



P.O. Box 797
Greenland, NH 03840-0797

Your BENEFEDS UserID:
userid@email.com

[Month Day, 20XX]

DV01
John Doe
123 Main St.
Anytown MD 00001

Dear MR. DOE,

Thank you for your participation in the Federal Employees Dental and Vision Insurance Program (FEDVIP). BENEFEDS administers enrollment and premium payment processes on behalf of the FEDVIP carriers.

We received your FEDVIP Dental plan enrollment on [Month Day, 20XX].

Your enrollment, summarized below, will become effective on [Month Day, 20XX] unless you are not eligible for FEDVIP coverage. In that case, your enrollment will be voided as discussed in the Enrollment Terms and Conditions you agreed to in the enrollment process. You may be asked for documentation to confirm your eligibility.

Your carrier should send you an acknowledgement of your enrollment within 15 days after the enrollment effective date of [Month Day, 20XX].

Carrier name: Carrier A, PPO
Plan type: National/International
Plan option: High
Enrollment type: Self Only
Biweekly Premium: \$XX.XX

It is very important that you review the information given above for accuracy. If there is an error in your enrollment, you must contact us immediately at the number noted below.

You have selected [agency name] as your employing agency. Starting with the pay period beginning [Month Day, 20XX], \$XX.XX will be deducted from your pay. If you do not see the deduction as expected, please contact our Customer Service Center at the number noted below.

In addition, please review the Terms and Conditions at:
www.BENEFEDS.com/BenefedHelp/terms. Please call our Customer Service Center if you prefer a written copy.

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Please direct questions about claims, providers and networks, ID cards, and covered services to Carrier A, PPO. For your carrier's contact information, please visit www.BENEFEDS.com/BenefedHelp/CarrierContact.htm.

Please note: We use email to communicate important enrollment, premium, and coverage information regarding your dental and/or vision plan. Using email saves administrative expenses (which are 100% paid by enrollee premiums) and supports the government's Going Green effort/initiative. If you have not yet provided or recently updated your email address, please do so by visiting www.BENEFEDS.com/email or by calling our Customer Service Center at the number noted below.

For general questions, please visit the Help section at www.BENEFEDS.com. If you have specific questions about your enrollment, please email us at Service@BENEFEDS.com. You may also call our Customer Service Center at 1-877-888-FEDS (1-877-888-3337) (TTY 1-877-889-5680) Monday through Friday from 9:00 a.m. to 7:00 p.m. Eastern time.

Thank you,

The BENEFEDS Team