[Date]

[Provider Name]
[Clinic/Practice Name]
[Address]
[City, State, Zip Code]

Dear [Provider Name],

As the Medicare Annual Enrollment Period (AEP) approaches, many of your patients may have questions regarding their Medicare Supplement (Medigap) coverage and how it coordinates with your services.

My name is [Your Name], and I am a licensed insurance professional specializing in Medicare solutions. My goal is to assist individuals in finding supplemental coverage that ensures they can continue seeing their preferred providers without financial strain or unexpected out-of-pocket costs.

If you have patients who are concerned about:

- Increasing monthly premiums
- Changes in their current plan benefits
- Understanding the difference between Medigap and Medicare Advantage

I am available to provide them with a complimentary, no-obligation review of their options. I pride myself on providing clear, honest education to help seniors make informed decisions about their healthcare transitions.

I have enclosed several of my business cards. Should your staff or patients require assistance navigating the complexities of Medicare during this busy season, please feel free to share my contact information.

Thank you for the dedicated care you provide to our community. I look forward to being a resource for your practice.

Sincerely,

[Your Name]
[Your Title]
[Agency Name]
[Phone Number]
[Email Address]
[Website]