

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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CENTER FOR MEDICARE

DATE: October 16, 2024

TO: Current and Future Medicare Advantage Organizations and Prescription Drug Plan Sponsors

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SUBJECT: Release of Notice of Intent to Apply for Contract Year 2026 Medicare Advantage (MA), Prescription Drug Benefit (Part D) and Related CY 2026 Application Deadlines

CMS announces the release of the Contract Year (CY) 2026 Notice of Intent to Apply (NOIA) web tool and key dates for the CY 2026 Medicare Advantage (MA) and Prescription Drug Benefit (Part D) application cycle.

I. 2026 Application Activity Key Dates

CY 2026 Application Activity	Date
NOIA deadline to ensure access to the CMS Health Plan Management System (HPMS)	November 11, 2024
CMS sends NOIA confirmation e-mails to organizations meeting the November 11 NOIA deadline to ensure timely HPMS access	November 29, 2024
CMS User ID connectivity form submission deadline to ensure user access to HPMS by January 3, 2025	December 1, 2024
CY 2026 MA and Part D applications posted on CMS websites	January 8, 2025
Final day to submit NOIA for 2026	January 17, 2025
CY 2026 MA and Part D applications submission deadline	February 12, 2025

II. Submitting a Notice of Intent to Apply

Organizations should submit the CY 2026 NOIA by **5 p.m. Eastern Time on November 11, 2024**. CMS will continue to process NOIAs between November 11, 2024 and January 17, 2025. Please note that CMS cannot guarantee that applicants submitting a NOIA after November 11 will have access to the online application when it is released in January 2025; therefore, be advised that those organizations may not have the full period of time to complete their applications.

Organizations that submit a NOIA by November 11, 2024, will receive a confirmation email from CMS once the applicant's CY 2026 NOIAs are processed, but no later than **November 29, 2024**.

Organizations must submit a NOIA for CY 2026 if they plan to offer any of the following:

- A new (initial) MA and/or Part D product type, such as:
 - Health Maintenance Organization/Health Maintenance Organization-Point of Service (HMO/HMOPOS);
 - Local Preferred Provider Organization (LPPO);
 - Regional Preferred Provider Organization (RPPO);
 - Private Fee-for-Service (PFFS);
 - Medical Savings Account (MSA); or
 - Prescription Drug Plan (PDP).
- A service area expansion (SAE) of, or addition to, an existing contract, including:
 - A non - or partial network PFFS contract transitioning to a full network PFFS (a pending contract ID will be issued);
 - An existing contract expanding its service area, including an Employer Group Waiver Plan (EGWP)-only service area expansion;
 - An existing contract adding prescription drug benefits for the first time;
 - An individual-only market contract adding an EGWP plan for the first time or expanding its service area;
 - An EGWP-only contract adding an individual market plan for the first time or expanding its service area; or
 - A Special Needs Plan (SNP) expanding its service area.

An organization seeking to offer a new product type or an expansion of an existing MA or Part D contract must complete a separate NOIA for each unique application it intends to submit.

For CY 2026, there are two distinct websites for organizations. Organizations must use the following links to access and complete the NOIA web tools:

- New/Initial MA or Part D Plan – https://surveys.CMS.gov/jfe/form/SV_6XpjnU8XywB2Gai.
- MA or Part D SAE (including adding a SNP to an existing contract) – https://surveys.CMS.gov/jfe/form/SV_1FzWUtCCF7gJMrA.

III. CMS Processing of Notices of Intent to Apply and Confirmations

CMS will review and process NOIA submissions. For organizations seeking to offer a new product type in CY 2026, CMS will use the information submitted to generate pending contract IDs. CMS will accommodate organizations' requests for separate contract numbers under limited circumstances.

Please also note the following:

- Other than for Regional PPOs and Medicare Advantage organizations seeking to offer D-SNPs per 42 CFR § 422.107(e), CMS will not issue new contract numbers to existing legal entities for product types they currently contract with CMS to offer in CY 2025. Those entities should complete SAE applications to achieve the business goals of broadening the contract's service area, or adding EGWP or individual plans, to existing contracts.
- Organizations seeking to offer a Regional PPO in a new region may request and file the application under a new contract number.
- CMS will not accept P.O. Boxes as valid addresses for application purposes. Processing will be delayed for any NOIAs that contain a P.O. Box for the mailing address of the legal entity while CMS attempts to collect the street address for the legal entity.
- All EGWP SAEs will follow the same application timeline as the individual market applications.
- Current PFFS contractors with service areas transitioning to network-based coverage starting in CY 2026 must file a single NOIA for those areas that are transitioning. CMS will assess the network-based PFFS areas under a new contract number. Non-network PFFS plans (those plans that cover county(ies) not identified by CMS as being a county that must have network-based PFFS coverage) may continue to operate under their current contract numbers.
- In those states that currently have D-SNPs or any other plans authorized by CMS to exclusively enroll dually eligible individuals, CMS will not enter into contracts for new non-SNP MA plans that project in their bids that 60 percent or more of their total enrollment will be entitled to Medicaid.
- Any MA organization that intends to apply for a facility-based I-SNP may, as part of the network adequacy review, submit an exception request allowed for the facility-based I-SNP (codified at § 422.116(f)(3)). To qualify for this exception, the MA organization must agree to only offer a facility-based I-SNP(s) under that MA contract.

IV. CY 2026 Applications

The CY 2026 MA and Part D Initial and SAE, and SNP Initial and SAE applications will be posted on the CMS websites and in HPMS by January 8, 2025, and will be due on February 12, 2025.

All CY 2026 Medicare applications and supporting documentation must be submitted electronically via HPMS. To ensure timely access to CMS systems, including HPMS, organizations must complete the NOIA online and the CMS User ID connectivity form (required for organizations seeking a new 2026 contract). Submitting a NOIA does not bind that organization to submit an application for CY 2026.

If you have questions about the CY 2026 NOIA process, please contact the CMS Part D Application mailbox at PartD_Applications@cms.hhs.gov.

If you have questions related to HPMS user access, send an email to hpms_access@cms.hhs.gov.

IMPORTANT Information for MA Applicants: 42 CFR § 422.116(a)(1)(ii) requires MA applicants to demonstrate compliance with network adequacy standards as part of the MA application process for new and expanding service areas. CMS encourages applicants to prepare and submit network adequacy submissions ahead of the application deadline. If the submission is too close to the application deadline and the HSD table submissions are not successful, organizations may miss an opportunity to submit Exception Requests. Additional guidance on MA network submissions will be forthcoming.

Questions regarding network adequacy may be submitted to <https://dmao.lmi.org>. Select “Network Adequacy” from the Category drop-down.