

# Health Benefits Enrollment Guidance

Dear [Employee Name],

Welcome to the Health Benefits Enrollment period! This is a great opportunity for you to review and select the health benefits that best meet your needs.

## Enrollment Dates

The enrollment period will begin on [Start Date] and end on [End Date]. Please ensure you complete your selections before the deadline.

## Available Options

- Health Insurance Plan A
- Health Insurance Plan B
- Dental Coverage
- Vision Insurance

## How to Enroll

Please log in to your employee portal at [Portal URL] and follow these steps:

1. Select the "Benefits" tab.
2. Review the available plans and their details.
3. Choose your preferred options and complete the enrollment form.

## Need Assistance?

If you have any questions or need assistance during the enrollment process, please do not hesitate to contact our HR department at [HR Contact Information].

Thank you for your attention, and we look forward to supporting your health benefits needs!

Sincerely,

[Your Name]

[Your Title]

[Company Name]