

[Date]

[Compliance Officer Name]

[Organization Name]

[Address Line 1]

[City, State, Zip Code]

RE: Letter of Representation Regarding Medical Billing Compliance

Dear [Compliance Officer Name],

This letter serves as formal representation regarding the medical billing and coding practices of [Practice/Provider Name]. We confirm that our billing processes are designed to adhere to the standards set forth by the Centers for Medicare & Medicaid Services (CMS), the Health Insurance Portability and Accountability Act (HIPAA), and all relevant federal and state regulations.

We represent and warrant the following:

- **Documentation:** All billed services are supported by accurate and complete medical record documentation.
- **Coding Accuracy:** ICD-10, CPT, and HCPCS codes are assigned based on the actual services rendered and meet the criteria for medical necessity.
- **Audit Procedures:** Periodic internal audits are conducted to identify and correct potential billing discrepancies or overpayments.
- **Training:** All staff involved in the revenue cycle receive regular training on current compliance guidelines and coding updates.
- **Legal Compliance:** Our practices strictly prohibit unbundling, upcoding, or the submission of false claims as defined under the False Claims Act.

We remain committed to maintaining the highest level of integrity in our financial and clinical reporting. Please contact [Contact Person Name] at [Phone Number] should you require additional documentation or clarification regarding our compliance program.

Sincerely,

[Signature]

[Printed Name]

[Title]

[Organization Name]