

[Your Name]
[Your Title]
[Your Company Name]
[Company Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Employee's Name]
[Employee's Title]
[Employee's Address]
[City, State, Zip Code]

Dear [Employee's Name],

Subject: Open Enrollment Notification

We are pleased to announce that the Open Enrollment period for [year] will take place from [start date] to [end date]. This is an important opportunity for you to review your current benefits and make any necessary changes to your health insurance, retirement plans, and other benefit offerings.

During this period, you will have the chance to:

- Enroll in new plans
- Make changes to existing coverage
- Add or remove dependents
- Review and understand all available options

To help you navigate through your choices, we will be hosting an informational session on [date and time] at [location/online platform]. Additionally, a benefits guide will be distributed via [method] to provide detailed information about your options.

Please ensure that you take full advantage of this opportunity. If you have any questions or need assistance, do not hesitate to reach out to the HR department at [HR Contact Information].

Thank you for your attention to this important matter.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your Title]
[Your Company Name]