

Monthly Health Insurance Premium Reminder

Date: [Insert Date]

Dear [Client's Name],

This is a friendly reminder that your monthly health insurance premium for the policy number [Policy Number] is due on [Due Date].

The total amount to be paid is: **[\$Premium Amount]**.

Please ensure that the payment is made by the due date to avoid any lapse in coverage. Payment can be made through the following methods:

- Online payment via our website
- Bank transfer to [Bank Details]
- In-person at one of our offices

If you have any questions or need assistance, feel free to contact us at [Contact Information].

Thank you for being a valued member.

Sincerely,

[Your Company Name]

[Your Company Contact Information]