

Notification of Insurance Card Replacement

Dear [Recipient's Name],

We are writing to inform you that your insurance card will be replaced due to [reason for replacement, e.g., expiration, loss, update of personal information, etc.].

Your new insurance card will be mailed to the address we have on file: [Recipient's Address]. Please allow [time frame, e.g., 7-10 business days] for delivery.

If you have any questions or if your address needs to be updated, please contact us at [contact information] or visit our website at [website URL].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

[Company Contact Information]