



PLAN FORWARD

Member Communication

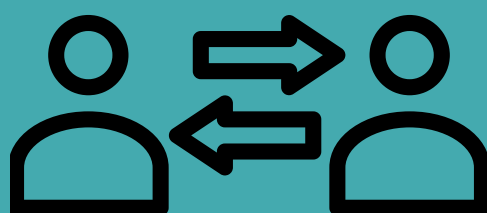
New Member

New Member Enrollment

- Hello from [Provider]. This is confirming [Member First Name]'s enrollment in our [plan name] plan. The renewal date is [renewal date]. We will notify you prior to the renewal date.

New Member Registration was Received

- Hello from [Provider]. This is confirming we received your enrollment request in our dental plan. At your next visit, we will help you choose the plan that is best for you and your plan will start. To make an appointment, please call [Provider Phone Number].



Responsible Party

Responsible Party Receipt

- [Provider Name] Msg: Thank you for your recent payment of [Transaction Amount] made on [Billing Date] for your dental plan(s).



Responsible Party Charge Failure

- Hi. This is [Provider Name]. We were unsuccessful charging the credit card for your dental plan(s). Please call our office at [Provider Phone Number] to update it. You can also updated directly through this secure link. Thank you! [insert link]

Responsible Party Card Expiring

- Hi. This is [Provider Name]. Your card on file for your dental plan(s) is expiring soon. Please call our office at [Provider Phone Number] to update it. You can also update it directly through this secure link. Thank you! [insert link]

Renewals

Renewal Reminder

- Renewal Reminder: [Member First Name]'s dental plan with [Provider Name] will be renewing on [Renewal Date]. Please contact us prior to this date if you have any question or wish to make changes.

Renewal Reminder & Notice of Plan Change

- Renewal Reminder: [Member First Name]'s dental plan with [Provider Name] will be renewing on [Renewal Date]. Based on age, he/she will now qualify for our Adult plan and the new rate is [Plan Price] per [Month/Year]. NO ACTION IS REQUIRED. If you have questions, please contact our office at [Provider Phone Number] prior to the renewal date.

