
ROUNDTABLE

Q3 Roadmap Updates

Q3 2026 roadmap topics for Health Plans, with the releases that landed in the last month.

Agenda

01 **Data Management**

Health Plans · Rob Wheaton

Kyruus Connect for Payers

03 **Analytics**

Health Plans · Marie Shea

High Intent Engagement

02 **Cost & Search**

Health Plans · Amy Wininger

PCP Update · Hospital Quality & Patient Experience Data · Integrate Costs in Search · Ask Improvements

04 **Compliance**

Health Plans · Paige Baeder

CMS Medicare Finder 2.0 | FHIR API

01

Data Management

Health Plans · Data, API & Integrations

Kyruus Connect for payers

Payer Portal for Data Management

We're validating a payer data management opportunity by testing hypotheses to understand workflows around data governance and audit trails.

Completed

Internal Product Discovery

Talking with Customer Success, Sales, and Technical teams to identify gaps and dependencies

In Progress

Customer Interviews

Validate pain points and prioritize capabilities of new solution.

Coming soon

Prototype

PHI-safe prototype to gain feedback and iterate on payer-specific solutions

Interested in participating?

Reach out to your CSP

02

Cost & Search

Health Plans · from the Q3 2026 roadmap

PCP update

Hospital Quality & Patient Experience
Data

Integrate Costs in Search

Ask Improvements

Shipped in the last month

Product Releases channel · 7 July – 6 August 2026

Enhanced cards reached map and profile views in production, deep links stopped dropping the search term behind required location selection, and the typeahead work now in UAT makes each result type easy to tell apart.

Jul 21	Decouple Select PCP for National Select PCP	Search · Payers	Now in production
Jul 28	Enhanced cards in map view and profile location map	Search · Payers	Now in production
Aug 5	Deep links now preserve search queries through required location selection	Search · Payers	Now in production
Aug 5	Unified search typeahead: icons and result badges	Search · Payers	UAT Aug 11 · Prod Aug 25

Decouple "Select PCP" for national PCPs

For Blues: Greater flexibility
for Association-sourced
provider data

In Prod on July 21, 2026

Blues affiliates no longer face an all-or-nothing choice and can display national PCP data in search results without enabling the PCP selection workflow.

Primary Care Physician

In-person care (1231)

Virtual care (673)

Accepting New Patients

Specialty

Gender

Search Area

Get cost estimate

Filters • 1

Map

Your Primary Care Provider(s)

No Primary Care Provider selected for suraj ssb. Review the following providers to choose a Primary Care Provider.

Other Primary Care Providers in your area

1231 search results

Sort by: Best Match

RM

Compare

Rachel A. Morales Fan, MD

Family Medicine

In-network

Primary care provider

Accepting some new patients

LGHP Penn Medicine Family Medicine Twin Rose Columbia

118.8 mi • 306 NORTH 7TH STREET, COLUMBIA, PA 17512 (Lancaster)

(800) 468-6673 • Open Today 8:30AM - 5:00PM

Quality score

81

More details

Specialties

Family Medicine

Plans accepted

5 plans accepted

Gender

Female

Call (800) 468-6673

Add as Primary Care Provider

Important

Accepting some new patients: Up to 125 years old

SS

Compare

Shefali M. Shah, MD

Family Medicine

Offers virtual visits

In-network

Primary care provider

Accepting some new patients

LGHP Penn Medicine Family Medicine Twin Rose Wrightsville

118.8 mi • 306 NORTH 7TH STREET, COLUMBIA, PA 17512 (Lancaster)

(800) 468-6673 • Open Today 8:00AM - 5:00PM

Call (800) 468-6673

Add as Primary Care Provider

revspring.com | © RevSpring Inc.

Deep linking enhancement

Expanded capability of the Require Location feature: Will fully support deep links for greater flexibility.

The Problem

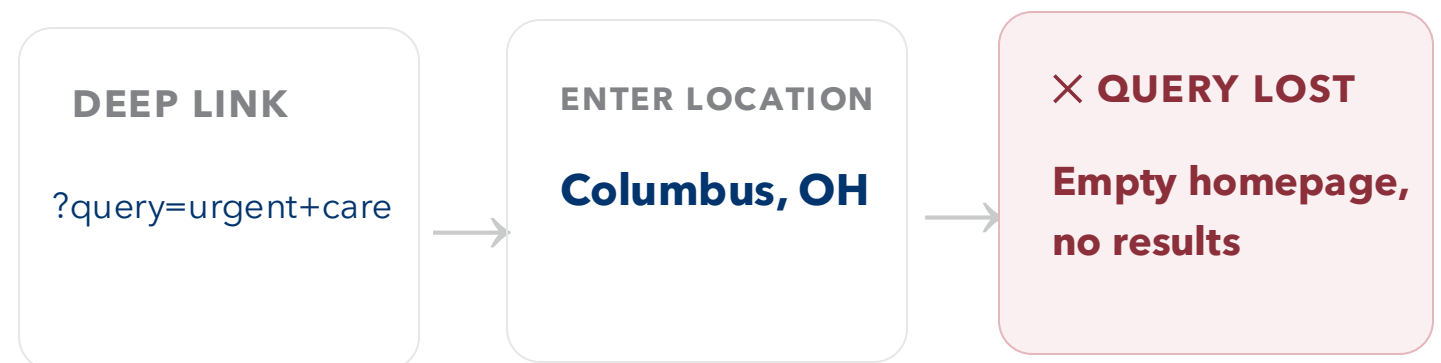
When Require Location Selection is on, the app can deep link or require a location, but not both. After the member enters their location, the deep-linked search term is dropped and they land on an empty homepage.

The Enhancement

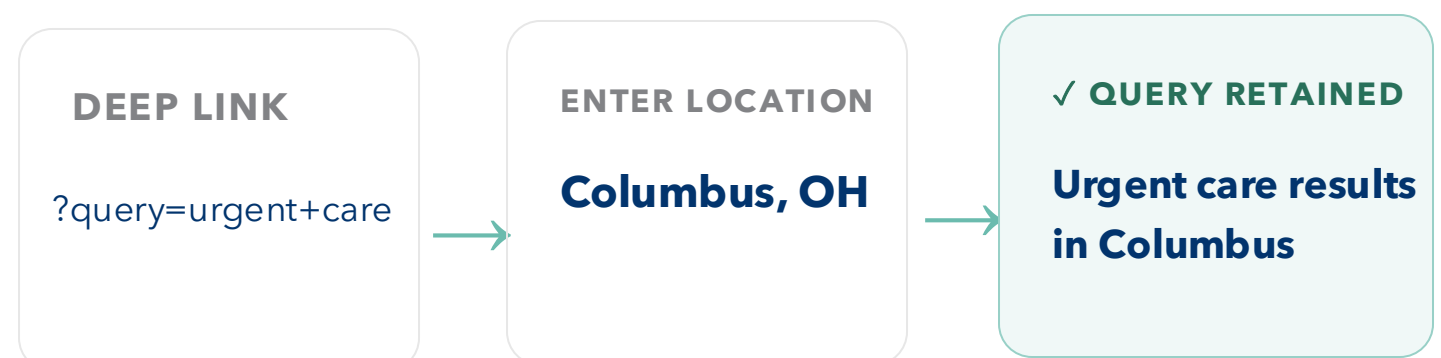
- The entered location persists into the deep-linked search
- Members land on the expected results, as if they'd typed it themselves
- Require Location customers can finally rely on deep links

In UAT August 5, in Prod August 11.

TODAY



WITH THE ENHANCEMENT



Unified search UI optimization

Improving the typeahead so members can tell result types apart at a glance and move to the right care path with confidence.

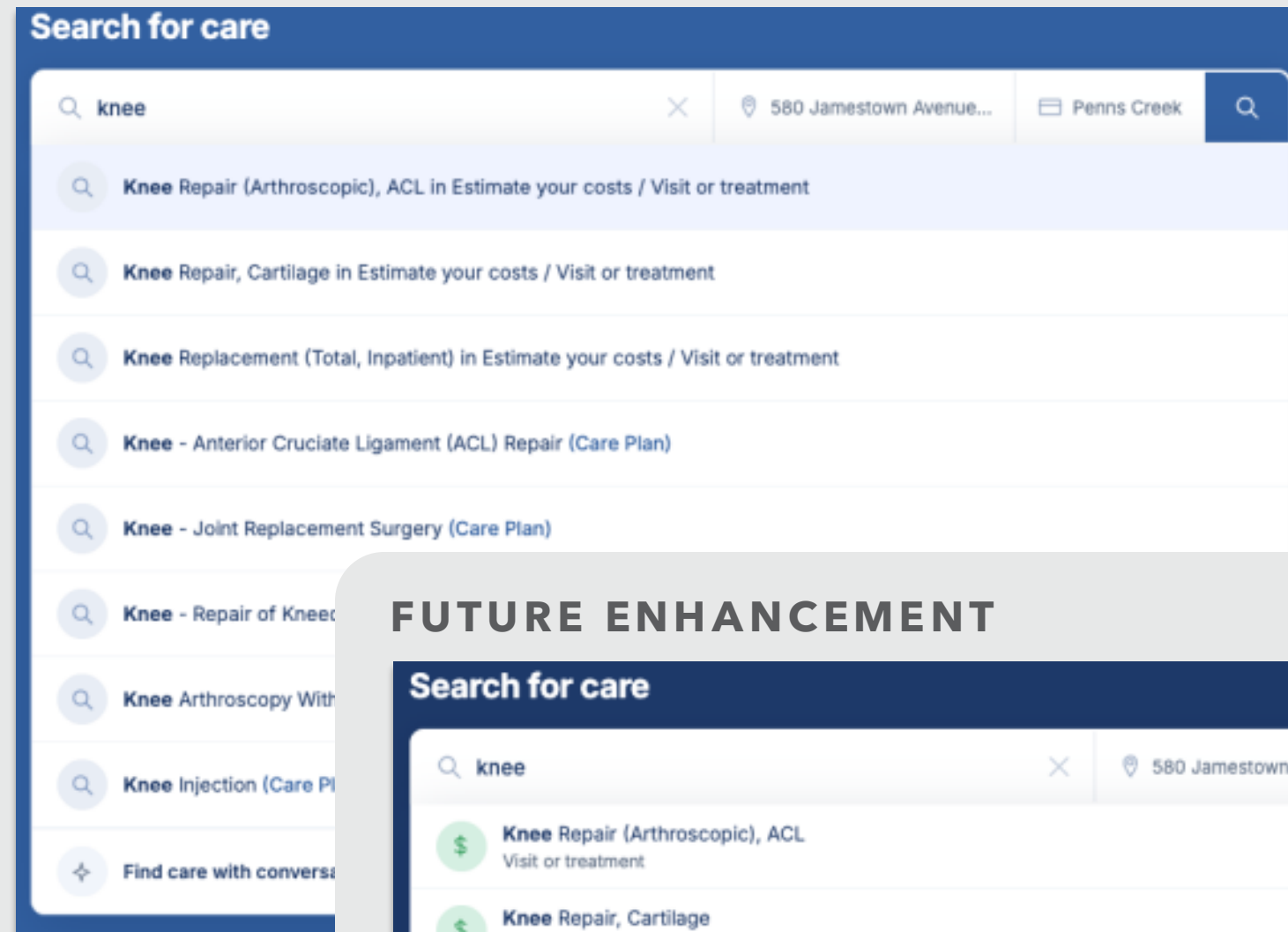
The Problem

The dropdown mixes provider, cost, and care-plan suggestions as near-identical text lines. Members can't visually distinguish them, or tell which path each one leads to.

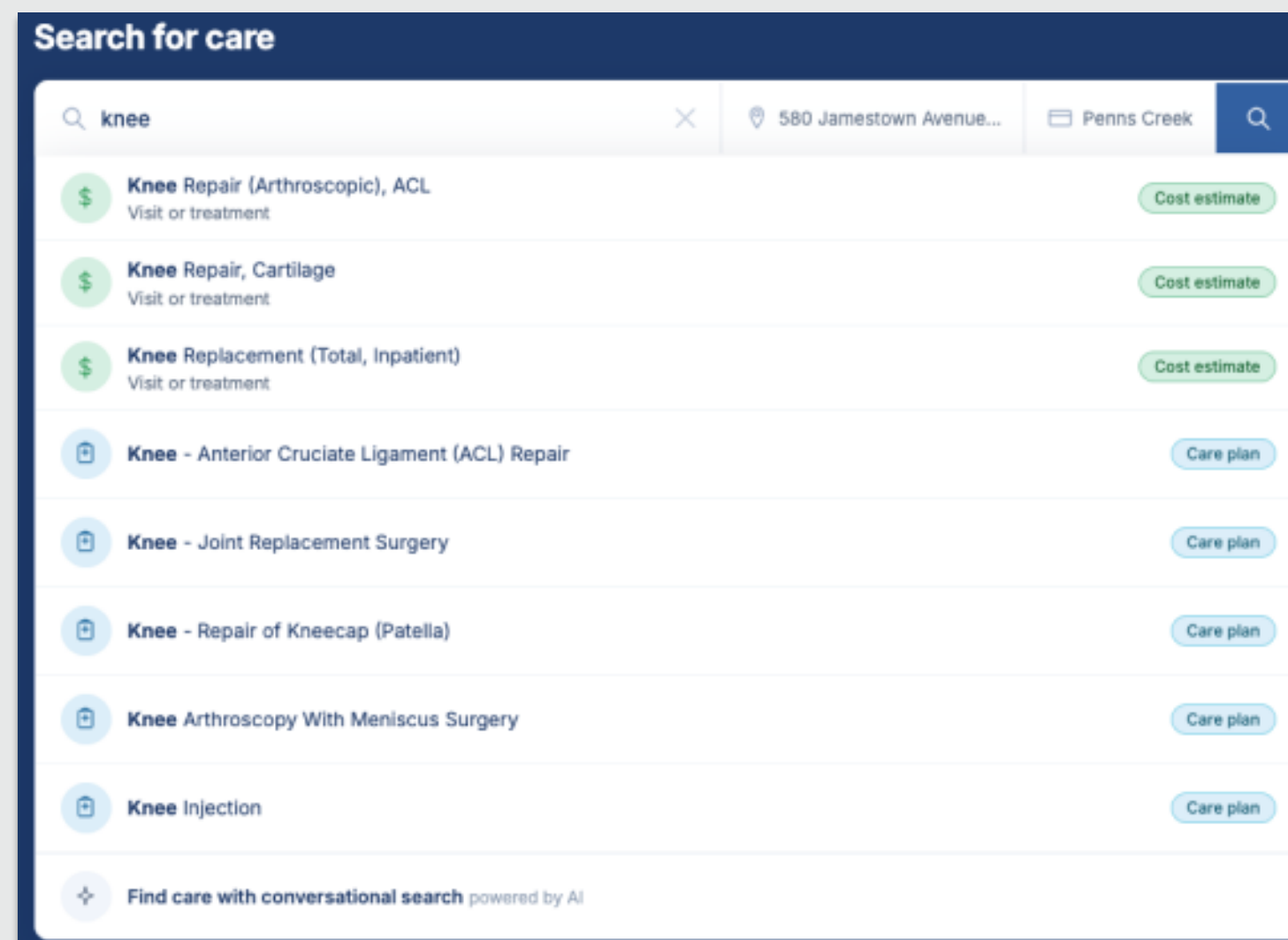
This Quarter

- Distinct result-type icons on the left signal what each item is
- Cleaner labels so members understand what each result means
- Action-oriented badges on the right for Cost estimate and Care plan
- In **UAT August 13**, in **Prod August 25**
- Auto-on for customers with Unified Search; most changes for customers that have encounter costs estimates and/or care plans turned on

TODAY



FUTURE ENHANCEMENT



Hospital Quality & Patient Experience, in One View

For All Blues: surface national CMS quality data members can trust

- HQM- Clinical Quality at a Glance:**
Hospital Quality Measures (HQM) shows how a hospital performs on safety and quality vs. national benchmarks (infection rates, outcomes, and more).
- HCAHPS- What patients actually say:** HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) reflects real patient feedback on communication, cleanliness, and overall experience, shown as a simple star rating.
- Together, One Trusted View for Members:**
A fuller picture of hospital quality on the profile, so members can choose care with confidence.

HCAHPS

See how patients rated their experience at this hospital. Ratings come from a national survey of patients recently discharged from the hospital.

Measure Name	Rating
Overall Patient Rating	★☆☆☆☆
Total Value Based Performance for the HCAHPS Domain	★★☆☆☆
Nurses always communicated well	★★★☆☆
Doctors always communicated well	★★★★☆
Patients always received help as soon as they wanted	★★★★☆
Staff always explained	★★★★★
Patients who "Agree" they understood their care when the doctor or nurse explained it	
Always quiet at night	
Room was always clean	

Medical, surgical, and maternity patients over age 18 who answered questions called the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) are asked about whether their rooms are clean and quiet and how often they helped patients understand medication and how often they helped patients understand medication.

HQM

See how this hospital performs on measures of safety and quality. Missing performance information doesn't mean that standards of care weren't followed.

Measure Name	Rating
Cesarean Birth	Above expectation
Risk Adjusted Severe Obstetric Complications (All)	Above expectation
Severe obstetric complications: Risk Adjusted Severe Obstetric Complications (excluding blood clots)	Above expectation
30-Day Risk Adjusted Mortality for AMI	Below expectation
Acute Myocardial Infarction (AMI) 30-Day Readmission Rate	Below expectation
Total Value Based Performance for HCAHPS, Process, & Outcome Domains	Above expectation
Total Value Based Performance for the Outcomes Domain	Above expectation
Safety Domain Score	Below expectation

A valid and reliable measure for a particular medical situation may not be available. In other cases, the local Blue Plan or collaborative alliance may not collect the specific information. It's also possible that there isn't enough data to objectively calculate performance scores but missing data doesn't necessarily mean that the doctor doesn't provide acceptable overall care.

In UAT Aug 19, and in Production Aug 27.

Integrate & simplify costs in search

Bridging the gap between finding care and comparing costs

Benefits

- **Costs Applied to Specialty Searches:**
Integrate negotiated rates directly into the care journey, enabling members to weigh financial impact without leaving search results.
- **Empower Informed Decisions:**
Billing jargon is replaced with a curated list of member-friendly services, enabling users to instantly understand and apply accurate costs to their results.

This Quarter

- Status: In review with early adopter customers
- Next steps: Collect feedback and fine tune, then bring GA soon

Get cost estimate

Services

Office Visit (New Patient)

☒ Office Visit (New Patient)

☐ Office Visit (Established Patient)

☐ Skin Biopsy (Tissue Sample)

☐ Treatment of Pre-Cancerous Spot

☐ Removal of Benign Wart/Mole

dermatology

Physician Office Visit (New Patient) - 45 to 59 Minutes

In-person care (5)

Virtual care (1)

Specialty

10 miles

Update cost estimates

Filters • 1

Map

5 search results

Sort by: Preferred

PR

Paetra J. Ruddy, MD

Dermatology

Offers virtual visits

In-network

Accepting new patients

Frontier Dermatology

9.9 mi

• 1338 Commerce Ave, Ste 106, Longview, WA 98632

(866) 599-3376 • Call for office hours

Compare

Specialties

Dermatology

Areas of focus

Telehealth Virtual Care

Networks accepted

13 networks accepted

Contact

www.frontierderm...

You pay \$252

More details

Warning

Read notes

Important

Service Place: Office

More details

Ask Conversational AI Enhancements

Smarter, faster, more accurate search for your members

COMING SOON

UAT Aug 27 · Prod Sept 10



Faster, Smarter Responses

An upgraded model and streaming responses mean members see answers appear in real time, not after a wait.



Sharper Search Accuracy

Ask now better recognizes real intent, applying only the filters members actually asked for.



Smarter Location Handling

Ambiguous city names get resolved better, with a quick follow-up question when needed.

03

Analytics

Health Plans · from the Q3 2026 roadmap

High Intent Engagement

THE CORE METRIC

What is High-Intent Engagement?

Actions signaling real intent to schedule: not just browsing, but doing something that shows a member shows a member found a provider worth acting on.

- ✓ Schedule / book an appointment
- ✓ appointment
Call or contact a provider
- ✓ provider
Save a provider as a favorite
- ✓ Compare providers side by side
- ✓ side
Set a Primary Care Provider
- ✓ View a provider-level cost estimate

USE CASE 1

What Care Searches Drive Engagement, and What Doesn't

Search Group volume (share of searches) vs. Engagement Rate (share of those searches that led to a high-intent action).

IN YOUR DASHBOARD

Open High-Intent Engagement Detail
Search Group Selector: Search Groups
Session Intent: Search for Care
Date: set to the period you want to review

	Search Group	Total Searches	Engaged Searches	Engagement Rate
1	Provider or Organization ...	29,499	5,085	17.2%
2	Primary Care	22,580	4,381	19.4%
3	Behavioral Health & Ther...	12,113	826	6.8%
4	No Text Entered	7,750	590	7.6%
5	Womens Health, Obstetri...	4,778	432	9.0%
6	Dermatology	4,581	365	8.0%
7	Urgent Care & Emergenc...	4,033	207	5.1%
8	Eye Care & Optometrist	3,383	199	5.9%

HOW TO READ IT

Check for search groups with a big share of total volume but a below-average engagement rate: that combination, not the raw rate alone, is the priority. A niche group with a low rate matters far less than a high-volume one.

A low rate with high search volume means members are searching but not taking action in your experience.

USE CASE 2

Where Engagement Is Strong and Ready for Steering

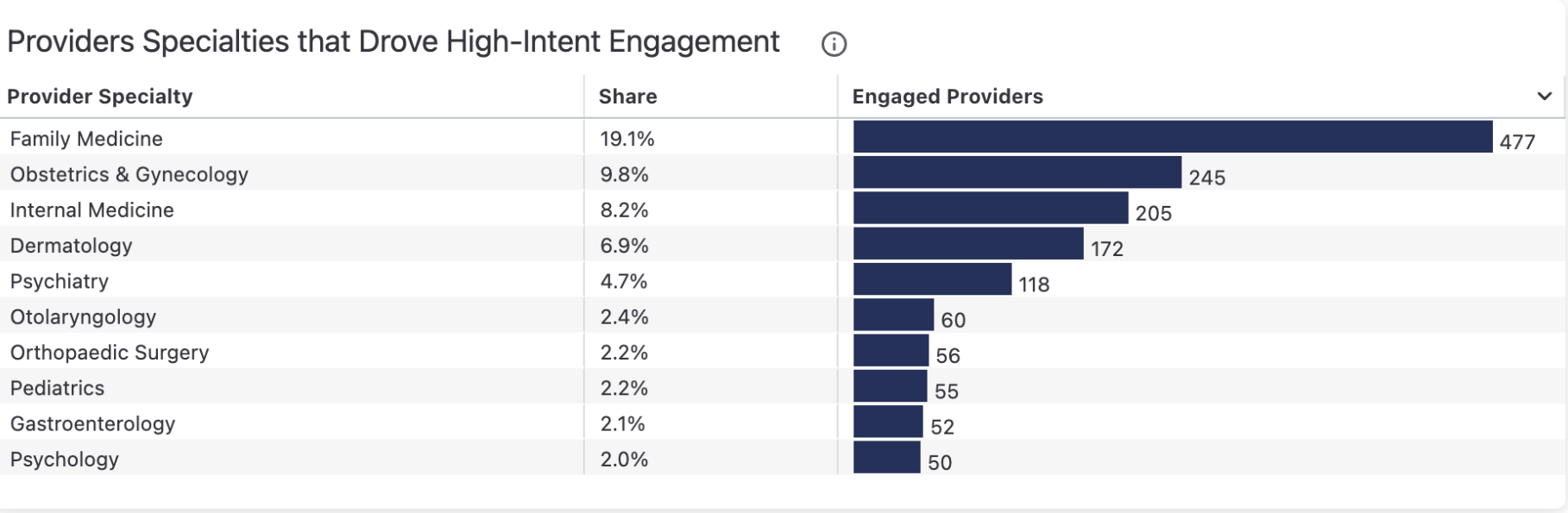
Provider specialties that drove the most high-intent engagement

IN YOUR DASHBOARD

- Open High-Intent Engagement Detail
- Provider Category: as needed
- Session Intent: Search for Care
- Date: set to the period you want to review

HOW TO READ IT

The specialties at the top of the list are already primed for action; you're influencing a decision already in motion. Specialties with strong demand and engagement are great targets for steerage efforts.



NEXT STEPS

Try This in Your Own Dashboard

- 1 Open your Performance Summary and peer benchmark to set your baseline.
- 2 Walk the High-Intent Engagement Detail dashboard, filtered to "Search for Care" sessions, for your own search groups and specialties.
- 3 Prioritize one high-volume / low-engagement group for engagement boosting, and one high-engagement specialty for steerage.

04

Compliance

Health Plans · from the Q3 2026 roadmap

Medicare Plan Finder

FHIR API

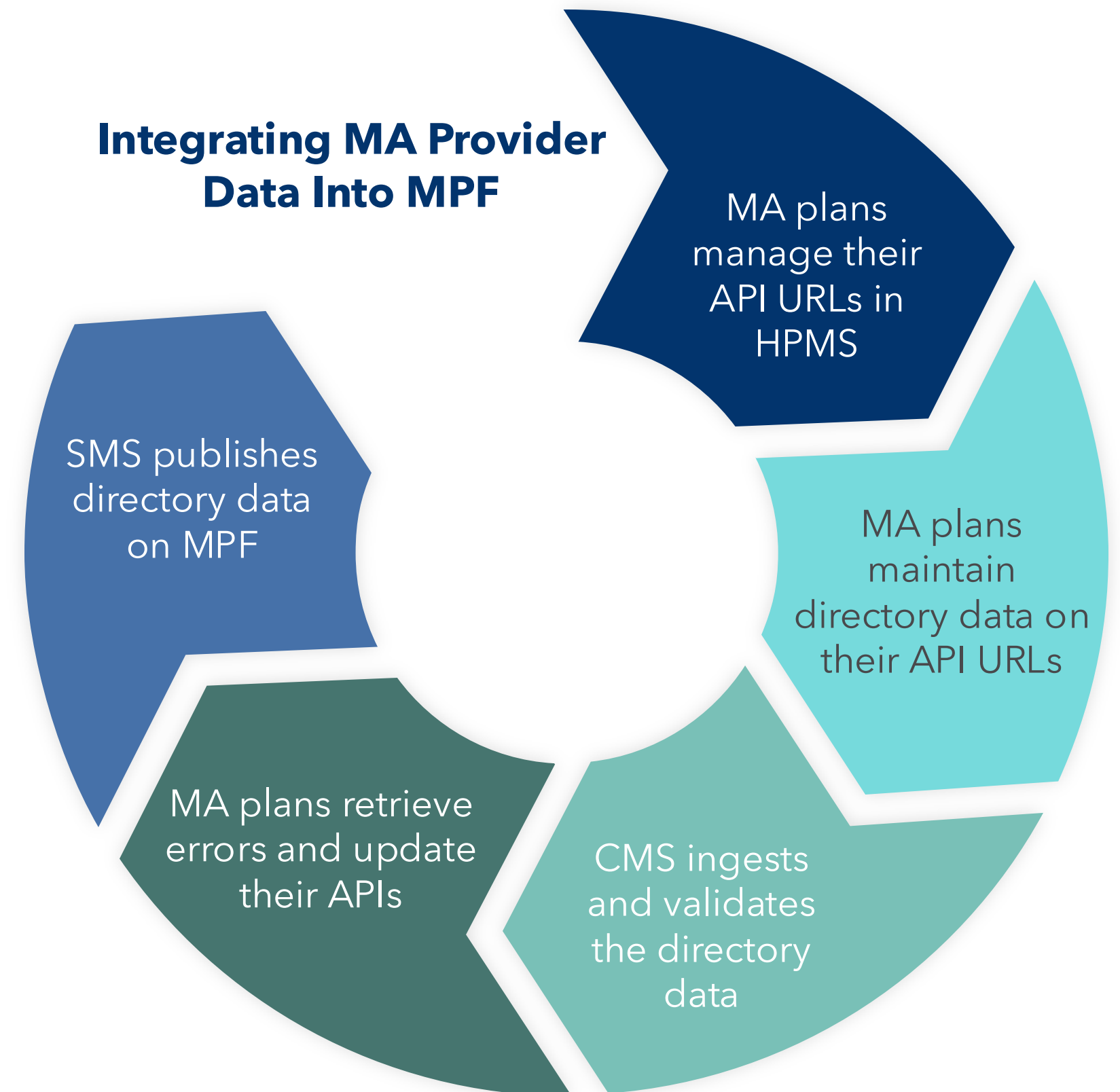
Medicare Plan Finder Phase 2: Overview

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 via **FHIR-Based JSON flat 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**.



Medicare plan finder phase II implementation

Production Rollout

- 1

MPF Phase II Testing Supported

RevSpring Testing begins for MPF Phase II

June 2026
- 2

MPF Phase II Testing Completes

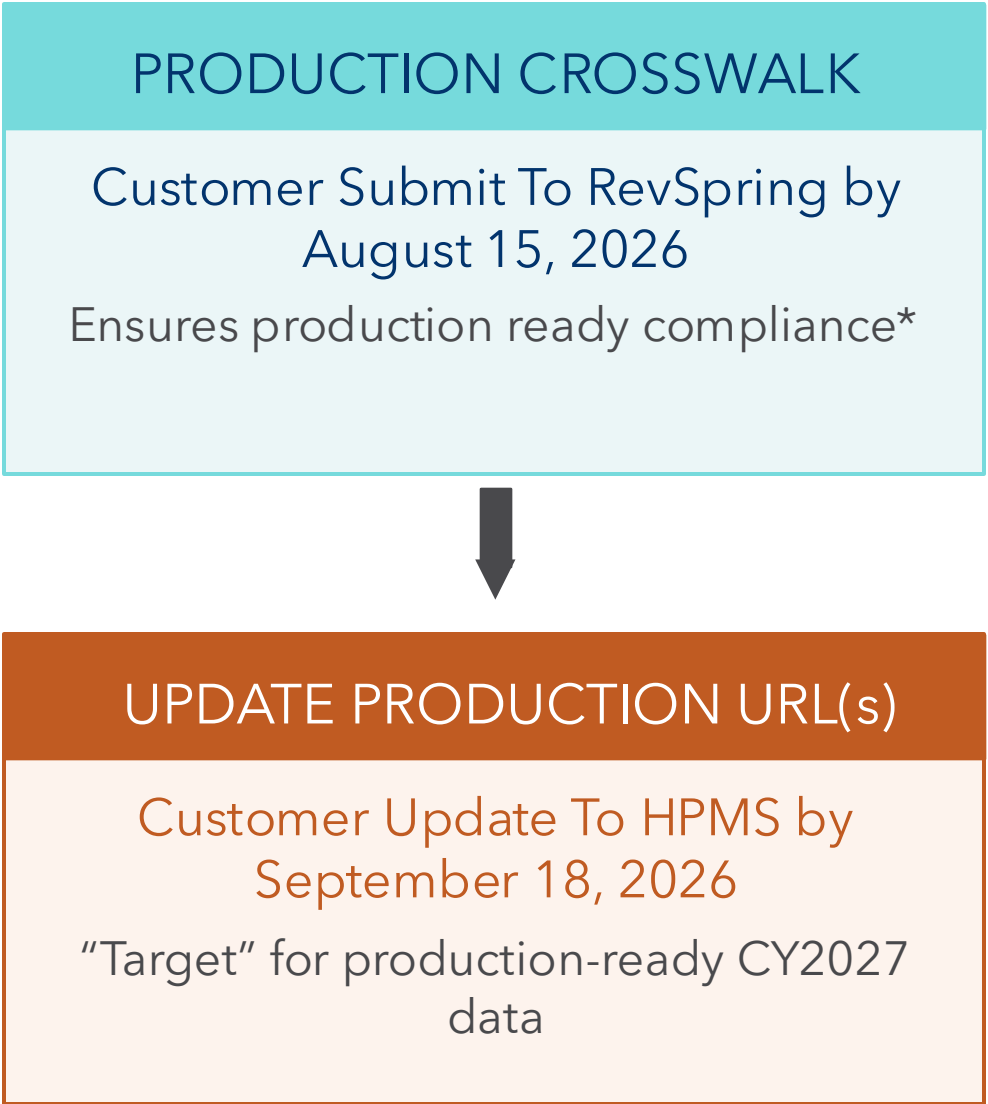
MPF Phase II Testing Completes

Mid-Sept
- 3

Client Submits Production Network Crosswalk File to RevSpring

Pipe-delimited CSV: NetworkCode, MedicareContractID, MedicarePlanID, SegmentID, Plan Year 2027. Contains finalized CY2027 Network to Contract Information

Due August 15



- KEY DATES
- Early June
Testing window opens
 - July 10
Enter MPF Provider Directory URL in HPMS
 - August 15
Provide Finalized CY2027 Crosswalk Data
 - Mid-Sept
Testing Completes
 - Sept 1
2027 HPMS attestation deadline
 - Sept 18
"Target" for production-ready CY2027 data
 - Oct 1
MPF 2027 production release

*Some clients may not be able to provide final Network to CMS Contract information by 8/15/2026 due to CMS finalizing the contracts with the Plan. RevSpring will work with Plans on a case by case basis to accommodate.

FHIR Provider Directory API—an emphasis on provider data access

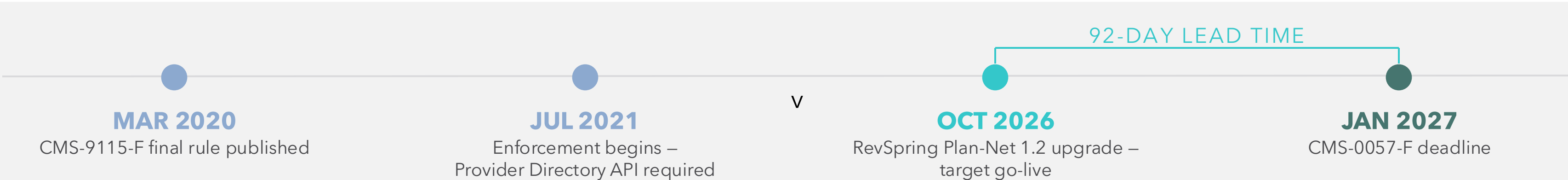
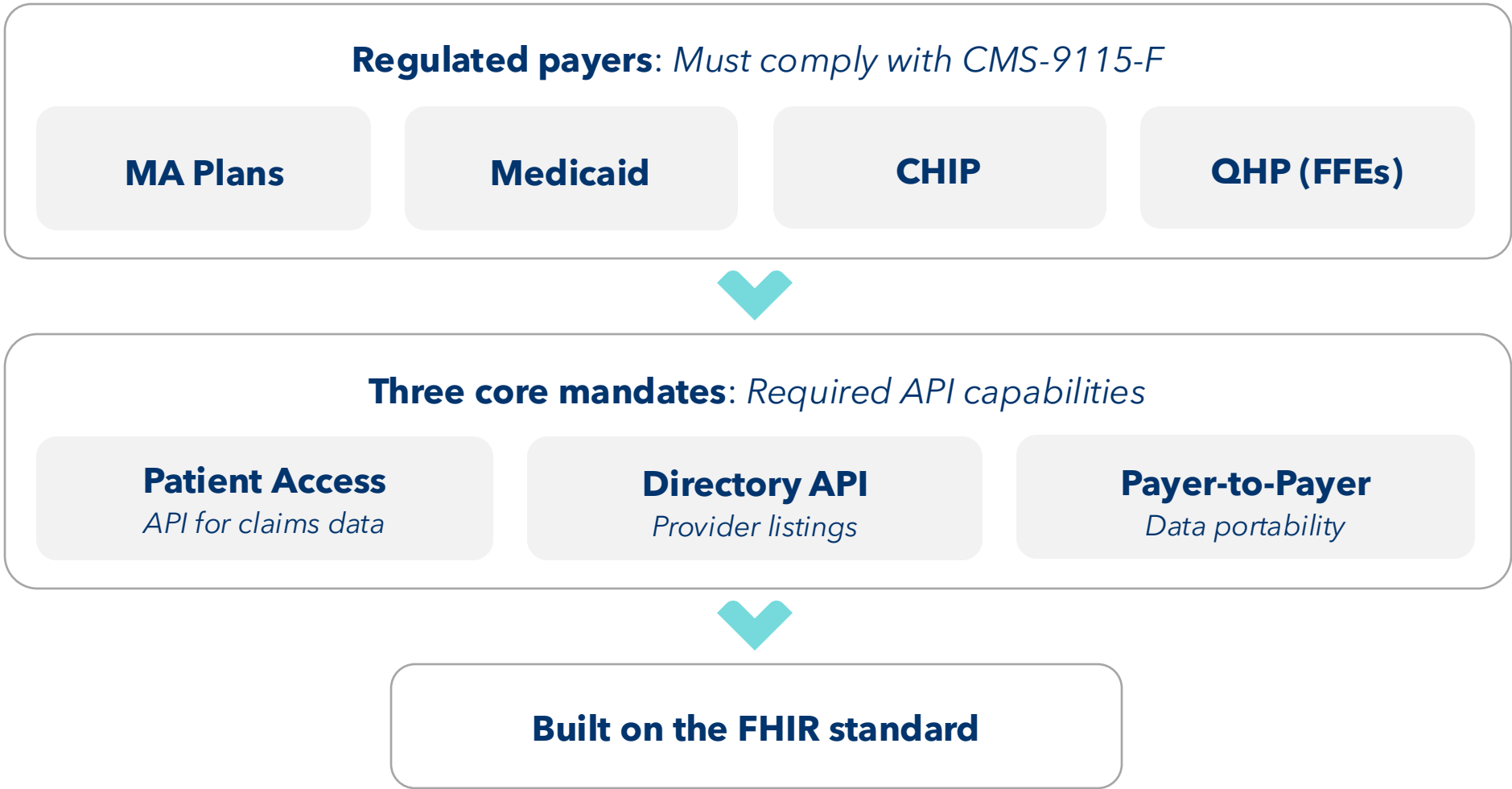
Accelerating Interoperability to Secure a future proof compliance for Health Plans

Mandate Overview

CMS-9115-F (Interoperability and Patient Access) requires impacted payers to maintain a publicly accessible **Provider Directory API** without consumer authentication or app registration.

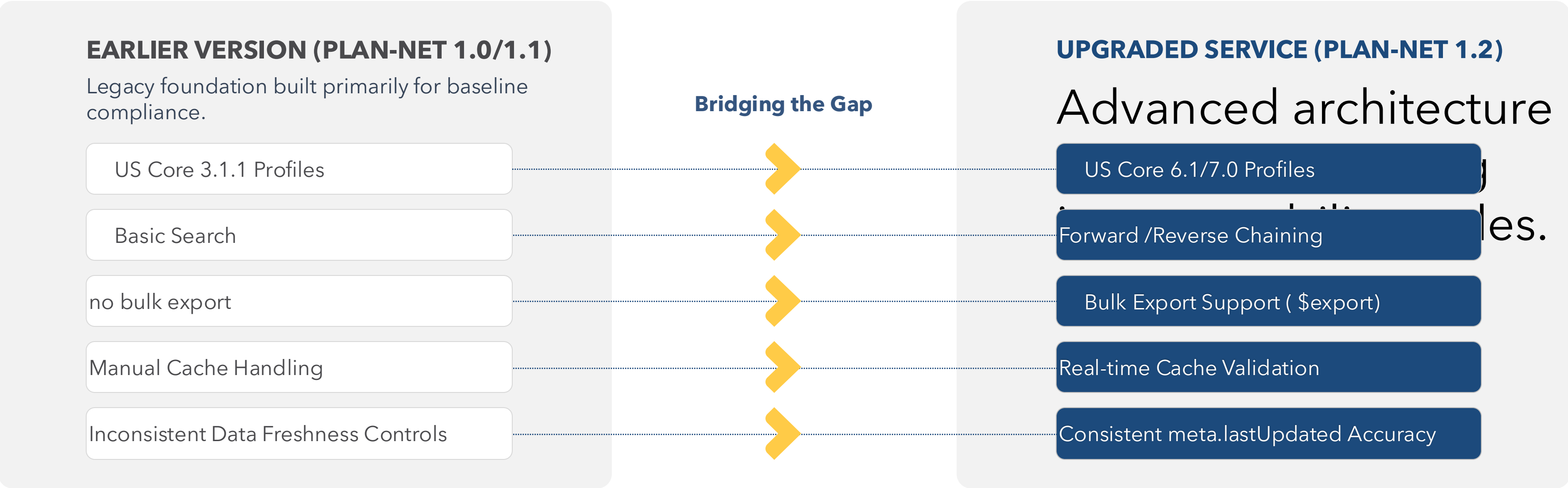
Core Requirements:

- Publicly accessible In-Network & Contracted provider data
- Unauthenticated read access (No developer registration)
- Must conform to FHIR R4 & Da Vinci PDex Plan-Net IG



FHIR Provider Directory - Evolution

Upgrading FHIR Provider Directory to future-proof Health Plan compliance ahead of it





Public, no-auth API
No consumer login or app registration for read access



FHIR R4 + Plan-Net IG
Conforms to HL7 Da Vinci PDex Plan-Net



Mandated data set
All required and must support fields available

RevSpring ensures plans are compliant for today while building the infrastructure for 2027 and beyond.

Thank You

NEXT MONTH'S ROUNDTABLE

September 16, 2026

12:00 PM PST / 3:00 PM EST

