Christian Healthcare Ministries
chministries.org | 1.800.791.6225 | 330.848.1511

Hours of operation:
Monday – Friday | 9:00am – 5:00pm EST

Letter of Explanation

BRIEF LETTER EXPLAINING THE CIRCUMSTANCES OF YOUR INCIDENT

(Maternity needs: No letter is necessary unless you have experienced complications. **All other conditions: This letter is a requirement to process your medical bills for sharing. Failure to submit it will result in a delay in sharing your bills.**)

Name (please print): _____ Member #: | | | | | | |

Return to: Christian Healthcare Ministries
Attn: Needs Processing
127 Hazelwood Ave.
Barberton, OH 44203
330.848.1511
330.848.4322
800.791.6225 TOLL FREE
chministries.org