



REVSPRING

Medicare Plan Finder Phase 2 Info Session

May 13, 2026

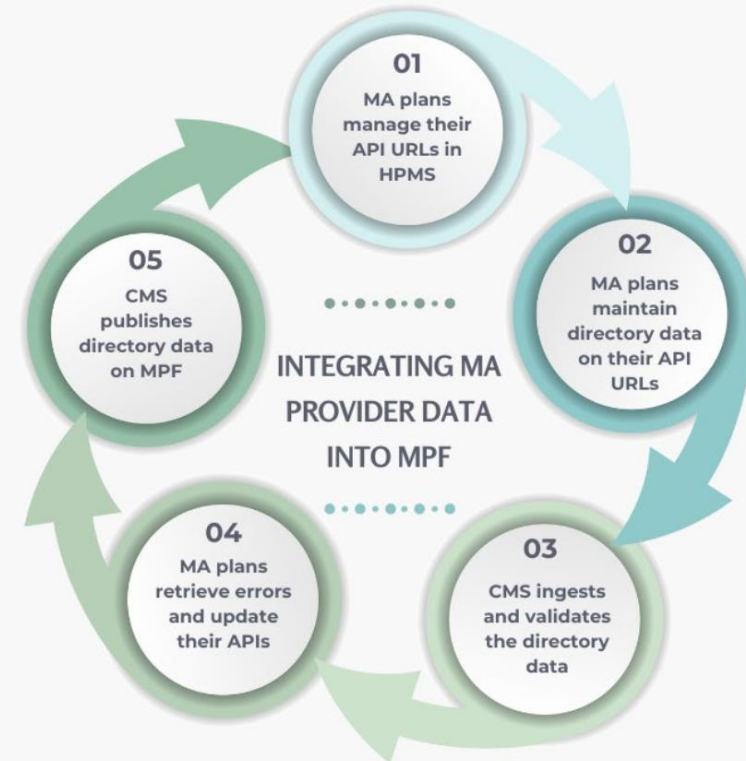
Agenda

- **Program Overview:** 2027 and data is expected to be shared for Medicare Plan Finder.
- **CMS Testing Guidance:** Review of CMS testing guidance released 5/8/2026
- **Customer FAQs & Action Items:** Clarifying what we need from your team to stay ahead of the regulatory curve.

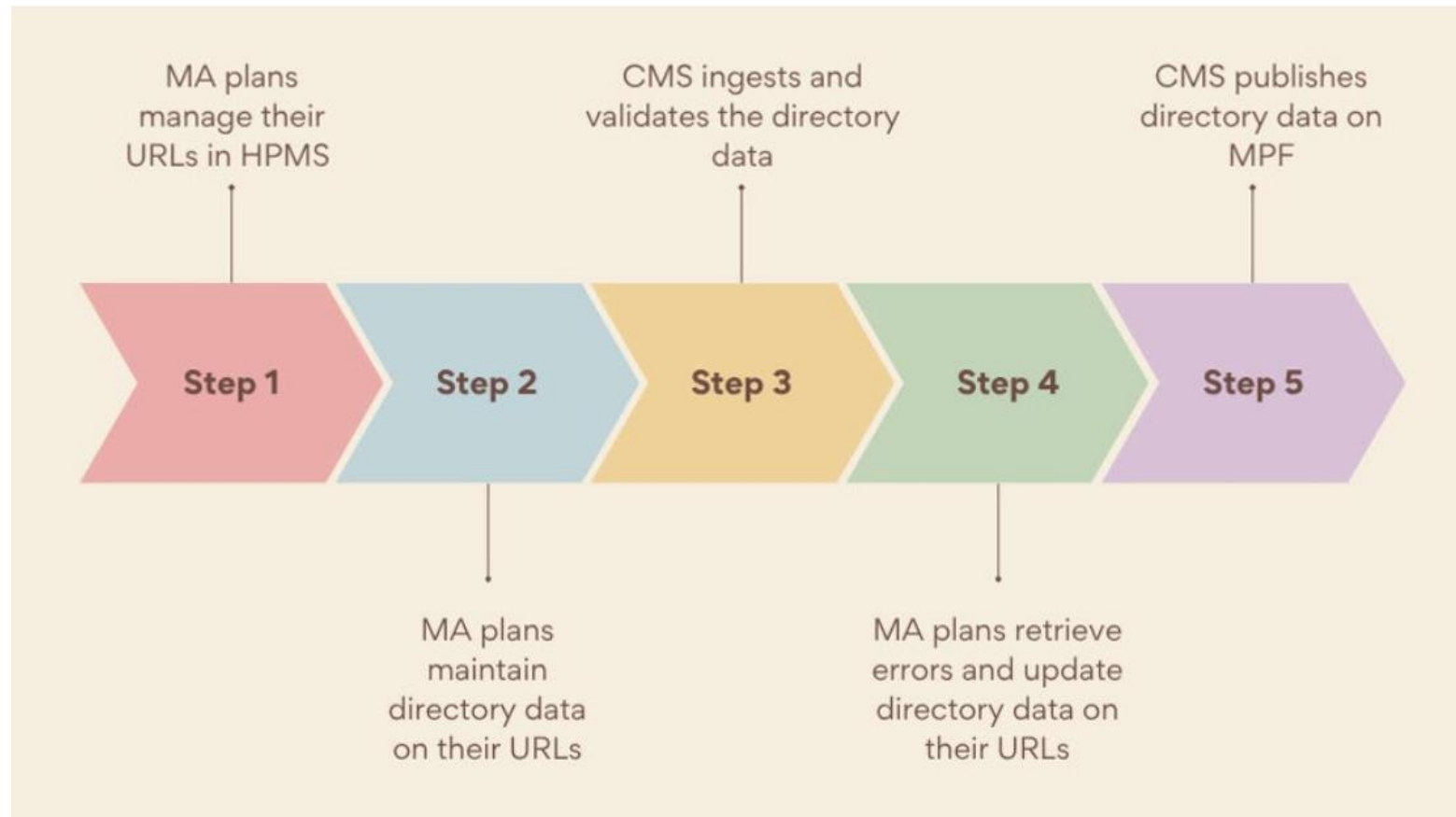
Program Overview

What is Phase 2?

- All payers who offer Medicare Advantage (MA) Plans must supply provider directory data for all individual MA plans to CMS for display in Medicare Plan Finder (MPF) **beginning with Contract Year (CY) 2027.**
- Data will be supplied to CMS, leveraging either **Machine Readable JSON files or FHIR-Based JSON API Files.**
- These files are made available to CMS via a URL defined in a payer's Health Plan Management System (HPMS) Basic Contract Management module which **CMS will crawl and validate the data daily.**
- Plans will be responsible for **ensuring accuracy** of the provider data and must **attest to its accuracy annually.**



CMS Data Processing Overview



Phase 2 Implementation, Timeline and Milestone

Medicare Plan Finder Phase II Implementation

Wave I Timeline

1 Submit Primary Contacts

Due May 5

Identify and send your Primary Technical Contact and Business Contact to your Customer Success Partner.

2 Confirm Participation

Due May 5

Formally confirm your intent to participate in Wave 1 with your Customer Success Partner.

3 Submit Network Crosswalk File

Due May 15

Pipe-delimited CSV: NetworkCode, MedicareContractID, MedicarePlanID, SegmentID, Plan Year 2027. Same specs as Phase I.

TESTING CROSSWALK

Submit by May 15, 2026

Guaranteed inclusion



PRODUCTION CROSSWALK

Submit by August 1, 2026

Ensures production ready compliance

KEY DATES

- May 5**
Contacts & confirmation due
- May 15**
Network Crosswalk File due — Wave I
- Early June**
Testing window opens
- August 1**
Provide Finalized CY27 Crosswalk Data
- Sept 1**
2027 HPMS attestation deadline
- Oct 1**
MPF 2027 production release

Medicare Plan Finder Phase II Implementation

Wave II Timeline

1 Submit Primary Contacts

Due May 5

Identify and send your Primary Technical Contact and Business Contact to your Customer Success Partner.

2 Confirm Participation

Due May 5

Formally confirm your intent to participate in Wave 1 with your Customer Success Partner.

3 Submit Network Crosswalk File

Due June 15

Pipe-delimited CSV: NetworkCode, MedicareContractID, MedicarePlanID, SegmentID, Plan Year 2027. Same specs as Phase I.

TESTING CROSSWALK

Submit by June 15, 2026

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PRODUCTION CROSSWALK

Submit by August 1, 2026

Ensures production ready compliance

KEY DATES

- May 5**
Contacts & confirmation due
- May 15**
Network Crosswalk File due — Wave II
- June 30**
Testing window opens
- August 1**
Provide Finalized CY27 Crosswalk Data
- Sept 1**
2027 HPMS attestation deadline
- Oct 1**
MPF 2027 production release

Medicare Plan Finder Plan Phase II Implementation

CMS Testing Plan

The CMS testing period will include the following activities:

- MA organizations will enter and maintain their provider directory URLs in HPMS.
- MA organizations will build, maintain, and publish their FHIR-based JSON files.
- CMS will crawl the provider directory URLs, as defined in HPMS, to extract and ingest the directory data.
- CMS will validate the provider directory data and produce findings.
- MA organizations will access their validation findings in HPMS and adjust their machine-readable FHIR-based JSON files accordingly.

Medicare Plan Finder Plan Phase II Implementation

RevSpring Testing Plan

RevSpring will be responsible for ensuring the following during testing:

- The provider directory URLs defined in HPMS are functional and publicly accessible
- The FHIR-based JSON files adhere to CMS' technical specifications
- The provider directory data adheres to CMS' field-level specifications
- The provider directory has been updated at least every 30 days
- Provide feedback during RevSpring testing on any data issues to client technical and business contacts

Clients will be responsible for ensuring the following during testing:

- The crosswalk information shared contains all individual (not employer-only) plan/segments offered
- If necessary, data updates are made to ensure that CMS' field-level specifications are met

CMS Detailed Testing Guidance

Process Overview

CMS Testing Process

- CMS simulates the anticipated production workflow for each MA contract number per contract year:
 - **Build & publish:** MA organizations publish machine-readable JSON or FHIR-based JSON files on a dedicated, publicly accessible URL
 - **Crawl & download:** CMS crawls the provider directory URLs reported in HPMS and uses the index file to locate and download the complete set of files
 - **Validate:** CMS validates the provider directory data against a defined set of criteria and produces findings
 - **Remediate & re-publish:** MA organizations access findings in HPMS, adjust their files, and re-publish to the public URL
- *CMS crawls daily and re-runs the process whenever changes are detected.*

Crawling Cadence

CMS Testing Process

- CMS' automated crawling and ingestion routine runs daily to support iterative testing and rapid remediation.
 - **Execution Window:** Automated crawl runs in the middle of the night (Eastern Time) during anticipated low-traffic periods
 - **Processing Time:** Complete ingestion and validation cycle is expected to conclude in approximately two hours
 - **Availability of Results:** Validation results posted in the HPMS MPF Provider Directory module by mid-to-late morning
- *Timing may be adjusted once the process is fully executed against a production-volume dataset.*

Contract Year Reference Data

CMS Testing Process

- Some validations depend on a particular contract year's data. CMS will transition reference datasets across three phases:
 - **Testing Period 1 – Until early July 2026:** CMS uses approved CY 2026 contract and plan data from HPMS
 - **Testing Period 2 – Early July 2026 to mid-September 2026:** CMS uses "as submitted" CY 2027 contract and plan data from HPMS (last submitted version, which may be the approved version)
 - **Production – Starting mid-September 2026:** CMS uses approved CY 2027 contract and plan data from HPMS
- *CMS will provide notice prior to each cut-over date.*

Validation Process

CMS Testing Process

Testing Overview

- **May:** CMS performs a modified review while refining the validation routine; results sent to the Medicare Compliance Officer, Medicare Coordinator, System, and Interoperability contacts in HPMS.
- **Early June:** CMS transitions to the fully automated process – results available via HPMS MPF Provider Directory module or API.

Findings Levels

Level 1 – Fatal Errors

A structural failure (malformed JSON syntax or hosting issue) prevents CMS from reading the file. The entire dataset is rejected and will not appear on MPF until resolved.

Level 2 – Record-Level Errors

A specific record has invalid or incomplete data. CMS continues processing the remainder of the dataset, but the flagged record is withheld from MPF until resolved.

Level 3 – Informational Warnings

A potential issue is reported as a finding but processing continues. Data still appears on MPF, but MA organizations should review and remediate the issue quickly.

Helpful Hints

CMS Testing Process

- Keep the following in mind when preparing provider directory submissions for CMS:
 - Each URL and its provider directory data must represent a **single MA contract number for a given contract year**
 - HPMS URLs must point to the **index.json file** listing the prepared JSON / FHIR-based JSON files – not a live FHIR endpoint
 - The index.json file must list **only files for the same contract number / contract year combination**
 - Ensure provider directory URLs are **kept up to date in HPMS**
 - Follow the specifications outlined in the **CMS technical guide**

Frequently Asked Questions (FAQs)

Process and Workflow Questions

Q: How will members be made aware of Medicare Plan Finder? Is there any requirement around Health Plans notifying members of that feature?

A: Medicare Plan Finder is a tool the CMS offers for all beneficiaries to shop across payers and plans. RevSpring is unaware of any needs to communicate this tool to members.

Q: Will the error report continue to be delivered once MPF is live or will that just be during the testing phase?

A: Error reports will be delivered by CMS directly to the plan's HPMS system. These reports will be sent during testing and during the production crawls performed by CMS. More detail to come at a later time regarding RevSpring specific error report.

Q: Will a new data set be regenerated if/when new data is added?

A: RevSpring is still finalizing the exact refresh schedule for static files. We are targeting to do this as close to a daily frequency as possible, but can ensure that data will be refreshed at least every 30 days to meet compliance.

Q: How long do we have to wait to get an updated link if a new data set is regenerated?

A: The URL RevSpring provides will be based at a per contract ID per contract year level. This URL will not change as new files are generated. Rather the file(s) will be refreshed in the provided URL.

Open Forum: Q&A

Upcoming Deadlines & Deliverables

To ensure your organization is included in Wave I, please complete the following items by the specified dates:

Due by May 15th

- Test Network Crosswalk File: Submit the completed crosswalk file to the project team.

Due by August 1st

- Production Network Crosswalk File: Submit the completed crosswalk file to the project team.

Appendices

Appendix A: Fatal Errors

Code	Validation	Description	Suggested Action
C4001	HTTPCommunicationsError	Networking issue while talking to remote host	Verify source URL is public and accessible
C4002	X509CertError	HTTPS certification invalid or broken signature chain	Verify source URL is public and accessible
C4003	FileRetrievalError	Unable to retrieve file from source	Verify source URL is public and accessible
C4004	InvalidJSONSyntax	Invalid character encountered during crawl	Validate JSON against syntax rules and re-upload
C4011	MissingURL	URL for hosted files is missing	Provide URL that hosts the prepared index JSON
C4012	MissingFileDownloadURL	No downloadable files found	Populate index file with prepared file URLs
C4013	InvalidIndexFileFormat	Incorrect JSON syntax at the index URL	Refer to CMS technical guide for index files
P1017	NoProvidersFound	File valid but contains zero provider records	Verify file contains expected provider records
N3006	OmittedContractID	Contract ID expected in dataset but not found	Provide all expected contract IDs and data
N3015	InvalidJSONSyntax	Invalid character inside the data file	Validate JSON against syntax rules and re-upload

Appendix B: Record-Level Errors (1 of 2)

Code	Validation	Description	Suggested Action
A2001	MissingProviderAddresses	No addresses provided for an NPI	Provide valid address
A2008	InvalidAddress	Address cannot be geolocated	Provide valid address
F5001	MissingNetworkReference	Network Reference ID missing from resource	Update FHIR JSON to include reference ID
F5002	MissingOrganizationReference	Organization Reference ID missing	Update FHIR JSON to include reference ID
F5003	MissingPractitionerReference	Practitioner Reference ID missing	Update FHIR JSON to include reference ID
F5004	MissingLocationReference	Location Reference ID missing	Update FHIR JSON to include reference ID
F5005	BrokenNetworkReference	Network Resource not found in dataset	Verify reference Resource ID exists and is active
F5006	BrokenOrganizationReference	Organization Resource not found in dataset	Verify reference Resource ID exists and is active
F5007	BrokenPractitionerReference	Practitioner Resource not found in dataset	Verify reference Resource ID exists and is active
F5008	BrokenLocationReference	Location Resource not found in dataset	Verify reference Resource ID exists and is active

Appendix B: Record-Level Errors (2 of 2)

Code	Validation	Description	Suggested Action
N3001	MissingPlanID	Plan ID is missing or blank	Provide valid contract/plan/segment ID
N3002	InvalidMAPlanID	Plan ID format invalid (Contract-Plan-Segment)	Provide valid contract/plan/segment ID
N3003	PlanNotAssociated	Plan not associated with any providers	Verify file contains expected provider records
N3004	MissingContractYear	Each plan must have a contract year listed	Provide valid Contract Year
N3005	InvalidContractYear	Contract year not in 4-digit year format	Provide valid Contract Year
N3011	UnknownContractID	Contract ID unknown to HPMS registry	Provide a valid contract ID
N3012	UnknownPlanID	Plan ID unknown to HPMS registry	Provide a valid plan ID
N3013	UnknownSegmentID	Segment ID unknown to HPMS registry	Provide a valid segment ID
N3014	MismatchContractID	MAPlanID does not match contract ID in HPMS	Match contract ID to the MAPlanID
P1001	MissingProviderNPI	NPI is missing or blank	Provide valid NPI
P1002	UnknownProviderNPI	NPI not found in registry dataset	Provide valid NPI
P1003	DeactivatedProviderNPI	NPI listed as deactivated in registry	Provide valid NPI
P1016	ProviderNotAssociated	Provider must be associated with ≥ 1 plan ID	Associate provider with at least one valid plan ID

Appendix C: Informational Warnings (1 of 2)

Code	Validation	Description	Suggested Action
P1004	InvalidProviderType	Must be individual or facility	Provide valid provider type
P1005	MismatchProviderType	Type does not match NPI Registry record	Provide valid provider type
P1006	MissingProviderFirstName	Missing first name	Supply missing first name for NPI record
P1007	MissingProviderLastName	Missing last name	Supply missing last name for NPI record
P1008	MissingFacilityName	Missing facility name	Supply missing facility name for NPI record
P1009	MissingSpecialty	Provider requires at least one specialty	Update record with missing specialty
P1010	MissingSex	Provider sex is not listed	Update record with missing sex
P1011	MissingLanguage	Provider language is not listed	Update record with missing language
P1012	MissingAcceptingPatients	Accepting patients status not listed	Update record with accepting patients status
P1013	InvalidDateFormat	Date does not follow required YYYY-MM-DD format	Reformat date to YYYY-MM-DD
P1014	FutureDate	LastUpdated date is in the future vs. crawl date	Update last updated date to current or prior date
P1018	InvalidAcceptingPatientsType	Accepting Patients format is invalid	Update field to the required format

Appendix C: Informational Warnings (2 of 2)

Code	Validation	Description	Suggested Action
A2002	MissingProviderCity	City entry is missing or blank	Provide valid city
A2003	MissingProviderState	State entry is missing or blank	Provide valid state
A2004	InvalidProviderState	State format is invalid	Provide valid state
A2005	MissingProviderZip	Zip code is missing or blank	Provide valid zip code
A2006	InvalidProviderZip	Zip code format is invalid	Provide valid zip code
A2007	MissingProviderStreetAddresses	Address line 1 is missing or blank	Provide valid address
A2009	MissingProviderPhoneNumber	10-digit phone number is missing	Provide valid phone number
A2010	InvalidProviderPhoneNumber	Phone number has non-numeric chars or wrong length	Provide valid phone number
N3007	OmittedSegmentID	Segment ID expected but not found	Provide all expected segment IDs and data
N3008	OmittedPlanID	Plan ID expected but not found	Provide all expected plan IDs and data
C4005	HeadRequestFailed	File is missing header information	Configure server to return standard HTTP headers
C4006	MissingLastModifiedHeader	Header is missing the last modified date	Configure server to return standard HTTP headers
C4007	MissingContentLengthHeader	Header is missing the content length	Configure server to return standard HTTP headers
C4008	MissingContentTypeHeader	Header is missing the content type	Configure server to return standard HTTP headers
C4009	MissingETagHeader	Header is missing the ETag	Configure server to return standard HTTP headers
C4010	StaleDataWarning	Last updated date is older than 30 days from crawl	Confirm provider directory data updates are not needed