

Date: [Insert Date]

To: All Eligible Employees

Subject: Important: Open Enrollment and Expansion of Vision and Dental Benefits

Dear Team,

We are pleased to announce that our annual Open Enrollment period for [Year] is now officially open. This is your yearly opportunity to review, change, or enroll in your healthcare benefits.

As part of our commitment to your well-being, we are excited to share that we have expanded our **Vision and Dental** coverage for the upcoming year. These enhancements include:

- [Insert Detail: e.g., Higher annual maximums for dental work]
- [Insert Detail: e.g., Lower deductibles for major procedures]
- [Insert Detail: e.g., Increased allowance for frames and contact lenses]
- [Insert Detail: e.g., Addition of orthodontic coverage for dependents]

Enrollment Period: [Start Date] to [End Date]

Effective Date of Benefits: [Effective Date]

How to Enroll:

1. Log in to the benefits portal at: [Link/URL]
2. Review your current selections and the new vision/dental plan documents.
3. Complete your elections by [Deadline Time/Date].

If you do not take action by the deadline, [Insert Policy: e.g., your current coverage will carry over, excluding Flexible Spending Accounts].

We will be hosting an informational webinar on [Date] at [Time] to answer any questions regarding these expanded benefits.

Thank you for your hard work and dedication.

Sincerely,

[Name/Department]

[Company Name]