HEDIS MY 2026 AUDIT TIMELINE	
Task	**NCQA Deadline**
Measure Certification deadline for HEDIS Health Plan, HEDIS Allowable Adjustments and Long-Term Services and Supports (LTSS) measures.	July 1, 2026
Organization contracts with an NCQA Licensed Organization. *Contracting can occur after this date, but it could be difficult for organizations to meet all audit requirements if this does not occur by early October.*	October 1, 2026
Validating supplemental data may begin only if all Roadmap documentation, including attachments, are complete and submitted to the auditor and data collection is complete for nonstandard supplemental data sources. ***Note:*** *Because the collection of some nonstandard electronic clinical data files does not stop, auditors may validate these data starting on this date as long as the completed Roadmap documentation has been submitted.*	November 2, 2026
If applicable, organization submits source code for measures being audited as part of the HEDIS audit process. *See* Source Code Review section.	By December 2, 2026
Audit review meetings begin. *Audit review meetings are not to be held prior to receipt of the Roadmap.*	After December 2, 2026
Measure Certification deadline for survey sample frames.	December 15, 2026
Organization submits the completed current year's Roadmap to the auditor. This includes supplemental data Roadmap documentation. *The auditor must receive the Roadmap by the January deadline or at least 2 weeks before the audit review meeting, whichever date is earlier.*	By January 29, 2027
Auditor completes the survey sample frame validation. *This is only the date when the sample frame must be approved by the auditor and sent to the survey vendor. Approval in the Healthcare Organization Questionnaire (HOQ) must be done by the HOQ deadline.*	January 29, 2027
Organization stops all nonstandard supplemental data collection and entry. All amendments to supplemental data Roadmap documentation must be complete. *There are NO exceptions!* Failure to meet this deadline could result in inability to use supplemental data to report rates. Supplemental data sources not identified with a complete Roadmap documentation by this date cannot be used for HEDIS reporting.	February 26, 2027
Auditor finalizes approval of *all* supplemental data. PSV for nonstandard supplemental data must not occur prior to February 26 unless the organization has finished all supplemental data processes, collection and entry. *There are NO exceptions!*	March 26, 2027
Organization submits preliminary rates, through the IDSS, for auditor review. *Auditors must review preliminary rates based on the current year's specifications.*	By April 9, 2027
Audit review meetings are completed.	By April 23, 2027
Preliminary rate review is completed by the auditor. *NCQA encourages preliminary rate review to take place earlier in the audit process.*	By April 23, 2027
Organizations respond to preliminary rate review findings. Not responding to issues could result in an *NR* or *BR* finding during final rate review.	April 23–May 7, 2027
Organization completes the medical record abstraction process for all measures and sends the final numerator-compliant counts for all measures and exclusion counts for MRRV. *There are NO exceptions!* Failure to meet this deadline could result in inability to use medical record data to report rates. ***Note:*** *This includes the abstraction of case management records for LTSS reporting.*	May 3, 2027
Auditor picks measures from each measure group and all exclusions, selects 16 records from each for MRRV review, and informs the organization of the selections; organization	May 3–21, 2027

sends selected records to the auditor for validation; auditor shares the results and corrective actions with the organization. *It is up to the organization and auditor to determine the timing.*	
Organization completes all audit corrective actions and follow-up requests.	By May 14, 2027
Organization submits the plan-locked commercial, Exchange, Medicaid and Medicare submissions and patient-level detail files to auditor. Final supplemental data impact reports must also be submitted. *There are NO exceptions! Data must be final. The lock should be removed only to correct data.*	June 1, 2027
Auditor reviews all IDSS warnings, performs final rate review, compares Medicare PLD file to summary data, ensures that the MRR numerator and exclusion counts entered in IDSS match the lists submitted on May 3.	June 15, 2027
Organization submits the auditor-locked commercial, Exchange, Medicaid and Medicare IDSS submission, with attestation, to NCQA *on Tuesday**, June 15, by 9 pm ET.***	June 15, 2027
Organization submits patient-level detail file, for Medicare products only, to designated CMS contractor *on Tuesday**, June 15, by 9 pm ET.*** ***Note:*** *Star rating results will be affected if PLD submission deadline is not met. Ensure that all Medicare plans submit PLDs after approval.*	June 15, 2027
Licensed Organization submits commercial, Exchange, Medicaid and Medicare Final Audit Reports to NCQA.	July 15, 2027