



CENTERS FOR MEDICARE & MEDICAID SERVICES

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

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SUBJECT: Information for the Second Contract Year (CY) 2027 Drug Pricing and Plan Benefit Previews

CMS appreciates the valuable feedback provided by organizations during the first CY 2027 Medicare Plan Finder (MPF) preview window. This memo provides a summary of known and resolved issues as well as some general reminders in preparation for the second MPF plan preview scheduled for **Tuesday, September 8, 2026, at 6:00 a.m. ET through Friday, September 11, 2026 at 11:59 p.m. ET.**

Note: For issues that appear to be widespread in nature, organizations are **not** required to submit the preview comment for all instances across all plans. CMS recommends reporting the issue for a small subset of cases and then indicating as such in the plan preview comment field.

CY 2027 Plan Benefit Preview

Known Issues:

- None

Resolved Issues:

- Cost sharing for the catastrophic phase now displays as expected in the Cost by Drug Tier table for impacted plans.
- Zero-dollar Dual Eligible Special Needs Plans (D-SNPs) no longer display incorrect Medicare-defined cost sharing for Part A covered services.
- The transportation benefit labels for "Transportation for Non-Medical Needs: Any

location" and "Transportation for Non-Medical Needs: Plan-approved location" now display correctly across all applicable plans.

- The Injectable Drug tier now appears as expected in the Cost by Drug Tier table for impacted plans.
- Prior authorization and referral requirements now display correctly and no longer incorrectly show Advanced Plan Approval and Physician Referral as required for impacted plans.
- Remote Access Technologies (web/phone-based) and Nursing Hotline coverage and non-coverage now display correctly for impacted plans.
- Diabetic supplies coinsurance range values now display correctly for impacted plans.
- The "Out-of-Network" label for Skilled Nursing Facility benefits no longer displays for plans that do not offer out-of-network coverage for this benefit, and cost-sharing amounts now display correctly when out-of-network coverage does apply.
- The following benefit information was not available in the first preview but will be available in the second preview:
 - Display of the benefit types offered as part of the 14c4 fitness benefit:
 - Activity Tracker
 - Physical Fitness
 - Memory Fitness
 - Fitness Equipment or Kit
 - Display of the benefit types offered as part of the 14c22 caregivers benefit:
 - Respite Care
 - Caregiver

Reminders:

- Please refer to **Appendix A** for instructions on how to update certain MPF data fields in HPMS.
- Plans are encouraged to review the plan benefits preview data against the plan benefit reports in HPMS when completing the plan preview. **NOTE:** The plan benefit data “as of date” reflects the date on which the benefits data was pulled. If your organization submitted updated benefits in HPMS after this date, those changes will **not** be reflected in the preview.
- The "additional days" for inpatient hospital stays are not currently displayed in MPF. This is being considered as a future enhancement but will not be addressed for CY 2027.
- The 2027 Part A and Part B rates have not yet been released by CMS. During the preview period, MPF will display 2026 Medicare-defined copayments, deductibles, and premiums.

CY 2027 Drug Pricing Preview

Known Issues:

- None

Resolved Issues:

- Plans with four or more excluded drugs in their drug list now display the correct catastrophic copay amounts instead of defaulting to \$0.
- The “LIS Level” drop down in the drug pricing preview has been updated to reflect the CY 2027 Low-Income Subsidy (LIS) values.

Reminders:

- Only the drugs submitted as part of a plan's formulary or excluded drug files and drug pricing files will appear with pricing in the drug pricing preview.
- The drug pricing preview shows the cost of the drug in each phase of the benefit. The preview does not consider the **threshold** for a given phase of the benefit. For example, if a drug costs \$2,000, the preview will show \$2,000 in the deductible phase, even though the deductible would be met before the beneficiary pays the full \$2,000 cost.
- If a drug is not offered at a given location and frequency (e.g., a drug is not covered for 1-month mail order), the preview will display the full cash price of the drug.

For technical assistance during the second MPF plan preview, please contact the HPMS Help Desk at either hpms@cms.hhs.gov or 1-800-220-2028.

Appendix A

MPF Field	Where to Make Updates in HPMS
View Plan Website	Contract Management > Basic Contract Management > Enter Contract Number > Expand General Information > Org. Marketing Data > Organization Website Address
Address	Plan Bids > Bid Submission > CY 2027 > Edit Contact Data > Update the "Mailing Address" field for the "Customer Service Prospective Member" Contact
Member Phone Number	Plan Bids > Bid Submission > CY 2027 > Edit Contact Data > Update the "Local Phone Number" field for the "Customer Service Current Member" Contact
Non-Member Phone Number	Plan Bids > Bid Submission > CY 2027 > Edit Contact Data > Update the "Local Phone Number" field for the "Customer Service Prospective Member" Contact
View Provider Directory	<i>If you enter the optional URL:</i> Contract Management > Basic Contract Management > Enter Contract Number > Expand General Information > Org. Marketing Data > Update the "URL for this website" under the questions "Do you have a website that lists the physicians who are part of your network?" and "Do you have a website that lists the physicians who are currently accepting new patients?" <i>If you do not enter the optional URL:</i> Contract Management > Basic Contract Management > Enter Contract Number > Expand General Information > Org. Marketing Data > Organization Website Address