DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

CENTER FOR MEDICARE

DATE: April 11, 2025

TO: All Current and Prospective Medicare Advantage (MA), Prescription Drug
               Plan (PDP), Section 1876 Cost, and PACE Organizations, Bid Consultants,
               and Actuarial Certification Consultants

FROM: Vanessa S. Duran, Director
               Medicare Drug Benefit and C & D Data Group

SUBJECT: Release of the Contract Year (CY) 2026 Plan Benefit Package and Bid
               Pricing Tool Software and Related Technical Bidding Guidance for
               Employer/Union-Only Group Waiver Plans

CMS is pleased to announce the release of the CY 2026 Plan Benefit Package (PBP), Bid
Pricing Tool (BPT), and plan creation functionality in the Health Plan Management System
(HPMS).

To access the CY 2026 plan creation module, BPT software, and corresponding technical
instructions, users should follow this navigation path in HPMS: Plan Bids > Bid Submission >
Contract Year 2026.

Users can access the CY 2026 PBP module and technical user guide under the Plan Bids home page
category.

**Technical Bidding Instructions for Organizations Offering Employer/Union-Only Group
Waiver Plans in CY 2026**

Employer/union-only group waiver plans (EGWP) do not submit Medicare Advantage (MA) or Part D
BPTs. This waiver policy applies to all MA, PDP, and Section 1876 cost plan EGWPs (i.e., "800 series"
EGWPs) as well as to employers/unions that directly contract with CMS to offer benefits to their
retirees (i.e., "Direct Contract" EGWPs).

This memo provides information on the PBP and BPT submission requirements that apply
for each type of EGWP for CY 2026, as described in the table below.

	PDP and Section 1876 Cost "800 series" EGWP and Direct Contract PDP EGWP	**MA and MA-PD "800 series" EGWP and Direct Contract MA and MA-PD EGWP**
PBP Requirements	• Enter the PBP module. • Select the contract and plan. • Open the Plan Characteristics section. • Click on the Save and Close button. This action will set the PBP to "ready for review." • Select the "start reviewing" button. If no errors are found with the PBP, the status will be set to "package ready for submission." • Final submit the PBP data.	• Enter the PBP module. • Select the contract and plan. • Complete the PBP sections available in the module. <u>Note</u>: The Rx section will not be available. • Upon completion of all sections, the PBP will be set to "ready for review." • Select the "start reviewing" button. If no errors are found with the PBP, the status will be set to "package ready for submission." • Final submit the PBP data.
BPT Requirements	• There is no action to take. The BPT column will be marked as N/A on the PBP-BPT final submission page.	• There is no action to take. The BPT column will be marked as N/A on the PBP-BPT final submission page.

For questions regarding this memo, please contact Erica Scott (Erica.Scott@cms.hhs.gov) or Raven Robinson (Raven.Robinson@cms.hhs.gov).

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