[Your Name/Organization Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

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

Dear [Provider Name/Office Manager],

My name is [Your Name] and I am a local Medicare specialist serving the [Community Name] area. I am writing to introduce myself as a resource for your patients who may have questions regarding their Medicare Supplement (Medigap) options, Medicare Advantage plans, or Prescription Drug coverage.

I understand that your priority is providing excellent clinical care. Often, patients face confusion regarding their insurance coverage, out-of-pocket costs, and provider networks. I assist individuals by:

- Comparing various Medicare Supplement plans to find the best fit for their budget.
- Reviewing annual plan changes to ensure continued access to their preferred physicians.
- Explaining the differences between Original Medicare and Medicare Advantage.
- Providing year-round support for billing and enrollment questions.

If your patients are seeking guidance on their Medicare insurance, I would be honored to assist them. I have enclosed a few of my business cards for you to keep at your front desk or to provide to patients during their consultation.

I am also available to host a brief educational "Medicare 101" session for your staff or patients if that would be of value to your practice.

Thank you for the vital work you do for our community. I look forward to the possibility of working together to support your patients' healthcare needs.

Sincerely,

[Signature]
[Your Printed Name]
[Your License Number, if applicable]