

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



**CENTER FOR MEDICARE**

---

**DATE:** February 6, 2026

**TO:** All Medicare Advantage Organizations

**FROM:** Shruti Rajan, Acting Director, Medicare Plan Payment Group  
Vanessa S. Duran, Director, Medicare Drug Benefit and C&D Data Group

**SUBJECT:** Participation in 2026 HOS/HOS-M for MA Organizations Planning to Sponsor FIDE SNPs in 2027 – Response Needed by Friday, February 27, 2026

In 2012, CMS began adjusting payments of fully integrated dual eligible special needs plans (FIDE SNPs)<sup>1</sup> based on the average frailty of their plan enrollees. Section 3205(b) of the Affordable Care Act (ACA) allows CMS to pay a frailty adjustment to a Dual Eligible SNP<sup>2</sup> that is both “fully integrated with capitated contracts with States for Medicaid benefits, including long-term care” and has a “similar average level of frailty...as the PACE program.”

In order for CMS to determine whether a FIDE SNP has a similar average level of frailty as the PACE program, CMS must be able to calculate a frailty score for each FIDE SNP.<sup>3</sup> In the 2012 Rate Announcement, CMS specified that we would determine which FIDE SNPs have a similar average level of frailty as the PACE program by using the lowest frailty score from the range of applicable PACE organization frailty scores.<sup>4</sup> Frailty scores are calculated using the limitation on activities of daily living (ADL) reported by a plan’s enrollees, based on the Medicare Health Outcomes Survey (HOS) from the year prior to the payment year (PY). Additional information on the methodology proposed for the frailty adjustment for 2027 can be found in the 2027 Advance Notice.<sup>5</sup>

For PY 2027, CMS will use the 2026 HOS or Health Outcomes Survey-Modified (HOS-M) to determine frailty scores for FIDE SNPs. Medicare Advantage (MA) organizations that believe

---

<sup>1</sup> See definition at 42 CFR §422.2

<sup>2</sup> See definition at 42 CFR §422.2

<sup>3</sup> 2012 Advance Notice: [Advance Notice of Methodological Changes for Calendar Year \(CY\) 2012 for Medicare Advantage \(MA\) Capitation Rates, Part C and Part D Payment Policies and 2012 Call Letter](#)

<sup>4</sup> 2012 Rate Announcement: [Announcement of Calendar Year \(CY\) 2012 Medicare Advantage Capitation Rates and Medicare Advantage and Part D Payment Policies and Final Call Letter](#)

<sup>5</sup> 2027 Advance Notice: [Advance Notice of Methodological Changes for Calendar Year \(CY\) 2027 for Medicare Advantage \(MA\) Capitation Rates and Part C and Part D Payment Policies](#)

they will be sponsoring a FIDE SNP in 2027 and want to be considered for a frailty payment must participate in either the 2026 HOS or HOS-M to allow CMS to calculate their frailty score.

### **Automated Process for Requesting the HOS/HOS-M for FIDE SNPs**

If an MA organization believes they will sponsor a FIDE SNP in 2027 and wishes to participate in the 2026 HOS or HOS-M to support the calculation of a frailty score for 2027 payment, they must make their survey selection through the automated process online via the Health Plan Management System (HPMS) website. Instructions are provided on page 5 of this memo. **The HPMS HOS/HOS-M selection module is now available. All selections must be submitted in HPMS no later than 11:59 PM Eastern Time (ET) on Friday, February 27, 2026. Late submissions will not be accepted.**

Please note that this process only applies to MA organizations that want to sponsor a FIDE SNP and be considered for frailty measurement. PACE organizations with a Medicare contract in effect on or before January 1, 2025 and a minimum enrollment of 30 are automatically enrolled in the 2026 HOS-M, and CMS calculates frailty scores for frailty adjusted payments for all PACE organizations.

### **Requirements for Participation in the 2026 HOS or HOS-M for Purposes of Measuring Frailty**

The requirements for participating in the HOS or HOS-M for frailty measurement are as follows:

- The contract must exist as of January 1, 2025.
- The PBP that will be the FIDE SNP in 2027 must exist as of January 1, 2026.
- The PBP to be surveyed in 2026 does not have to meet FIDE SNP requirements in order to be surveyed, but it must be a Dual Eligible SNP in 2026.
- The PBP to be surveyed must have at least 50 enrollees. CMS will sample up to 1,200 enrollees in each PBP, if available, but having at least 50 enrollees better ensures the minimum of 30 respondents needed to calculate a frailty score.

*Exception:* MA organizations that cross walked their D-SNP membership into a new contract in 2026 in order to meet state requirements responsive to 42 CFR § 422.107(e) may elect to participate in the 2026 HOS or HOS-M to support the calculation of a frailty score for 2027 payment, if they anticipate sponsoring a FIDE SNP in 2027. D-SNPs that choose to voluntarily field the HOS in 2026 for frailty that are not otherwise eligible for the survey will not have their HOS data included in the Part C and D Star Rating. Because these new contracts will not be in the HPMS module for selection for participating in the HOS or HOS-M survey, there are specific instructions on page 6 below *for these contracts only*.

### **Eligibility for HOS or HOS-M Participation**

In addition to the criteria listed above, MA organizations may use the table below as a guide to determine their eligibility to use the HOS or HOS-M for frailty measurement.

<b>Contract Size</b>	<b>Eligibility for HOS or HOS-M</b>
The contract has fewer than 500 enrollees	The contract is not required to participate in HOS for quality reporting purposes. The plan sponsor may select either HOS or HOS-M to measure frailty for their FIDE SNP(s).
The contract has 500 or more enrollees and all enrollees are needed for HOS quality reporting	The contract is required to participate in HOS for quality reporting purposes. The plan sponsor must use HOS to measure frailty for their FIDE SNP(s). They cannot participate in HOS-M.
The contract has 1,250 or more enrollees and, after sampling for HOS quality reporting is completed, 50 or more enrollees in the FIDE SNP(s) remain available to be sampled	The plan sponsor may select either HOS or HOS-M to measure frailty for their FIDE SNP(s).

For contracts with fewer than 500 enrollees, the HOS is not required for quality reporting and contracts may select either the HOS or HOS-M to measure frailty for their FIDE SNP(s). For contracts with at least 500 enrollees, the HOS will be fielded at the contract level to meet MA quality reporting requirements. The MA organization must still submit a request through HPMS for CMS to use the survey results to calculate a frailty score for the FIDE SNP for 2027. For FIDE SNPs that are part of larger MA contracts, supplemental sampling of the FIDE SNP population at the PBP level will be conducted as a secondary step once sampling for the contract-level quality reporting requirement is complete.

Only those MA organizations that submit a request through HPMS to participate in the 2026 HOS or HOS-M for their FIDE SNP at the PBP level (notwithstanding the exception specified above, for which the instructions are discussed below), and meet specified enrollment levels, are eligible for supplemental sampling for frailty measurement. Please note that CMS will perform enrollment verifications outside of HPMS. CMS will notify plan sponsors that request to sign up for the HOS or HOS-M if their FIDE SNP lacks sufficient enrollment.

### **HOS/HOS-M Administration**

All HOS and HOS-M survey administration costs, including any additional costs attributed to additional contract-level sampling and FIDE SNP PBP-level sampling, are the responsibility of the MA organization through its HOS or HOS-M survey vendor contract.

Plan sponsors may contract with any CMS-approved HOS survey vendor to survey their FIDE SNP for purposes of measuring frailty using HOS. Similarly, sponsors participating in the HOS-M may contract with any CMS-approved HOS-M survey vendor to survey their FIDE SNP for purposes of measuring frailty using the HOS-M. The lists of CMS-approved HOS and HOS-M survey vendors for 2026 will be posted on [www.hosonline.org](http://www.hosonline.org).

## Clarifications to HOS/HOS-M Administration Protocol

Due to the manner in which CMS uses HOS data for Part C and D Star Ratings and frailty payment, three additional points should be noted about the HOS and HOS-M protocols:

1. No plan staff should independently contact a survey vendor to provide answers to a survey on behalf of any beneficiary. Proxy response is under the control of the beneficiary. Plan staff may complete a survey questionnaire or telephone interview only at the request of the beneficiary, a family member, or other caregiver. If CMS finds that a plan does not follow these protocols, the HOS or HOS-M data will be deemed invalid.
2. CMS continues to collect enhanced enrollee and proxy contact information for PACE organizations to ensure higher response rates. While CMS does not have the capacity to collect enhanced contact information<sup>6</sup> for FIDE SNPs or other MA organizations, MA organizations are free to provide additional enrollee contact information for their entire FIDE SNP directly to their survey vendor, whether they are using the HOS or HOS-M survey instrument. Providing such information may help achieve higher response rates.
3. MA organizations that choose to participate in the HOS-M for purposes of measuring frailty will not receive a HOS-M report or the corresponding beneficiary-level data that are disseminated to participating PACE organizations.

## Frailty Payment

The 2027 frailty payment will be made to those FIDE SNPs that (1) meet the requirements to be a FIDE SNP, (2) yield at least **30** responses to the HOS or HOS-M, and (3) have a frailty score that meets the PACE level of frailty. Any proposed changes to the methodology used to determine frailty payments for 2027 can be found in the 2027 Advance Notice.<sup>7</sup>

The frailty model captures costs associated with functional impairments in the frail elderly using limitations on ADLs to measure a dimension of health status not captured by diagnoses. The specific ADLs included in the frailty model are:

1. Bathing
2. Dressing
3. Eating
4. Getting in or out of chairs
5. Walking
6. Using the toilet

These limitations on ADLs are captured in both the HOS and HOS-M.

---

<sup>6</sup> PACE organizations submit to CMS additional contact information for enrollees and up to two family members or responsible parties (e.g., proxies) which is added to the HOS-M sample file and distributed to the survey vendor. A similar process does not exist for MA organizations. For FIDE SNPs and other MA organizations, CMS supplies survey vendors with no contact information beyond what is available in its systems.

<sup>7</sup> 2027 Advance Notice: [Advance Notice of Methodological Changes for Calendar Year \(CY\) 2027 for Medicare Advantage \(MA\) Capitation Rates and Part C and Part D Payment Policies](#)

For informational purposes only, below is the distribution of ADL limitations across all PACE organizations based on the 2025 HOS-M data.

0 ADLs		1-2 ADLs		3-4 ADLs		5-6 ADLs	
Medicaid	Non-Medicaid	Medicaid	Non-Medicaid	Medicaid	Non-Medicaid	Medicaid	Non-Medicaid
21.32%	0.12%	28.14%	0.19%	21.67%	0.13%	28.16%	0.26%

**Instructions to Request HOS/HOS-M Participation for FIDE SNPs**

If an MA organization anticipates sponsoring a FIDE SNP in 2027 and wants to participate in the 2026 HOS or HOS-M at the PBP level for frailty measurement, please use the following information to request HOS or HOS-M participation for each FIDE SNP.

To make the survey selection:

1. Log into HPMS.
2. From the top navigation bar under “Risk Adjustment,” select “Risk Adjustment,” then “Survey Information” from the left side dashboard.
3. On the Survey page, under “Select Function,” select “Request HOS/HOS-M Survey Participation.”
4. Then, under “Select Option,” select “Request Survey.”
5. From the dropdown menus, select the Contract Number and Plan ID for the FIDE SNP you want surveyed for frailty measurement.
6. Click the Submit button and a HOS/HOS-M selection window will appear.
7. Select “Yes” for the survey you wish to request and “No” for the survey you do not want to use for frailty measurement. After the selection is complete, click the Submit button and a confirmation message will appear confirming your request has been submitted.
8. Repeat steps for any additional PBPs you wish to request HOS or HOS-M participation.

To confirm the survey selection:

1. After making your survey selection, scroll back up on the Survey page and ensure that “Request HOS/HOS-M Survey Participation” is selected under “Select Function.”
2. Under “Select Option,” select “View Report.”
3. Under “Select a Year,” select “2026,” and click the Submit button.
4. In the table that appears, verify there is a “Yes” under the column for the survey requested and a “No” under the column for the survey not requested for each PBP for which a survey

is being requested. Please also verify that the Contract Number and Plan ID are correct for all of the FIDE SNPs you want surveyed.

New contracts in 2026 responsive to 42 CFR § 422.107(e):

MA organizations that cross walked their D-SNP membership into a new contract in 2026 in order to meet state requirements responsive to 42 CFR § 422.107(e) that anticipate sponsoring a FIDE SNP in 2027 and are interested in fielding the HOS or HOS-M in 2026 for these FIDE SNPs must email [RiskAdjustmentPolicy@cms.hhs.gov](mailto:RiskAdjustmentPolicy@cms.hhs.gov) and specify “2026 HOS – H##### Exception” with your contract number in the subject line **by 11:59 PM ET on Friday, February 27, 2026. Late submissions will not be accepted.** Please provide the following in the body of your email: the 2026 contract number and PBP number for each PBP you want surveyed in 2026, the 2025 contract number and PBPs that were cross walked to the 2026 contract and PBP to be surveyed, and whether you want to participate in the HOS or HOS-M. This exception is limited to contracts that are new in 2026 due to state requirements responsive to 42 CFR § 422.107(e). CMS will verify that these requests meet the exception criteria.

**Communication Regarding HOS/HOS-M Participation**

MA organizations that have requested HOS or HOS-M participation will receive additional information from NCQA about their 2026 HOS and HOS-M participation in March 2026. To allow sufficient time for contracting with a survey vendor, CMS will inform plan sponsors that have requested HOS or HOS-M participation for their FIDE SNPs if their PBP(s) lack sufficient enrollment as soon as possible in or after March 2026. As a reminder, approved 2026 HOS and HOS-M survey vendors will be posted on [www.hosonline.org](http://www.hosonline.org) in March 2026.

As stated previously, all selections must be submitted to CMS **no later than 11:59 PM Eastern Time (ET) on Friday, February 27, 2026. CMS will not accept late submissions.** If an MA organization decides they want to remove their FIDE SNP from consideration for 2027 frailty payment after the deadline, they must inform [RiskAdjustmentPolicy@cms.hhs.gov](mailto:RiskAdjustmentPolicy@cms.hhs.gov) **no later than April 17, 2026.**

**Contact Information**

For questions related to FIDE SNP frailty measurement, please email [RiskAdjustmentPolicy@cms.hhs.gov](mailto:RiskAdjustmentPolicy@cms.hhs.gov) and specify “2026 HOS – H#####” with your contract number in the subject line.

For questions related to the HOS or HOS-M administration, please email [HOS@cms.hhs.gov](mailto:HOS@cms.hhs.gov).