## **APPENDIX A. SAMPLE NONCOMPLIANCE LETTER — APPOINTMENT NONCOMPLIANCE**

<Practice/Organization Name>
<Address 1>
<Address 2>
<City, State ZIP>

<Date>

<Patient Name> <Address 1> <Address 2> <City, State ZIP>

Our records show that you have missed <<u>number></u> appointments. We have tried to reschedule, but have been unable to reach you.

Our practice wants to help you maintain and manage your health through high-quality care and treatment. To do so, you need continued and timely care.

Please contact our office at contact our office at contact our office at contact our staff is happy to review our schedule and find a date and time that works well for you.

Sincerely,

<Name> <Title> 6

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