



REVSPRING

Kyruus Health RevSpring

May 20, 2026 Roundtable

Today's Agenda

- 1 Ask Conversational AI** • AI capabilities for payers • Advancing conversational AI • Future capabilities roadmap
 - 2 Search by Plan Menu Update** • UI redesign • Member journey improvements • Release timeline
 - 3 CMS Medicare Plan Finder Phase II** • Overview & approach • Support timeline • Key dates & next steps
 - 4 RevSpring MCP: Health Plan Use Case** • Questions to Ask for your AI Journey • Targeted care gaps
-

May 20, 2026

**Health Plan
Customer
Roundtable**

Q2 RevSpring/Kyruus Health Roadmap

Search > Platform > Data

Cost	Search for Payers	Ask	Guide for Payers	Compliance	Data, API & Integrations
<ul style="list-style-type: none">Integrate Costs in Search	<ul style="list-style-type: none">Virtual Care ShortcutsUnified Search OptimizationSearch By Plan Menu Update	<ul style="list-style-type: none">Advancing Conversational AI	<ul style="list-style-type: none">Recommended Results	<ul style="list-style-type: none">Medicare Plan Finder Phase 2	<ul style="list-style-type: none">FHIR Intake OfferingRevSpring MCP
<ul style="list-style-type: none">Teagan Hinderliter	<ul style="list-style-type: none">Teagan Hinderliter	<ul style="list-style-type: none">Teagan Hinderliter	<ul style="list-style-type: none">Teagan Hinderliter	<ul style="list-style-type: none">Pat Rockwell	<ul style="list-style-type: none">Pat Rockwell

Ask Conversational AI

Conversational AI for Payers

Leveraging Ask to simplify care search

Problem

Members struggle to find the right care in complex search experiences

- Health plans have rich, complex provider data
- In traditional search, members must translate their needs into terms and filters

Opportunity: Ask

- Members describe needs naturally
- Ask translates intent into multiple filters
- Ask proactively suggests refinements
- Outcome: more precise, relevant results

Insights

Ask vs non-Ask users:

Increases in:

Higher satisfaction

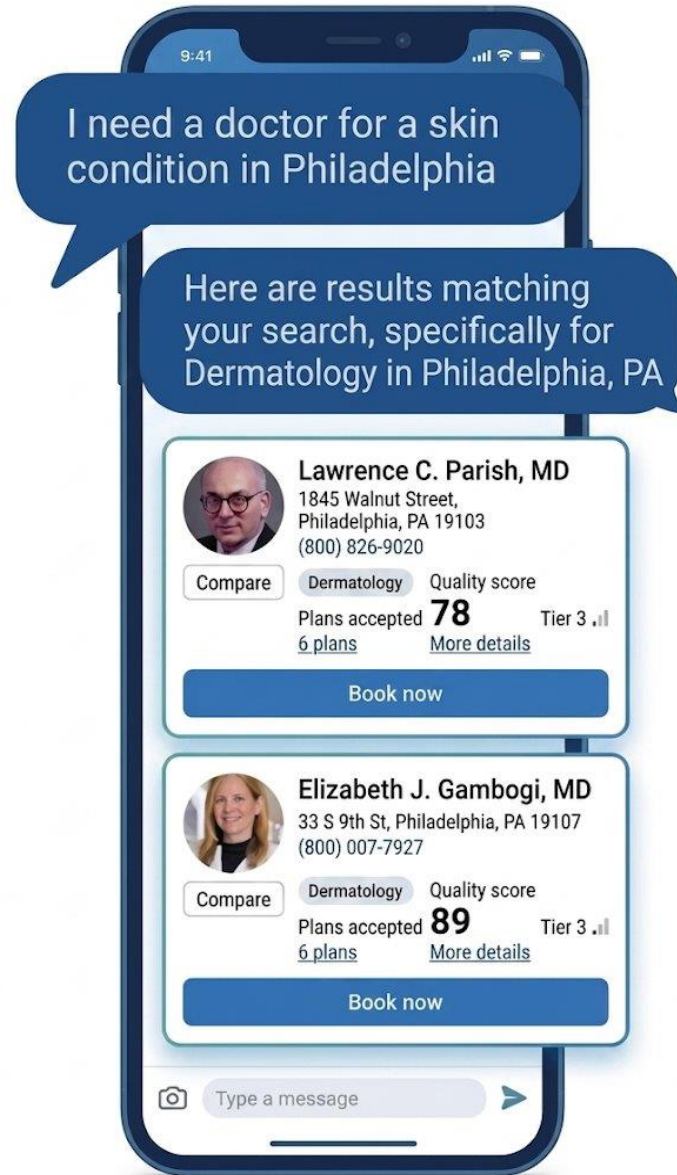
Higher task completion

Based on survey data and feedback from a customer

Advancing Conversational AI

Next-generation precision and accuracy

- **Upgraded Intelligence:** Leverage a more powerful LLM to deliver faster, richer responses.
- **Refined Search Accuracy and Mapping:** Support keyword mapping and tune filter sensitivity to ensure members access robust results.
- **Localized and Relevant Search:** Improve location precision to ensure members see geographically accurate results that match their specific intent



Conversational AI Capabilities

Beyond dynamic search execution & filtering

Relevant Care Results

"I need a doctor for a skin rash"

"I'm sad and need a therapist"

"female Spanish speaking pcp near me"

Cost Clarity

"How much will an MRI cost me?"

"My doctor said I need a scope to my stomach - how much will that cost?"

"Are there lower cost options?"

Value-based Care Guidance

"I have sore throat. Where should I go for treatment?"

"Find the best cardiologist near me"

"Do I need to see a specialist?"

Now

Future

Search by Plan Menu Design

Search By Plan Menu UI Update

Optimizing the plan selection user journey

What is SBP?

Search by Plan (SBP) is the tool health plan members use to find in-network providers by selecting their health plan. In April, we deployed a UI upgrade to UAT, a step forward in making that journey faster, cleaner, and more intuitive.

What We Released in April UAT



Progress Bar

Knowing how much is left keeps users from dropping off before they finish.



Simplified Get Started Page

Reduced friction right at the entry point of the flow.



Consistent Button Placement

Same spot every time creates an autopilot effect for users.



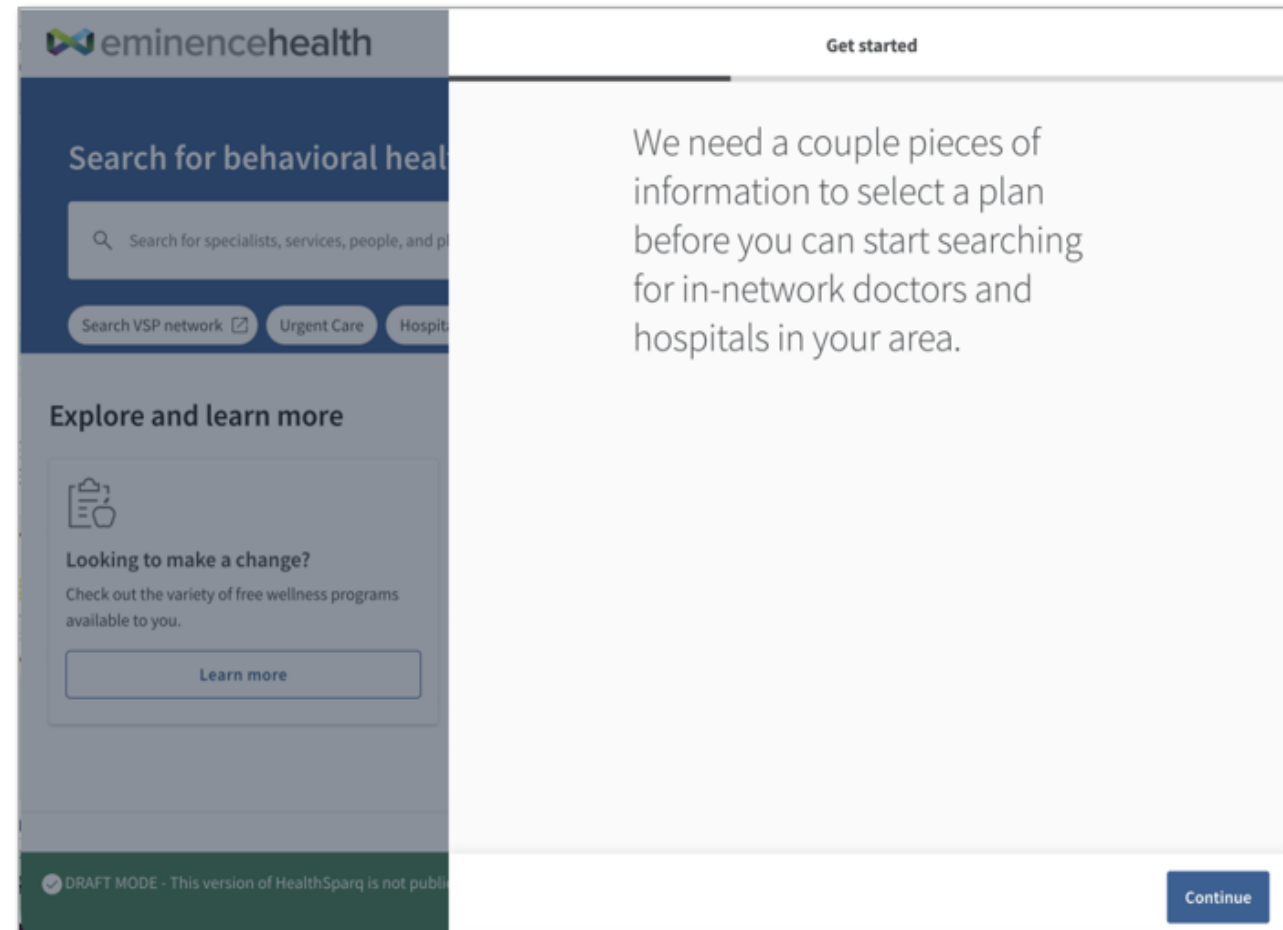
Confirmation Step

A final check that builds trust and prevents time-consuming mistakes.









Fewer Decorative Elements

Less clutter makes the task feel lighter and easier to complete.



What We Heard

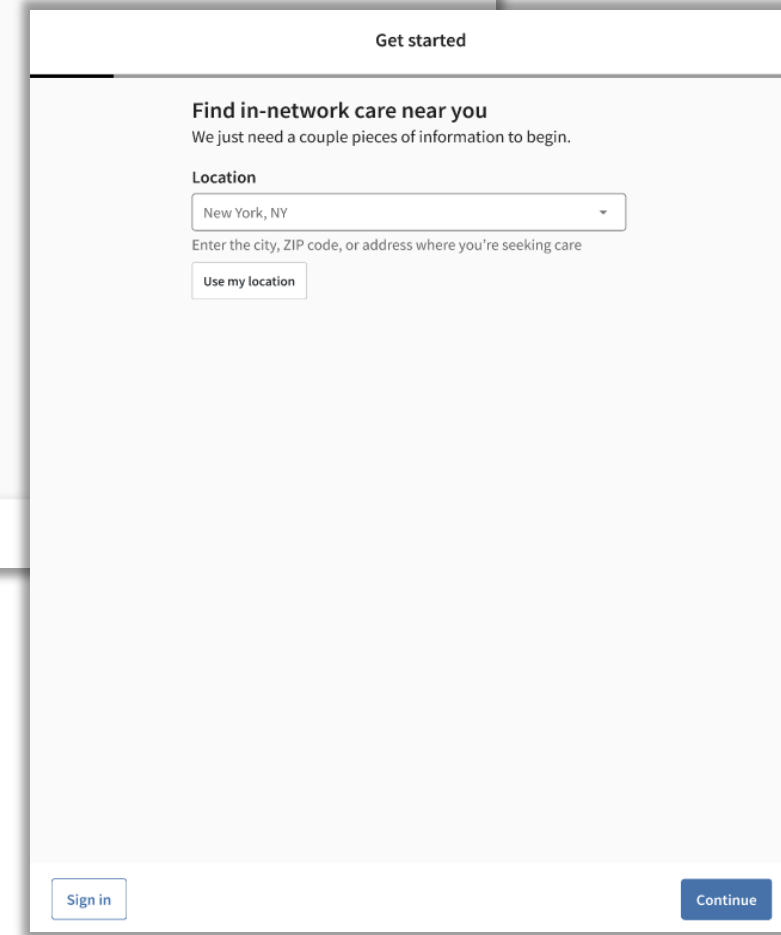
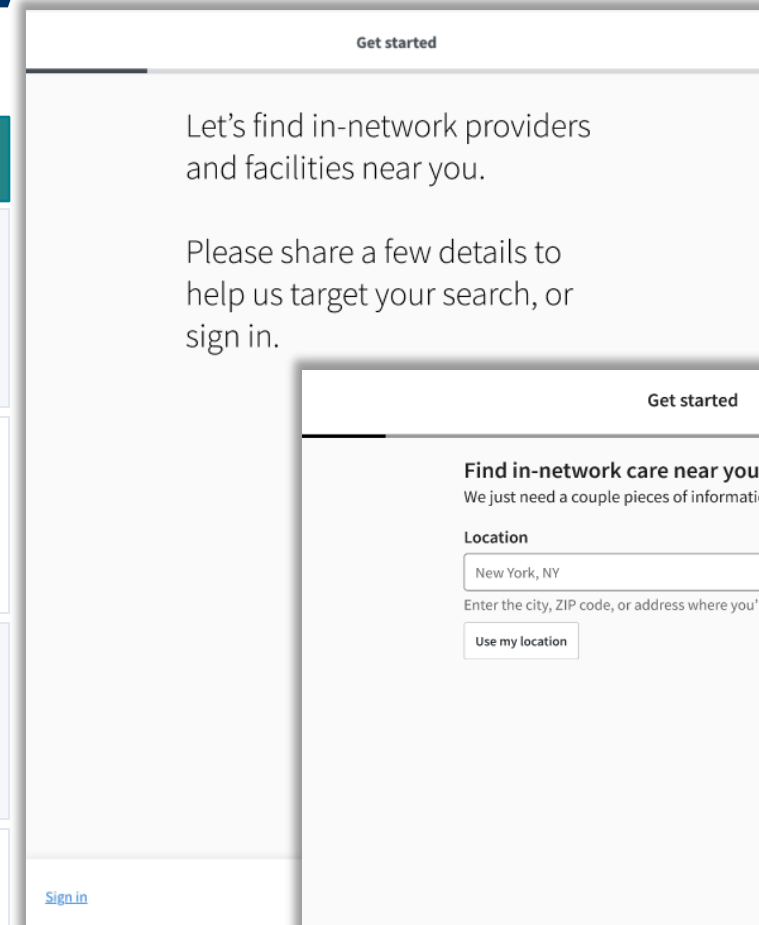
You had feedback, so we listened!

Theme	What We Heard	What We'll Do
 Flow & Navigation	The member journey felt out of order and had unnecessary steps	 Reordered screens and removed friction where it wasn't needed
 Screen Design	First screen had too much white space and oversized text	 Streamlined into a cleaner, combined experience
 Configurability & Transparency	Customers needed more control and clearer communication at key moments	 Made key defaults configurable and added contextual messaging

The Member Journey: Then vs. Now

Here's what changed – and why it matters for your members

BEFORE	→	NOW
6 screens to complete the flow	→	3-4 screens depending on configuration
Plan information asked, then location, then more plan information asked again	→	Location collected first; more intuitive order
One entry point for all customers	→	Configurable for customers with Alpha-Prefix: Prefix-first, Plan-first, or member's choice(Default)
Intro screen was standalone	→	Intro combined with location; member starts making progress immediately
No warning before alpha-prefix redirect	→	Member informed before leaving the site



Configurations for Alpha Prefix + Plan Flows

Select a plan

Find your plan

Enter the first three letters of your member ID (your plan prefix). You can find it on your ID card. Don't have it? Search by plan name instead.

Plan prefix

First 3 letters of your member ID



[Back](#)

[Search by plan name](#)

[Continue](#)

Get started

How do you want to search?

- Search by plan name**
Find your plan using the full plan name
- Enter my plan prefix**
Use the first three letters on your insurance card to find your plan name.

[Back](#)

[Continue](#)

Select a plan

Find your plan

Browse the list below or type to narrow your results.

Plan name

Scroll to browse plans, or type to filter the list

Pennsylvania

- AffordaBronze
- HealtheLife
- Insurance Plan
- PPO Plan First
- MMO Plan First

West Virginia

- AffordaBronze
- HealtheLife
- Insurance Plan
- PPO Plan First
- MMO Plan First

[Back](#)

[Search by plan prefix](#)

[Continue](#)

SBP Release Timeline



Apr 14

Initial UAT Release



Jun 2

Final Enhancement
UAT Release



Jun 30

Production Release

UAT Preview Available Now: All customers' Search By Plan menu transitioned to new UI in UAT. Round 1 items are already deployed: confirmation screen removal and alpha-prefix redirect messaging.

Round 2 Coming June 2nd: Merged intro + location screen, configurable plan/prefix entry point, toggle button between Alpha Prefix and Plan Name search, and location-first flow for all members.

Configuration for Alpha Prefix+Plan Customers: Customers can configure which screen members see first: prefix-first, plan name-first, or a choice screen.

One UI for All Customers: These updates will be auto-on for all customers using config-driven and data-driven menus. This will be the only SBP UI going forward.

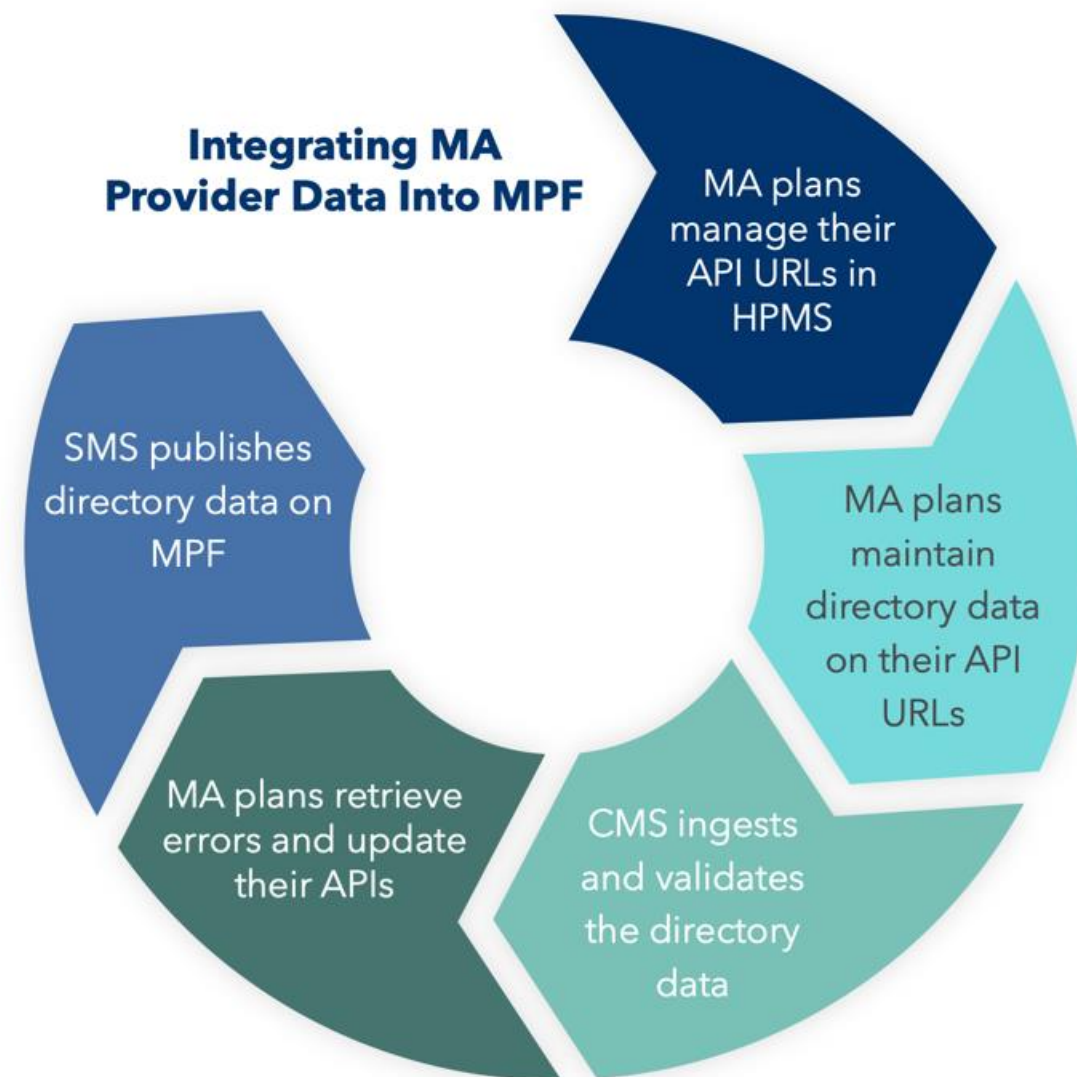
Next Steps:

- o **Preview in UAT:** Log in to your UAT environment after June 2nd to see the updated SBP experience.
- o **Configure your experience:** If you have alpha prefix+plan flow, reach out to your customer success partner to set your preferred default entry point before Production.

CMS MPF Phase II

Medicare plan finder phase 2: Overview

- 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 **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.**



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

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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

Helpful Resources

- Medicare Plan Finder Phase II Resource Center
 - Change Overview
 - FAQs
 - Crosswalk File Overview

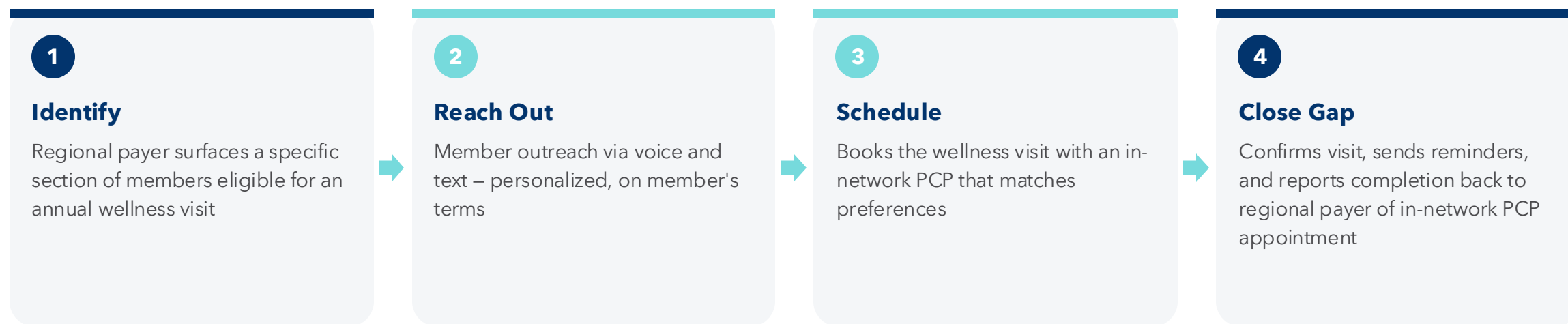
RevSpring MCP: Health Plan Use Case Review

RevSpring MCP: Use Case

Helping a regional payer close care gaps for members

A regional payer reaches members by voice and text to schedule annual wellness visits with a PCP – driving better outcomes, higher quality scores, and a simpler member experience **using agentic workflows**.

HOW IT WORKS



EXPECTED OUTCOMES

For regional plan

↑ **Quality Scores**
HEDIS / Stars compliance

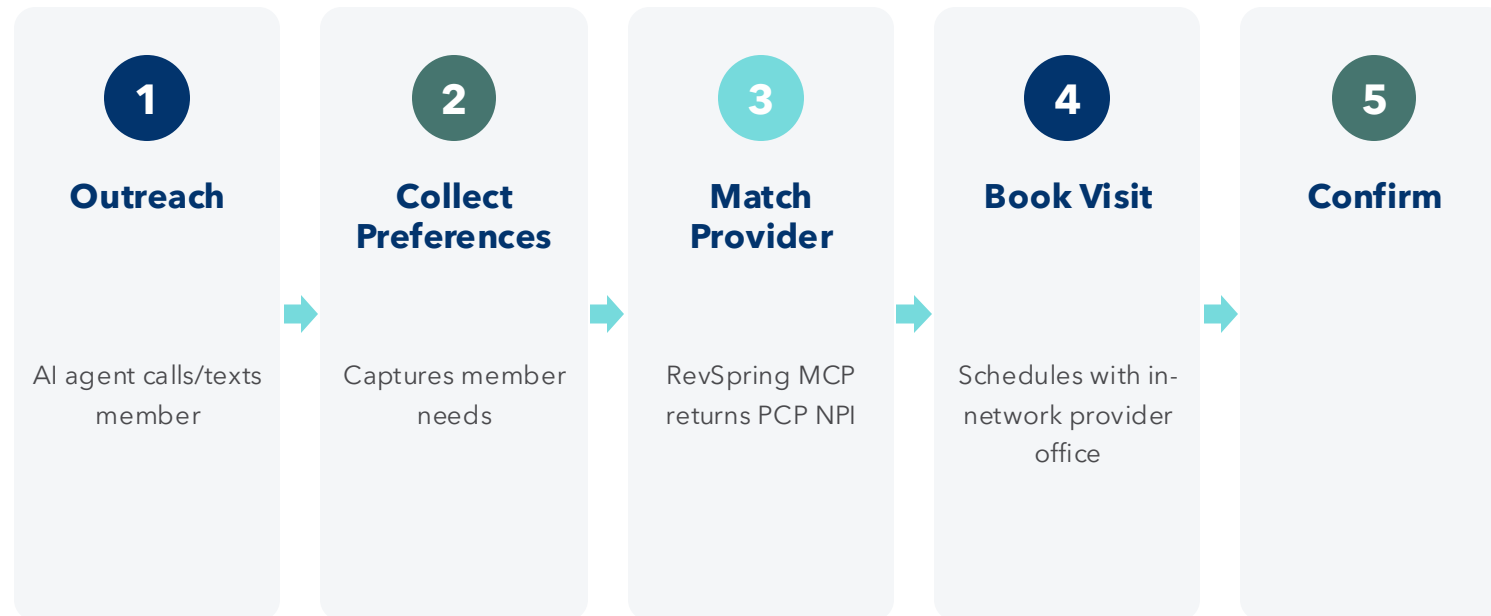
↑ **Care Access**
Annual wellness visits completed

↓ **Manual Effort**
Less call-center workload

RevSpring MCP: Workflow

An end-to-end automated scheduling pilot – powered via the RevSpring MCP.

PILOT FLOW



DATA SOURCES

Regional Plan Data

Member eligibility & plan benefits

All data is consolidated into a single provider record accessed via RevSpring MCP – no custom integration needed.

NEW

Release Notes Now Publicly Available

Past weekly Thursday release notes emails are now accessible on our support page – no login required.



Every Thursday

Weekly release notes delivered consistently on Thursdays



No Login Needed

Access past release notes publicly without a support account



Full Archive

Browse past emails on the Kyruus Health Support page

Find them at

kyruushealth.zendesk.com
Release Notes section

Release Notes

Check out our latest release notes and updates to all products here

Weekly Release Notes Emails

[Health Plan Weekly Release Notes](#)

[Health System Weekly Release Notes](#)



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Kyruus Health Product Updates

[View All Release Notes](#)

/ Upcoming May 20th Roundtable!

We are excited to share an update on our **Q2 2026 Payer Product Roadmap**, highlighting the key initiatives designed to streamline the member experience and enhance data interoperability.



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Save the Date!

Next Roundtable

June 17, 2026 | 12:00 PM PT / 3:00 PM ET