

[Date]

[Policyholder Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Subject: Notification of Premium Rate Adjustment - Policy Number: [Policy Number]

Dear [Policyholder Name],

Thank you for choosing [Company Name] for your insurance needs. We value your continued trust in our services.

We are writing to inform you of an upcoming adjustment to your premium rate for the policy mentioned above. Effective [Effective Date], your new premium amount will be \$[New Amount] per [Billing Period]. Your current premium is \$[Old Amount].

This adjustment is the result of [Reason for Increase: e.g., rising healthcare costs / annual inflation adjustment / change in risk assessment / regulatory updates].

Summary of Changes:

- **Current Premium:** \$[Old Amount]
- **New Premium:** \$[New Amount]
- **Effective Date:** [Date]

If you have your payments set to automatic withdrawal, the new amount will be deducted automatically starting on the effective date. No action is required from your side to maintain coverage.

We understand that rate changes can impact your budget. If you wish to discuss your coverage options or explore ways to adjust your policy to lower your costs, please contact our customer service team at [Phone Number] or via email at [Email Address].

We appreciate your business and look forward to continuing to provide you with high-quality protection.

Sincerely,

[Name/Department]

[Company Name]