

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

DATE: November 4, 2025

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 2027 Medicare Advantage, Prescription Drug Benefit and Related CY 2027 Application Deadlines

CMS announces the release of the Contract Year (CY) 2027 Notice of Intent to Apply (NOIA) web tool and key dates for the CY 2027 Medicare Advantage (MA) and Prescription Drug Benefit (Part D) application cycle.

I. 2027 Application Activity Key Dates

CY 2027 Application Activity	Date
NOIA deadline to ensure access to the CMS Health Plan Management System (HPMS)	November 18, 2025
CMS sends NOIA confirmation e-mails to organizations meeting the November 18 NOIA deadline to ensure timely HPMS access	November 28, 2025
CMS User ID connectivity form submission deadline to ensure user access to HPMS by January 3, 2026	December 1, 2025
CY 2027 MA and Part D applications posted on CMS websites	January 7, 2026
Final day to submit NOIA for CY 2027	January 23, 2026
CY 2027 MA and Part D applications submission deadline	February 11, 2026

II. Submitting a Notice of Intent to Apply

Organizations should submit the CY 2027 NOIA by **5 p.m. Eastern Time on November 18, 2025**. CMS will continue to process NOIAs between November 18, 2025 and January 23, 2026. Please note that CMS cannot guarantee that applicants submitting a NOIA after November 18 will have access to the online application when it is released in January 2026; therefore, be advised that those organizations may not have the full period of time to complete their applications.

Organizations that submit a NOIA for a new/initial application by November 18, 2025, will receive an email from CMS once the applicant's CY 2027 NOIAs are processed, but no later than November 28, 2025.

Organizations must submit a NOIA for CY 2027 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);
 - Prescription Drug Plan (PDP), or
 - Employer Group Waiver Plan (EGWP) only contract adding an individual market plan for the first time.

* Special Needs Plans (SNPs) may be offered under these plan types but would not require a separate NOIA submission. There is a separate application for SNPs.

- 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 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 expanding its service area; or
 - Adding a SNP or expanding a SNP service area.

For CY 2027, organizations seeking a new/initial MA or Part D plan contract must complete the online NOIA for each unique application it intends to submit. Access the new/initial contract NOIA online at https://surveys.CMS.gov/jfc/form/SV_0TlsKcpJswcTpDE.

Organizations seeking to expand an existing contract should review the instructions in the HPMS Memo titled, *2027 Part C Part D Application Release*, to be published in early January 2026 for further information on how to begin your SAE application. SAE applications are triggered by applicants in the HPMS *My Application* module. Once those actions are completed, organizations will

receive an email from HPMS confirming the receipt of organization's notice of intent to apply for a service area expansion. This email will serve as your receipt for the SAE NOIA.

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 2027, 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 Dual-Eligible Special Needs Plans (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 2026. 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 2027 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 contract that only offers facility-based Institutional Special Needs Plans (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. (To be eligible for the facility-based I-SNP exception, MA organizations must select "Facility Based I-SNP" under the Exception Type drop-down when requesting an exception to the network adequacy criteria in the Network Management Module.)

IV. Submitting CY 2027 Applications

All CY 2027 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 CY 2027 contract). Submitting a NOIA does not bind that organization to submit an application for CY 2027.

If you have questions about the CY 2027 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)(2)(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 Health Service Delivery (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.

IMPORTANT Information for SNP Applicants: Whether applying for an initial SNP or a SNP SAE, organizations must trigger the SNP application in HPMS. The SNP application is completed separately from the MA and Part D applications.

Also, CMS has changed the deadline by which SNPs must submit their initial or renewal Models of Care (MOCs) to CMS and the National Committee for Quality Assurance (NCQA), as required under 42 CFR §§ 422.4(a)(1)(iv), 422.101(f)(3)(i), and 422.152(g) and MOCs are no longer submitted with the SNP application. Please reference the September 3, 2025 HPMS memo titled, “Contract Year 2027 Model of Care Submission Timeline Updates” for more information.