

Dear Providers,

It is my pleasure to introduce you to the 2025 Meridian Medicaid Pay for Performance (P4P) Program. Our P4P program is a pay-for-performance incentive that rewards providers for delivering quality preventive healthcare services. Incentives range from \$50 to \$120 for services such as immunizations and chronic condition management.

Programs like this have made Meridian a leader in healthcare innovation, driven by our partnerships to provide whole-person care and transform the health of the community, one person at a time. We thank you for your continued support and dedication to our members.

Sincerely,

A handwritten signature in cursive script that reads 'Pmgraham'.

Patricia Graham
President, CEO
Meridian

Effective January 1, 2025

In 2025, the Meridian P4P program will follow a threshold model in which the incentive amount per gap closure will be paid to in-network Medicaid primary care providers (PCP) after their assigned membership reaches set completion rates.

The grids below outline the benchmarks to meet for the 50th, 75th, and 90th percentile and applicable incentive amounts for each measure included in the 2025 program. Each measure will be calculated and rewarded individually.

Medicaid Incentive Amounts

HEDIS® Measure	Abbreviation	50th Percentile	75th Percentile	90th Percentile
Asthma Medication Ratio	AMR	\$50	\$75	\$120
Breast Cancer Screening	BCS	\$50	\$75	\$120
Controlling High Blood Pressure	CBP	\$50	\$75	\$120
Hemoglobin A1c Control for Patients with Diabetes	GSD	\$50	\$75	\$120
Chlamydia Screening in Women (Total)	CHL Total	\$50	\$75	\$120
Childhood Immunizations - Combo 10	CIS 10	\$50	\$75	\$120
Immunizations for Adolescents - Combo 2	IMA 2	\$50	\$75	\$120
Kidney Health Evaluation for Patients with Diabetes	KED	\$50	\$75	\$120
Lead Screening in Children	LSC	\$50	\$75	\$120
Well-Child Visits in the First 15 Months of Life	W30 Rate 1	\$50	\$75	\$120

Medicaid Target Compliance Percentage

HEDIS® Measure	Abbreviation	50th Percentile	75th Percentile	90th Percentile
Asthma Medication Ratio	AMR	66.24%	72.22%	76.65%
Breast Cancer Screening	BCS	52.68%	59.51%	63.48%
Controlling High Blood Pressure	CBP	64.48%	69.37%	72.75%
Hemoglobin A1c Control for Patients with Diabetes	GSD	57.42%	60.83%	63.50%
Chlamydia Screening in Women (Total)	CHL Total	55.95%	64.37%	69.07%

HEDIS® Measure	Abbreviation	50th Percentile	75th Percentile	90th Percentile
Childhood Immunizations - Combo 10	CIS 10	27.49%	34.79%	42.34%
Immunizations for Adolescents - Combo 2	IMA 2	34.30%	41.61%	48.66%
Kidney Health Evaluation for Patients with Diabetes	KED	36.46%	45.11%	49.72%
Lead Screening in Children	LSC	63.84%	71.11%	79.51%
Well-Child Visits in the First 15 Months of Life	W30 Rate 1	60.38%	64.99%	69.67%

Comprehensive Child and Adolescent Care		
Service	Procedure	Performance Criteria*
Childhood Immunizations Status - Combination 10	4 Diphtheria, Tetanus and Acellular Pertussis (DTaP)	Children two years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.
	3 Polio (IPV/OPV)	
	1 Measles, Mumps and Rubella (MMR)	
	3 Haemophilus Influenza Type B (HiB)	
	3 Hepatitis B (HepB)	
	1 Chicken Pox (VZV)	
	4 Pneumococcal Conjugate (PCV)	
	1 Hepatitis A (HepA)	
	2 or 3 Rotavirus (RV)	
	2 Influenza (Flu)	
Immunizations for Adolescents - Combination 2	1 Meningococcal	Adolescents 13 years of age who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their thirteenth birthday.
	1 Tetanus, Diphtheria Toxoids and Acellular Pertussis (Tdap)	
	Human Papillomavirus Series (HPV)	
Lead Screening in Children	Lead Capillary or Venous Blood Test	Children two years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.
Well-Child Visits in the First 15 Months of Life	Six or More Well-Child Visits in the First 15 Months of Life	Children who turned 15 months old during the measurement year and had six or more well-child visits with a primary care provider (PCP) during their first 15 months of life.

Prevention and Screening		
Service	Procedure	Performance Criteria*
Breast Cancer Screening (Electronic Only)	Mammogram	Women 50 – 74 years of age who had a mammogram to screen for breast cancer any time on or between October 1 two years prior to the measurement year and December 31 of the measurement year.
Chlamydia Screening in Women Ages 16-24 Years Old	Screening for Chlamydia	Women 16 – 24 years of age who were recommended for routine chlamydia screening, identified as sexually active and who had at least one test for chlamydia during the measurement year.
Controlling High Blood Pressure	Screening for High Blood Pressure**	Members 18 – 85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) as of the latest reading of the measurement year
Asthma Medication Ratio	Ratio of controller medications to total asthma medications	Members 5 – 64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Diabetes Care		
Service	Procedure	Performance Criteria*
Glycemic Status Assessment for Patients with Diabetes	HbA1c Test**	Members 18-75 years of age with diabetes (type 1 and type 2) whose most recent glycemic status was at the following levels during the measurement year: <ul style="list-style-type: none"> ▪ HbA1c or glucose management indicator control (<8.0%) ▪ HbA1c or glucose management indicator poor control (>9.0%)
Kidney Health Evaluation for Patients with Diabetes	Estimated Glomerular Filtration Rate (eGFR) and Urine Albumin-Creatinine Ration (uACR) tests	Members 18-85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR), during the measurement year.

Program Information:

Results may be faxed to **1-833-667-1532** or sent to our secure email **MIHEDIS@mhplan.com**. All procedures must be completed within strict HEDIS® and Michigan Department of Health and Human Services (MDHHS) guidelines. For a complete list of covered CPT codes for these measures or to view the Drug Formulary for a list of covered drugs, visit **mimeridian.com**. For more information, contact your local Provider Network Management Representative or the Provider Services department at **1-888-773-2647**.

** Incentive is paid if the member is adherent to their medications or blood pressure or HbA1c level is controlled as of December 31, 2025.

- Incentives are paid annually upon completion of all qualifying services in compliance with HEDIS® measurement year 2025 guidelines. Unless otherwise noted, one incentive is paid per member per year. Incentives will begin being paid in 2026 after MY25 HEDIS® performance is finalized. Incentive is paid to the assigned PCP at the time of payment.
- Measures are subject to change based on HEDIS® adjustments.
- Meridian maintains the right to modify or discontinue the P4P Program at any time. Program funding for all lines of business is subject to change and updating at any time during the program year. Payments will not exceed budgeted amounts. Payments will be indexed as needed.