**Sample appeal letter for inappropriate procedure downcoding**

[*Date*]

Attn:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provider Appeals Department

[*Address*]

[*City, State, ZIP Code*]

Re: Inappropriate downcoding of CPT procedure code

Insured/Plan Member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Group Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Patient Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Claim Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Claim Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear [*Health Insurer*]:

On the date of service listed above, the CPT code for [*a/an*] [*name of procedure*] was reported with [*CPT* code]. [*Health insurer*] has inappropriately downcoded the CPT code submitted and changed the code to [*new code and name of procedure*], resulting in the inappropriate reduction of payment for delivered medical care.

Downcoding of CPT codes is not appropriate without review of medical record documentation. The American Medical Association (AMA) strongly opposes automatic downcoding and states:

*“The AMA vigorously opposes the practice of unilateral, arbitrary recoding and/or bundling by all payers.”*

The level of complexity for the procedure performed CPT [*code*] was reported appropriately, is clearly documented within the patient’s chart (attached), and should be recognized by [*health insurer*]. Based on the circumstances of this case, we are requesting that CPT code [*code*]be paid and not be inappropriately downcoded.

Thank you for your reconsideration. Please contact [*contact name*] at [*telephone number*] in our office should you have any questions regarding this claim.

Sincerely,

[*Physician or Practice Manager*]