[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Insurance Provider Name]
[Insurance Provider Address]
[City, State, ZIP Code]
Subject: Request for Network Access
Dear [Recipient's Name or "Customer Service Team"],
I hope this message finds you well. I am writing to request information regarding network access for my United Healthcare (UHC) insurance plan, specifically regarding [specific services, specialists, or providers].
My policy details are as follows:
- Policyholder Name: [Your Name]
- Policy Number: [Your Policy Number]
- Group Number: [Your Group Number (if applicable)]
I am seeking clarity on the following:
1. Availability of in-network providers for [specific services].
2. Any referral requirements for accessing particular specialists.
3. Information on any limitations or restrictions that may apply.
I appreciate your assistance in providing the requested information at your earliest convenience. Please feel free to contact me via email or at my phone number listed above if further details are required.
Thank you for your attention to this matter.
Sincerely,
[Your Name]
[Your Signature (if sending a hard copy)]