



CENTERS FOR MEDICARE & MEDICAID SERVICES

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TO: All Current and Prospective Medicare Advantage, Prescription Drug Plan, and Section 1876 Cost Organizations

FROM: Jon Booth, Director
Web & Emerging Technologies Group
Office of Communications

Vanessa S. Duran, Director
Medicare Drug Benefit and C & D Data Group
Center for Medicare

SUBJECT: Medicare Plan Finder Enhancements for Contract Year 2026

To assist organizations with preparations for Contract Year (CY) 2026, CMS is providing an overview of enhancements planned for Medicare Plan Finder (MPF) and the related Health Plan Management System (HPMS) modules that support Part D pricing file submissions, plan benefit and drug pricing previews, suppressions and exclusions, and Online Enrollment Center (OEC) management.

MPF and Other Medicare.gov Functionality

The following changes have been implemented:

- Added functionality to allow users to easily print the full contents of the Medicare Prescription Payment Plan cost preview pop-up window.
- Added handling for out-of-network (OON) pharmacies on the Medicare Prescription Payment Plan cost preview pop-up window to reduce confusion for users who are reviewing costs at OON pharmacies and encourage users to add in-network pharmacies.
- Enhanced the Pharmacy Finder and In-Network Pharmacy Finder pages to improve usability.
- Added service area reduction-related messaging and a new Service Area Reduction help drawer to inform authenticated users when their active plan has a service area reduction for the upcoming contract year.
- Updated the enrollment form to promote consistent messaging and improve the handling of required vs. optional questions.
- Added a 50 drug list limit for anonymous users to improve site performance and encourage users to login or create an account.
- Added new 'Add to compare' notifications for mobile users on the plan results page.

- Added a new informational alert on the Plan Results page that will appear when any Special Needs Plan (I-SNP, D-SNP, or C-SNP) filter is selected to inform the user that search results may include these plans.
- Added an error message when a user attempts to proceed without selecting a state on the SPAP and PACE pages.
- Made an update to retain the user zip code when navigating from the Coverage Wizard to the Medigap page to prevent an unnecessary display of the zip code modal.
- Updated the Plan Compare page to hide irrelevant lowest cost pharmacy messaging when the user is viewing Medicare Advantage plans without drug coverage.

The following changes will be implemented for CY 2026:

- The race and ethnicity questions will be removed from the online enrollment form for enrollments received on or after January 1, 2026.
- New enrollee assistance fields and a DataCD accessibility option will be added to the online enrollment form for enrollments received on or after January 1, 2026.
- The ‘Lowest Cost Pharmacy’ order and flow will be updated to more easily allow users to add drugs and pharmacies.
- The “estimated total drug costs” language will be made consistent across Plan Finder to clarify if those costs are for the full year or for the rest of the calendar year.
- More detailed information will be provided on Standard Part B premium reductions.
- Adjust the SNP filter to display only D-SNPs, not add to the regular MA and Part D plan results set.
- Display the Medicaid State Benefits at the state/integration level for applicable integrated plan (AIP) SNPs.
- Account for changes to Part D insulin cost sharing in accordance with the Inflation Reduction Act (IRA).

Part D Pricing File Submission (PDPFS) Module

In CY 2026, CMS will implement the maximum fair prices (MFP) established for drugs selected under the Medicare Drug Price Negotiation program (selected drugs) for initial price applicability year (IPAY) 2026.

- HPMS will allow Part D sponsors to define a different dispensing fee for selected drugs using an **alternative version** of the pharmacy cost file layout. Three fields have been added to the end of the alternative layout:
 - SELECTED_DRUG_DISPENSING_FEE_30
 - SELECTED_DRUG_DISPENSING_FEE_60
 - SELECTED_DRUG_DISPENSING_FEE_90
- Validations will be added to accommodate the maximum fair price (MFP) established for selected drugs.
 - The “Missing Pricing for Selected Drugs” validation ensures that the pricing file includes all selected drugs on the plan formulary.
 - The “Unit Cost Exceeds Maximum Fair Price” validation ensures that the unit cost for a selected drug does not exceed the MFP.

- The “Findings Detail Report” will be modified to include the three new selected drug dispensing fee fields.

The following changes will also be made to PDPFS:

- The “PC Unit Cost Discrepancy” validation will be added to identify where expected retail and/or mail order pharmacies are missing from a price ID.
- Threshold changes will be implemented for the following validations:
 - High Dispensing Fees (at least 1 pharmacy with a dispensing fee of \$16 or higher)

Online Enrollment Center (OEC) Management Module

The following enrollment form changes are effective for enrollments received on or after January 1, 2026:

- The race and ethnicity fields will be removed from the OEC file download record layout.
- New enrollee assistance fields will be added to the OEC file download record layout: relationship to enrollee, name, and National Producer number (NPN)
- DataCD will be added as a valid value for the accessibility format field.
- The ApplicantGender field will be renamed to ApplicantSex.

Plan Benefit Preview

- The benefit preview will reflect MPF user interface changes, such as the:
 - Display of the Part B premium reduction value.
 - Display of Medicaid State Benefits at the state/integration level for AIP SNPs.

Drug Pricing Preview

- All insulin drug cost sharing information will be displayed in accordance with Section 11406 of the IRA. The cost sharing amount will reflect the lowest of the following:
 - \$35 (or the PBP-submitted copay, if lower);
 - 25% of the negotiated price (or the PBP-submitted coinsurance, if lower); or
 - For selected drugs, 25% of the MFP established for the covered insulin product.
- Users will be able to edit the drug dosage, quantity, and/or frequency for drugs saved in a search.
- The NPI number will be included in the “Download Table CSV” to help distinguish pharmacies.
- The “LIS Level” selection criteria is being updated to align with the options available on Medicare.gov under the “Do you get help with your Medicare health or drug costs?” section.

- When a user selects “View Submission Data” during the drug pricing preview, they will also see PDPFS submission details. This data will include the following elements for the selected plan, price ID, and NPI:
 - Unit Cost
 - Days Supply
 - NDC
 - Brand30
 - Brand60
 - Brand90
 - Generic30
 - Generic60
 - Generic90
 - Selected30
 - Selected60
 - Selected90

Suppressions and Exclusions

- No changes.

Medicare & You Handbook Preview

- No changes.

For questions regarding this memo, please contact the MPF team at MPF@cms.hhs.gov and the HPMS team at hpms@cms.hhs.gov.