

[Date]

[Customer Name]

[Address]

[City, State, Zip Code]

Subject: Welcome to Your Medicare Supplement Insurance Plan

Dear [Customer Name],

Welcome to [Insurance Company Name]! We are pleased to confirm that your Medicare Supplement insurance coverage is now active as you transition into Medicare.

Your Coverage Details:

- **Plan Type:** [Plan Name, e.g., Plan G]
- **Policy Number:** [Policy Number]
- **Effective Date:** [Effective Date]
- **Monthly Premium:** \$[Amount]

As you turn 65, navigating Medicare can be complex. Your new policy is designed to help cover costs that Original Medicare does not, such as copayments, coinsurance, and deductibles. This ensures you have predictable healthcare expenses and the freedom to choose any doctor who accepts Medicare.

What Happens Next?

- **ID Card:** Your permanent ID card is enclosed. Please present this card along with your red, white, and blue Medicare card at your appointments.
- **Policy Document:** Please review the enclosed policy for full details on your benefits and coverage terms.
- **Premium Payments:** If you have not set up automatic payments, instructions are included in this packet.

If you have any questions regarding your transition or your new coverage, our Member Services team is here to help. You can reach us at [Phone Number] from [Hours of Operation].

Thank you for choosing [Insurance Company Name] for your healthcare needs. We look forward to serving you.

Sincerely,

[Name/Signature]

[Title]

[Insurance Company Name]