

May 20, 2026

Claims Appeals Department  
[Insurance Company Name]  
[Payer Address Line 1]  
[City, State ZIP]

RE: Formal Appeal — Claim ID CLM-1005  
Patient: Sarah Wilson  
Date of Service: 2025-01-15  
Procedure Code: 99285  
Billed Amount: \$4,100.00  
Denial Reason: Timely filing limit exceeded  
Appeal Reference: CLM-1005-20260520

To Whom It May Concern:

We are writing on behalf of Feezza Inc. and our client facility to formally appeal the denial of the above-referenced claim. This appeal is submitted in accordance with your plan's internal appeals process and applicable federal and state regulations governing claims disputes.

We acknowledge the claim submission fell outside the standard timely filing window. However, this delay was caused by circumstances beyond our facility's control, including a documented system transition during the relevant period that affected our claims submission workflow. Under your plan's timely filing exception policy, claims delayed due to system errors or administrative circumstances beyond the provider's control are eligible for exception review. We are submitting this appeal with supporting documentation and respectfully request that the timely filing requirement be waived and the claim processed for payment.

We respectfully request that this claim be reconsidered and reprocessed for payment in full within the timeframe required by applicable prompt pay regulations. Please confirm receipt of this appeal in writing and advise if any additional documentation is required to complete your review.

Sincerely,

Hospital Billing & Revenue Cycle Team  
Feezza Inc. | Wintora  
wintora.ai · legal@feezza.com  
Appeal Reference: CLM-1005-20260520

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