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Meridian Medicaid Newsletter

ISSUE I | 2025



mimeridian.com





Quality Improvement Program Evaluation

The Quality Improvement Program (QIP) is designed to give you quality healthcare and great customer service. Our QIP team sets goals and makes sure they are met each year. We send members and providers a survey every year to help us improve care and customer service. If you would like to review the Annual Evaluation, please visit **mimeridian.com** and go to the Quality Improvement page.



Why Surveys are Important!

Member surveys are key because they give our members a chance to share their voice with the health plan. You can help Meridian understand what is working well and what could be better. Your feedback helps shape the services, benefits, and care you get. When more members speak up, health plans can take action to make things better for everyone. Your voice matters!



Language Services Survey

We want to hear from you!
You or a loved one may get
a survey about using
Meridian's translation
services. Please complete
the survey once it arrives —
we value your feedback!



Oral Screenings for Your Baby

Hey, Meridian families! Did you just welcome a little one? Your child's doctor can check your baby's mouth for early oral screenings! Tiny teeth may not be in yet, but they help with speaking, smiling, and chewing — key parts of your child's health. At Meridian, we care about your baby's well-being. We want to make sure you have all you need to keep them happy and healthy. Be sure to ask your child's doctor about an oral screening at your next visit! Have questions? We're here to help!



Lead Screening for Children

Did you know that lead poisoning in kids may not have any visible signs, but it can lead to serious health concerns? Lead found in a baby's blood can lead to delays in how they grow, cause speech or hearing problems, impact how they behave, and more. Meridian wants to remind you to make sure your child has a blood lead test once at age 12 months and again at 24 months of age.





Fraud, Waste, and Abuse

Healthcare fraud is a crime that affects us all. You should review the information on the Michigan Department of Health and Human Services-Office of Inspector General (MDHHS-OIG) website at **michigan.gov/mdhhs/inside-mdhhs/office-of-inspector-general/contact-us**. There you will find common schemes that might affect you or your loved ones.



If you feel you have been a victim of healthcare fraud, contact MDHHS-OIG or Meridian for help.



Check if Your Provider is Out of Network



Effective May 1, 2025, Meridian will require a Prior Authorization (PA) to see out-of-network providers.

This change will help make sure that you get the highest quality of care. For more information about this change, visit: **mimeridian.com** or call Member Services at **1-888-437-0606** (TTY: **711**).



Member Rights and Responsibilities

You have rights and responsibilities as a Meridian member. Our staff and providers must respect your rights. A list of Member Rights and Responsibilities are in the Member Handbook. The Member Handbook can be found at **mimeridian.com**. You can also call and ask us to mail you a copy. Please call **1-888-437-0606** (TTY: **711**) if you want a printed copy or have questions.



Join the Consumer Advisory Committee!

The Consumer Advisory Committee (CAC) gives members like you a chance to give us input on any quality and service issues you may have. You can also learn about other topics, too. Members who get active with the CAC will also get a \$25 reward. If you have been with the plan for six months or longer and would like to learn more, call our CAC Outreach Team at **1-313-324-3807** (TTY: **711**).



During CAC meetings, the Meridian team is there to listen to your feedback about your time with our health plan, so we can learn how we can serve you better.



Meridian and Your Prescription Needs

Meridian uses clinical help from providers, pharmacists, and other healthcare experts to come up with a safe drug list called a Formulary.

The Meridian Formulary is a generic plan. This means that generic drugs are given instead of brand name drugs when they can. Meridian covers many drugs without restrictions. Some drugs do have limits or restrictions. Here are some types of limits you will see on the Formulary:

- **Prior Authorization (PA):** Gives facts about your health and why you need the drug. The drug must be reviewed and approved by our pharmacy team before it can be filled.
- **Step Therapy (ST):** A first-line drug must be tried before you can get a different drug for the same reason.
- **Quantity Limits (QL):** A limit of how much of a drug you can safely take each month.

Your provider needs to fill out a PA form and send it to Meridian if you need a drug that has a PA limit. An Exception form is required if you need a drug that is not on the Formulary. Your provider can find these forms on our website at mimeridian.com.



Meridian does not cover drugs for:

- Cosmetic purposes.
- Sexual dysfunction.
- Experimental purposes.
- Drugs that are not licensed in the United States.



You can see the Meridian Formulary at mimeridian.com. You can also call Member Services at **1-888-437-0606** (TTY: **711**) for a printed copy. Call the pharmacy help desk at **1-866-984-6462** (TTY: **711**) if you have any questions about what drugs we cover.

Meridian complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Meridian does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity).

Meridian:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Meridian Member Services.

If you believe that Meridian has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity), you can file a grievance with our 1557 Coordinator. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our 1557 Coordinator is available to help you.

Mail: 1557 Coordinator
P.O. Box 31384
Tampa, FL 33631

Telephone: **1-855-577-8234** (TTY users should call **711**)

Fax: **1-866-388-1769**

Email: **SM_Section1557Coord@centene.com**

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at **<http://www.hhs.gov/ocr/office/file/index.html>**.

This notice is available at Meridian website:

<https://www.mimeridian.com/members/medicaid/resources/faqs.html>