

Request to Change Provider Sample Text for Response Letter Unable to Grant Request

Date

Name

Address

City, State, Zip Code

SUBJECT: REQUEST TO CHANGE PROVIDER

Dear _____:

This is to confirm our recent conversation regarding your request to change providers.

I am not able to grant your request at this time due to the following reason (s):

You currently have an appointment scheduled with (staff name) for (day/date) at (time).

If you have any questions or concerns, please feel free to call me.

Sincerely,

Program Manager