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Dear Valued Customer:

This purpose of this letter is to inform you how we go above and beyond the usual billing process. AMHA can help you understand your health insurance coverages strengths and weaknesses. Our **FREE** insurance evaluation includes an overview of your health plan, which raises the possibility of your reimbursement. Call us today at 1-281-580-1423 to take advantage of our no-obligation policy/plan evaluation.

AMHA can help collect your medical expenses.

Filing claims for out-of-network providers' is a slippery slope and restoring your out-of-pocket medical costs can prove difficult without the right tools. The process requires time, knowledge of claims processing, and thorough communication skills and record keeping. Many patients struggle with their insurers' simply because they do not understand all of the elements involved.

If you are feeling overwhelmed, don't worry AMHA can help. Protect yourself against submitting deficient claims, inaccurate information, and deceptive trade practices that could result in denials. AMHA is ready to use our experience to your strategic advantage. We offer the best in experience, proven results, and affordability with our billing service.

- Most billers only submit a small portion of treatment expenses. We identify every aspect of care and all billable services, which allow for superior claims collections. This greatly improves reimbursement from your insurance company, which in turn our service provides more value for you.
- Upon receiving your paperwork, we work diligently preparing your case information. If there is any pending paperwork, e.g., medical reports, billing statements, receipts, etc... we will contact you and/or the facility for that information.
- Before submitting your initial claim, we filter through all of your paperwork to determine the most accurate coding that corresponds with your services. Allow 2 to 3 weeks to organize your initial claim. Preparing your claim professionally and in a compliant format is Priority One.
- After submitting your medical claims they typically take 4 to 6 weeks to finalize and your insurer will notify you in writing. I personally work on your file and check status bi-weekly. When you receive checks or correspondence, contact us immediately so that we can update your account and ensure preservation of the billing cycle.

I welcome you to contact me directly at 281-580-1423 or via e-mail with any questions, comments, or suggestions. Thank you so much for your business and we look forward to serving you.

Sincerely,

Alexander Lopera