

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

Welcome to [Healthcare Practice Name]. It is a privilege to have you as a member of our VIP Personalized Healthcare program. Our goal is to provide you with a superior level of medical attention tailored specifically to your lifestyle and wellness goals.

As a VIP member, you now have access to the following exclusive benefits:

- **Direct Access:** Priority scheduling with same-day or next-day appointments.
- **Extended Consultations:** Unhurried visits to ensure all your concerns are addressed.
- **24/7 Connectivity:** A private phone line and email for direct communication with your care team.
- **Comprehensive Coordination:** Seamless management of specialist referrals and diagnostic testing.

To begin your journey, our Patient Coordinator will contact you shortly to schedule your initial Comprehensive Wellness Assessment. In the meantime, please find your membership card and a directory of our services enclosed.

If you have any immediate questions, please contact your private concierge line at [Phone Number].

We look forward to partnering with you for your long-term health and vitality.

Sincerely,

[Doctor Name/Signature]

[Title]

[Healthcare Practice Name]