

# Health Coverage Renewal Notice

Dear [Recipient's Name],

We hope this message finds you well. We are writing to remind you that your health coverage is up for renewal on **[Renewal Date]**.

To ensure there is no lapse in your coverage, please review the following important information:

- **Current Plan:** [Current Plan Name]
- **Renewal Premium:** \$[Premium Amount]
- **Coverage Start Date:** [Start Date]
- **Coverage End Date:** [End Date]

If you wish to make any changes to your plan or have any questions, please contact our customer service team at [Customer Service Phone Number] or [Customer Service Email].

Thank you for choosing us for your health coverage needs.

Sincerely,

[Your Company Name]

[Your Company Address]

[Your Company Phone Number]