[Your Name] [Your Address] [City, State, Zip Code] [Email Address] [Phone Number] [Date] [Billing Department's Name] [Hospital Name] [Hospital Address] [City, State, Zip Code]

Dear [Billing Department's Name or "To Whom It May Concern"],

Subject: Inquiry Regarding Hospital Bill

I hope this letter finds you well. I am writing to inquire about my recent hospital bill dated [bill date] for services rendered on [date of service]. My account number is [your account number].

Upon reviewing the bill, I have some questions regarding the following charges:

- 1. [Description of the first charge or item of inquiry]
- 2. [Description of the second charge or item of inquiry]
- 3. [Any additional charges or concerns]

I would greatly appreciate it if you could provide a breakdown of these charges and clarify any discrepancies. Additionally, if there are any forms or documentation I need to provide to expedite this inquiry, please let me know.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]