



[Date]

<Name>

<Address>

<City, State, ZIP>

Dear <member name>,

Thank you for being a UMP member. We recently sent you a letter about changes to our network regarding certain Skilled Nursing Facilities (SNF). We are happy to inform you that the SNF you received care from will continue to be a part of our provider network. ***Please disregard the previous letter.***

What does this change mean to me?

- Your SNF will **NOT** be leaving the UMP network.
- You can continue to utilize the SNF you received care from in the past at the preferred provider rate (you pay 15% of the plan allowed amount once you meet your deductible).

We continue to review these and all other providers in our network to assure that our members get high-quality, cost-effective care. If quality of care becomes a concern in the future, we may terminate affected facilities. We will notify you if this should happen.

If you have questions or need help finding a preferred SNF, call UMP Customer Service at 1-888-849-3681, or access our Provider Search through the UMP website at www.hca.wa.gov/ump.

I apologize for any inconvenience or confusion our previous communication may have caused. Again, thank you for choosing UMP.

Sincerely,

A handwritten signature in black ink that reads "Penny Garrett".

Penny Garrett
Director, Member Services