Health Benefits Selection Confirmation

Dear [Employee Name],

We are pleased to confirm your selection of health benefits for the upcoming year. Below are the details:

Selected Health Plan:

[Health Plan Name]

Coverage Details:

- Medical: [Details]
- Dental: [Details]
- Vision: [Details]

Effective Date:

[Start Date]

If you have any questions or need further assistance, please do not hesitate to contact the HR department.

Best regards, [Your Name] [Your Position] [Company Name]