

Appointment Request for Health Insurance Network Doctor

Date: [Insert Date]

To: [Doctor's Name]

Health Insurance Network: [Insert Network Name]

Dear [Doctor's Name or Receptionist],

I hope this message finds you well. I am writing to request an appointment for a consultation with Dr. [Doctor's Full Name] on behalf of my health insurance network, [Health Insurance Network Name].

Details of my request are as follows:

- Patient Name: [Your Name]
- Insurance Policy Number: [Your Insurance Policy Number]
- Preferred Appointment Dates: [Insert Preferred Dates]
- Contact Information: [Your Phone Number/Email]

I would appreciate it if you could confirm an available time for the appointment at your earliest convenience. Thank you for your assistance.

Sincerely,

[Your Name]

[Your Address]