

# Health Insurance Termination Letter Sample

**Alice Johnson**

**789 Health Blvd**

**Springfield, IL, 62701**

**Email: [alice.johnson@email.com](mailto:alice.johnson@email.com)**

**Phone: (555) 321-9876**

**Date: [Date]**

**Dear [Insurance Company Name],**

I am writing to notify you of my decision to terminate my health insurance policy, Policy Number: XYZ789101, effective [Date]. This decision has been made after a thorough review of my current health insurance needs and financial planning.

I request that this letter serves as formal notification of policy cancellation in accordance with the terms and conditions of my policy agreement. Please provide me with a written confirmation of this termination, including any information regarding the process for receiving a refund of any prepaid premiums.

Furthermore, I would like to express my gratitude for the coverage and support provided by [Insurance Company Name] throughout the duration of my policy. If there are any additional steps or paperwork required on my part to complete this termination, kindly inform me at your earliest convenience.

I appreciate your prompt attention to this matter and look forward to receiving confirmation of my policy's termination.

**Best regards,  
Alice Johnson**