

Meridian Pay for Performance (P4P) Program



Dear Providers,

It is my pleasure to introduce you to the 2026 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 black ink that reads 'Patricia Graham'.

Patricia Graham
President, CEO
Meridian

Effective January 1, 2026

In 2026, 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 2026 program. Each measure will be calculated and rewarded individually.

Medicaid Incentive Amounts

HEDIS® Measure	Abbreviation	50 th Percentile	75 th Percentile	90 th Percentile
Breast Cancer Screening	BCS	\$50	\$75	\$120
Controlling High Blood Pressure	CBP	\$50	\$75	\$120
Glycemic Status Assessment	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 30 Months of Life	W30 Rate 1	\$50	\$75	\$120

Medicaid Target Compliance Percentage

HEDIS® Measure	Abbreviation	50 th Percentile	75 th Percentile	90 th Percentile
Breast Cancer Screening	BCS	55.87%	61.43%	66.31%
Controlling High Blood Pressure	CBP	67.88%	71.34%	75.43%
Glycemic Status Assessment	GSD	60.58%	64.69%	67.40%
Chlamydia Screening in Women (Total)	CHL Total	56.30%	65.47%	70.67%
Childhood Immunizations - Combo 10	CIS 10	23.89%	28.86%	34.79%
Immunizations for Adolescents - Combo 2	IMA 2	34.14%	40.19%	47.16%
Kidney Health Evaluation for Patients with Diabetes	KED	42.13%	48.71%	54.15%
Lead Screening in Children	LSC	69.96%	76.34%	82.86%
Well-Child Visits in the First 30 Months of Life	W30 Rate 1	63.38%	67.49%	71.71%

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)	
	2 or 3 Human Papillomavirus (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	Mammogram	Members 52 – 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 People Age 16-24 Years Old	Screening for Chlamydia	Members 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
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) that had a controlled HbA1c or glucose management indicator level (<8.0%) as of the last reading of the measurement year.
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 either a urine albumin-creatinine ratio (uACR) or separate urine albumin and urine creatinine testing (albumin and creatinine tests must be within 3 days of each other) and performed 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 on the Meridian Provider Incentive Programs, please contact Quality Improvement or your Provider Network Management Representative.

** Incentive is paid if the member is adherent to their medications or blood pressure or HbA1c level is controlled as of December 31, 2026.

- Incentives are paid annually upon completion of all qualifying services in compliance with HEDIS® measurement year 2026 guidelines. Unless otherwise noted, one incentive is paid per member per year. Incentives will begin being paid in 2026 after MY26 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.