Dear PCIP Enrollee,

Now is the time to start thinking about your health coverage for next year. Your Pre-Existing Condition Insurance Plan (PCIP) coverage ends after December 31, 2013. PCIP will not pay for covered services you get after that date. This means you must enroll in a new health plan by December 15, 2013, to have coverage effective on January 1, 2014. You will be able to apply for new coverage through the Health Insurance Marketplace.

When the Affordable Care Act was signed into law in 2010, it created the PCIP as a temporary program. PCIP makes health coverage available to uninsured people with pre-existing conditions until key parts of the health care law take effect in 2014. That’s when the law says health insurance companies can no longer deny you coverage or charge you more for a new policy because of your health condition. For you, that means you'll have more options for health coverage. The Marketplace is one way to help you shop for health coverage that meets your needs and fits your budget. It's where individuals, families, and small businesses can go online to search for and enroll in health coverage. Open enrollment through the Marketplace begins October 1, 2013, and coverage can start as early as January 1, 2014.

Every state will have a Marketplace, but you also have other options outside the Marketplace for purchasing new health coverage for next year. For example, you can still buy coverage directly from a licensed health insurance company, or by enrolling in an employer-based plan. If using the Marketplace in your state is the right choice for you, consumer assistance will be available to help you apply for and choose a new qualified health plan, including a website, a toll-free hotline, and in-person help from trained, unbiased professionals.

How does the Marketplace work?
The Marketplace simplifies your online search for health coverage by gathering many of your options in one place. Starting in October, you’ll be able to compare and choose from among qualified health plans from multiple health insurers, and check your eligibility for programs like Medicaid and the Children’s Health Insurance Program (CHIP). You’ll see details about benefits and price up front, so you’ll know what your premium, deductibles, and other out-of-pocket costs will be before you make a choice. You can also find out if you can get lower costs on your monthly premiums. With a single application, the Marketplace will connect you with many of the coverage options you qualify for through the Marketplace in your state.

Marketplace Highlights

• Health plans available through the Marketplace in your state will offer broad coverage, from doctors to medications to hospital visits.

• You can compare your coverage options based on price, benefits, out-of-pocket costs and other features that may be important to you.

• You may be eligible for help paying for premiums and cost sharing.
Your Next Steps

Visit HealthCare.gov to learn more about the Marketplace and to sign up for updates on general Marketplace news. From the homepage, get directed to the Marketplace in your state. Our website also has a separate consumer search tool to help you explore your health coverage options.

On the Healthcare.gov website, find out what you can do to get ready for open enrollment. For example, you can:

- Make a list of questions before it’s time to choose your health plan. You may want to ask, “Can I stay with my current doctor?” or “Will this plan cover my health costs when I’m traveling?”

- Gather basic information about your household income. Some people will be able to pay lower monthly premiums. You’ll need income information to find out if you are eligible to pay a lower premium and if so, how much lower.

- Set your budget. There will be a variety of plans offered both in and outside of the Marketplace to meet different needs and budgets, and sorting them by cost can help you make decisions.

- Find out if your employer will offer health coverage, especially if you work for a small business. Your employer might be able to take advantage of a new healthcare tax credit.

From the website homepage, you can answer a few quick questions to see what coverage options to lookout for when comparing plans during the open enrollment period. Plus, there are common questions and answers located throughout the website.

The Marketplace offers several kinds of help—including auxiliary aids and services for persons with disabilities who need them to review information and/or complete their application. Visit HealthCare.gov or call the Marketplace Call Center at 1-800-318-2596. TTY users should call 1-855-889-4325. When open enrollment starts, the Marketplace Call Center will assist you in finding someone in your community to help you apply for and enroll in coverage.

In all states, there will be people trained and certified to help you understand your health coverage options and enroll in a plan. They will be known by different names, which are listed below, depending on who provides the service and where they are located. All will provide similar kinds of unbiased help. However, Navigators are required to complete more extensive training on how to serve consumers with disabilities and low-English proficiency:

- Navigators
- Non-Navigator assistance personnel
- Certified application counselors

Insurance agents and brokers can also help you with your application and choices.

Open enrollment through the Marketplace begins October 1, 2013. At that time, you’ll be able to apply and enroll at HealthCare.gov or from your state’s Marketplace website. Coverage can start as soon as January 1, 2014, if you enroll in a new plan by December 15, 2013.

Watch for another notice soon that will have details about enrollment in a qualified health plan offered through the Marketplace, and the resources that will be available to help you find a plan that meets your needs.