

Notice of Policy Change

Date: [Insert Date]

Dear [Recipient's Name],

We are writing to inform you about an important change to our healthcare policy that will take effect on [Effective Date]. This change is part of our ongoing efforts to improve the quality of care we provide to our patients.

Overview of Changes:

- Change 1: [Description]
- Change 2: [Description]
- Change 3: [Description]

We believe that these adjustments will enhance our services and provide better support for your healthcare needs. If you have any questions or would like further information, please do not hesitate to contact us at [Contact Information].

Thank you for your understanding and support as we implement these changes.

Sincerely,

[Your Name]

[Your Position]

[Your Organization]