled out in accordance with the American Medical Association (AMA) current

procedural terminology (CPT) manual. For inpatient care, please provide the Diagnostic-Related Group (DRG) code.

3. The charge (retail rate) for each care item.
4. A copy of the hospital UB-04 billing form or if another provider type, the HCFA 1500 form.

After I have had an opportunity to review the itemized medical bill as defined above, payment can be considered. Please understand that I need to review an itemized bill before paying one.

Thank you.

Sincerely,

Note: Send this to the hospital "Attention: Revenue Cycle Manager or Medical Billing Department Supervisor or Medical Records Supervisor."