RevSpring

Medicare Plan Finder Phase II Info Session

September 9, 2026

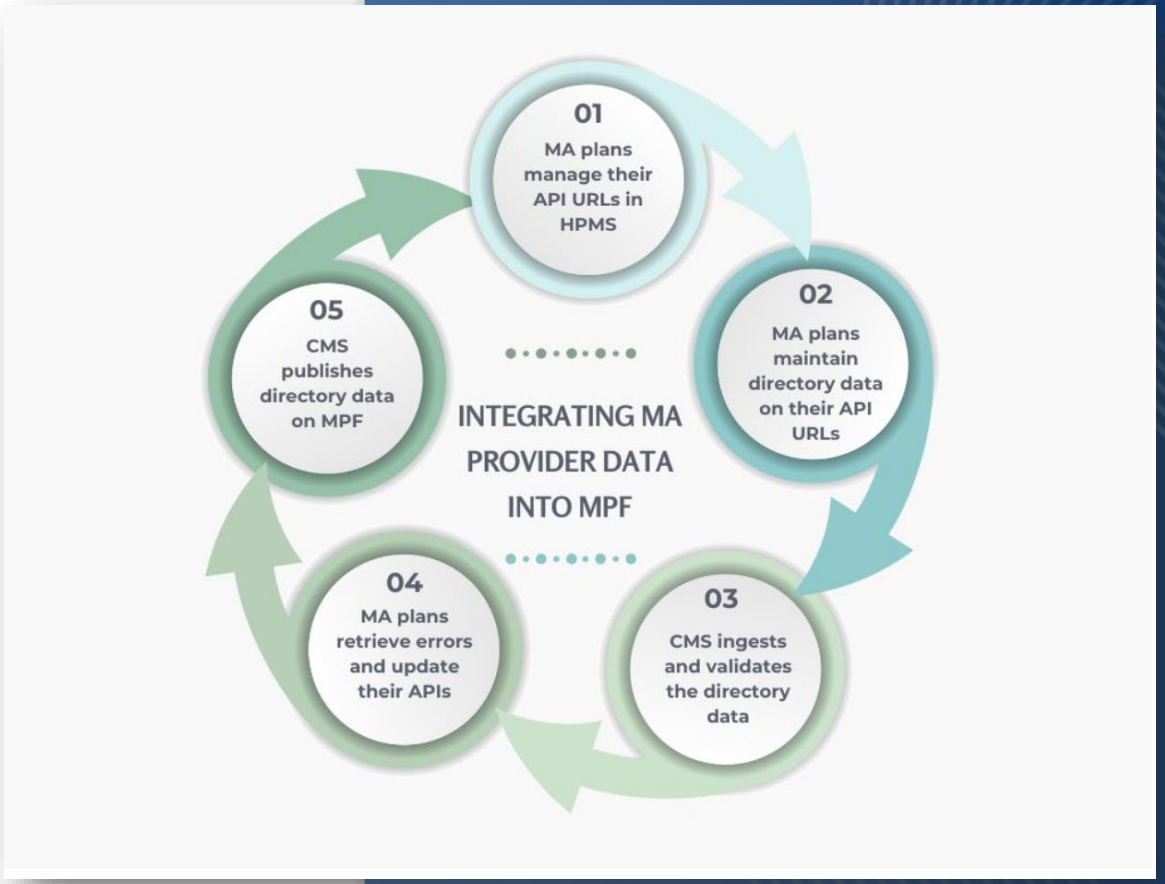
Agenda

- **Program Overview**
- **Key CMS Updates**
- **What to Expect Between Now and 10/1**
- **Looking Ahead & Customer FAQs**

Program Overview

What is Medicare Plan Finder Phase II?

- As part of final rule CMS-4208-F2, 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 Files**.
- These files are made available to CMS via an MPF Provider Directory URL defined in a payer's Health Plan Management System (HPMS) which **CMS will crawl and validate the data daily**. This URL is defined on a per CMS contract number/contract year basis.
- Plans will be responsible for **ensuring accuracy** of the provider data and must **attest to its accuracy annually within their HPMS system**.



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Key CMS Updates

Where You've Got More Time

TESTING WINDOW

Extended to September 18

Was: September 1, 2026

Now: September 18, 2026

CMS is giving plans additional runway to work through validation feedback before the production cutover. No change to the October 1 go-live.

ATTESTATION DEADLINE

Extended to September 18

Was: September 1, 2026

Now: September 18, 2026

Extended to align with the longer testing window. If you already attested before September 1, you do not need to attest again.

BENEFITS PREVIEW TOOL

Live 10 days early, in HPMS

Was: September 18, 2026

Now: September 8, 2026

Confirm your directory data before public go-live. Stays open on an ongoing basis, not a one-time window – export results to CSV any time.

CMS Key Dates Updated

Date	Event
May – Mid-September 2026	Plan testing period using machine-readable JSON files and FHIR-based API files
~~July 10, 2026 (communicated June 24, 2026)~~	~~Populate MPF Provider Directory URLs in HPMS~~
September 8, 2026	HPMS "MPF Benefits Preview" tool becomes available
September 18, 2026	Deadline for completing the CY 2027 attestation in HPMS Deadline for 10/1 production-ready CY 2027 data to be available.
October 1, 2026	Production release of the CY 2027 Medicare Plan Finder (MPF)

New: Index File Size Limits

What CMS Changed

CMS added a new hard limit on index file size for provider directory submissions:

The New Rule

- For each Contract Number / Contract Year combination, the provider_urls array can't exceed 10,000 entries.
- The file itself should be 300 MB or less.

If You Exceed It

- If exceeded, CMS now rejects the entire submission with a new fatal error: C4019 – IndexFileURLLimitExceeded. Not a warning — the whole file bounces.

What We're Doing

- We checked all production index files against this limit — every one is comfortably below the threshold with today's data. No action needed on your end; we'll keep an eye on this for you.

Also new: CMS added a Revision Log to the technical guide, right after the title page, to make version-to-version changes easier to track

Known Issues

Validation Issues We're Tracking

Here's the latest on validation issues affecting MPF Phase II submissions:

Resolved

- **Content Delivery Network (CDN) Issues:** A caching issue was causing broken-reference and content-length errors. Confirmed fixed as of 9/4. You should see these clear from your next report.
- **"Accepting New Patients" Validation**: CMS confirmed this was an issue on their end. Resolved as of 9/4 and should drop off your next report.

Still Being Worked

- **Address Mapping**: Our fix is live – we're verifying it's fully reflected across all validation reports before calling this closed.
- **Provider Specialty Mapping:** Our fix is live and rolling out across validation reports. A small subset of records list a program name rather than a clinical specialty and can't be mapped to a standard code; we're evaluating how to handle these.
- **Invalid Address**: A small number of addresses are failing CMS's geocoding validation even though the data checks out on our end. We've reached out to CMS for clarification.

What to Expect Between Now and 10/1

Production Cutover Steps

What You Need to Do Before Go-Live

1. Submit Your Finalized CY2027 Crosswalk

Most clients have submitted and are live. If you haven't, or anything's changed, please send it as soon as possible.

2. Enter Your Production URL in HPMS

Once RevSpring provides your production MPF Provider Directory URL, enter it on the “Manage MPF Provider Directory URLs” page.

3. Complete Your CY2027 Attestation

Attest to the accuracy of your CY2027 data in HPMS by September 18, 2026 (CEO/CFO/COO sign-off).

4. Share Any CMS Validation Findings

Let us know about any issues from CMS validation so we can help resolve them quickly.

5. Address Any Client-Owned Errors

If your report flags errors marked as yours to fix, please work to resolve them ahead of go-live. Let us know if you need help navigating one with CMS.

6. Preview Your Directory

Use the HPMS “MPF Benefits Preview” tool to spot-check your data directory.

Looking Ahead

Staying Engaged Through Go-Live

Keep Sending Validation Reports

- Whatever CMS sends back to you, please route it to your Customer Success partner or Data Operations lead. This is how we catch the errors and get them resolved quickly.

Stay Engaged

- RevSpring info sessions: Continue weekly through October 8
- CMS hosted office hours: drop-in sessions with CMS's technical team, no registration required. Remaining sessions are Sept 10, 16, and 17

What We'll Cover Next

- What's changed, if anything, since this session
- Post-go-live support – the full breakdown of activities, dates, and expectations

Appendix

MPF Phase II vs. Provider Directory FHIR API

Two Separate Initiatives — Both Leveraging FHIR

MEDICARE PLAN FINDER (MPF) PHASE II

Sends Medicare Advantage provider data to CMS

CMS rule: CMS-4208-F2 (Medicare Plan Finder Phase II, finalized 2025)

- **What it does:** Sends Medicare Advantage provider data to CMS for display in Medicare Plan Finder
- **Timeline:** Live now – working toward 10/1/26 public go-live.

FHIR Provider Directory API Endpoint

Exposes your provider directory via FHIR API endpoint

CMS rule: CMS-9115-F (Interoperability & Patient Access, 2020)

- **What it is:** A public FHIR API exposing your provider directory to members and third-party apps
- **Timeline:** Compliance has been required since 2021. Upgrading to the newer plan-net 1.2 spec is required by 1/1/27

This is a separate, broader initiative, supported for clients who license our FHIR Provider Directory API

Bottom line: two separate initiatives, two separate workflows, two separate CMS rules & deadlines – they just both run on FHIR.

RevSpring FHIR Provider Directory API

Going beyond CMS-9115-F Provider Directory requirements — and what that means for you

Standards-Conformant

Conforms to HL7 FHIR R4 and Da Vinci PDex Plan-Net, supporting all eight Plan-Net profiles.

All Required Data — and More

Every CMS-mandated field, plus extras like credentials, languages, and geo-coordinates.

Public, No-Login Access

No login or app registration — secure short-lived tokens, GET-only, with no consumer tracking.

Ready for Every Plan & Brand

A scoped endpoint per payer and brand, so one deployment covers all your plans.

One Simple Data Feed

Send data once; RevSpring transforms it to FHIR and absorbs future updates — no feed changes.

Developer-Ready

A conformant CapabilityStatement lets apps automatically discover everything they need.