

Health Insurance Change Notification

Dear Employees,

We would like to inform you about an upcoming change to our health insurance plan. Starting on **[Effective Date]**, we will be transitioning to a new health insurance provider.

Details of the new plan include:

- Coverage Options: **[Details]**
- Premium Costs: **[Details]**
- Important Contacts: **[Details]**

Please review the attached documents for further information and FAQs regarding this change. We encourage you to reach out to the HR department with any questions or concerns you may have.

Thank you for your understanding and cooperation.

Sincerely,

[Your Name]
[Your Position]
[Company Name]