CMS Audit & Oversight Calendar (2025–26)

Full-spectrum audit types, timelines, and operational triggers to help payers prep

When most health plans hear “CMS audit,” they think of Program Audits. But CMS oversight spans a much broader landscape, including data validation, delegation oversight, RADV, and targeted Focus Audits triggered by complaints or reporting inconsistencies. Each audit type carries unique timelines, deliverables, and risks, but they’re all interconnected.

To stay ahead, audit and compliance leaders must understand how these audits overlap, where they originate, and how preparation for one type strengthens readiness for others.

The table below maps the major CMS and related audit types your health plan may face in 2025 and 2026.

Audit Categories Covered

Audit Type	Description
Program Audits	Standard audit covering CDAG, ODAG, SNP-MOC, CPE, FWA
Focus Audits	Triggered by complaints or prior findings (e.g. Timeliness, Denials)
Validation Audits	Follow-up on CAPs or Conditions from previous audits
RADV Audits	Risk Adjustment Data Validation for MA coding accuracy
HPMS Data Validation Audits	Random sampling of CMS-submitted data for accuracy and process integrity
TMPA & Formulary Audits	Transition and formulary accuracy monitoring (Part D plans)
State Audits	State-specific oversight for Duals, Medicaid plans, or SNPs
Delegation Oversight Audits	CMS or internal audits of FDRs and delegated entities
Ad hoc Compliance Reviews	CMS-initiated investigations based on emerging risks or news triggers

Year-Round Timeline with Audit Events Layered

Month	Program Audits	Focus Audits	RADV / HPMS Validation	Other Events
Jan	Internal readiness	--	RADV prep (MAO sample)	Medicaid-specific audit prep
Feb	Audit notices begin	--	Data submission due	TMPA monitoring
Mar	Universe generation	--	--	Internal delegation audit planning
Apr	Fieldwork begins	Targeted audits begin	--	CMS formulary testing (Part D)
May–Jul	Audit fieldwork	Complaint-driven audits	--	State oversight requests
Aug–Oct	CAPs, Conditions	--	HPMS data validation	CMS releases Part C & D reporting updates
Nov–Dec	Validation audits	Focus audit closeouts	RADV retrospective prep	Annual audit summary + mock audits

Dependencies and Interactions

Not all audits are isolated.

- A Program Audit may trigger a Validation Audit.
- A complaint may lead to a Focus Audit, followed by scrutiny of your HPMS reporting accuracy.
- Poor universe file formatting could trigger a documentation review or delegate audit.

What health plans must do

- Keep shared ownership across departments
- Use dashboards that map audit relationships and CAP overlaps
- Link RADV, FDR audits, and reporting validation into your CMS audit readiness workflows

Audit season never ends. Your readiness shouldn't either.

Inovaare's platform powers complete audit orchestration, from building clean universes and simulating CMS logic to managing CAPs, FDR oversight, and validation prep.

Whether it's Program Audits, Focus Audits, RADV, or HPMS reviews, we're ready to support your audit operations all year long.