

Pay for Performance (P4P) Program

Dear Providers,

It is my pleasure to introduce you to the Meridian Pay for Performance (P4P) Program, formerly known as the Healthcare Effectiveness Data and Information Set (HEDIS®) Bonus Program or Partnership for Quality (P4Q) Program. As one of the fastest growing Medicaid managed care organizations, we know our success is based on the relationships we have with our providers. One of the ways Meridian cultivates these relationships is by offering several distinct incentive programs that differentiate us from other plans. Our P4P program is a pay-for-performance incentive that rewards providers for delivering quality preventive healthcare services. Incentives range from \$5 to \$200 for services such as immunizations, well-child visits, prenatal and postpartum care, management of chronic conditions, and more.

Programs like this have made Meridian an industry leader and align with our mission to help those eligible for government-sponsored healthcare plans live better, healthier lives. We thank you for your continued support and dedication to our members.

Sincerely,

A handwritten signature in black ink that reads "Pmgraham".

Patricia Graham
President, CEO
Meridian

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Effective January 1, 2023

In 2023, the Meridian P4P program will follow a threshold model in which the incentive amount per hit will be paid to in-network Medicaid primary care providers (PCP) after their assigned membership reaches set completion rates. We believe that our new incentive structure will better support you and your healthcare team in caring for our members.

The grids below outline the benchmarks to meet for the 25th, 50th, and 75th percentile and applicable incentive amounts for each measure included in the 2023 program. Each measure will be calculated and rewarded individually. Additional details on the measures included in the program can be found starting on page 4.

Medicaid Incentive Amounts

HEDIS® Measure	25th Percentile	50th Percentile	75th Percentile
Adults' Access to Preventative Ambulatory Health Services (20-44 years)	\$5	\$10	\$15
Adults' Access to Preventative Ambulatory Health Services (45-64 years)	\$5	\$10	\$15
Asthma Medication Ratio	\$25	\$30	\$40
Breast Cancer Screening	\$25	\$30	\$40
Controlling High Blood Pressure	\$30	\$40	\$50
Cervical Cancer Screening	\$40	\$55	\$70
Blood Pressure Control for Patients with Diabetes	\$30	\$40	\$50
Eye Exam for Patients with Diabetes	\$40	\$55	\$70
Hemoglobin A1c Control for Patients with Diabetes	\$30	\$40	\$50
Chlamydia Screening in Women (16-20 years)	\$40	\$55	\$70
Chlamydia Screening in Women (21-24 years)	\$40	\$55	\$70
Childhood Immunizations - Combo 10	\$40	\$55	\$70
Healthy Michigan Plan Health Risk Assessment Annual Completion	\$25	\$30	\$40
Immunizations for Adolescents - Combo 2	\$25	\$30	\$40
Lead Screening in Children	\$25	\$30	\$40
Prenatal and Postpartum Care - Postpartum Care	\$100	\$150	\$200
Prenatal and Postpartum Care - Timeliness of Prenatal Care	\$100	\$150	\$200
Well-Child Visits in the First 30 Months of Life - 6+ visits in the first 15 months of life	\$40	\$55	\$70

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Well-Child Visits in the First 30 Months of Life - 2 visits from 15-30 months of life	\$25	\$30	\$40
Child and Adolescent Well-Care Visits	\$25	\$30	\$40
Kidney Health Evaluation for Patients with Diabetes	\$5	\$10	\$15

Medicaid Target Compliance Percentage

HEDIS® Measure	25th Percentile	50th Percentile	75th Percentile
Adults' Access to Preventative Ambulatory Health Services (20-44 years)	67.30%	73.61%	77.97%
Adults' Access to Preventative Ambulatory Health Services (45-64 years)	76.90%	82.30%	85.72%
Asthma Medication Ratio	59.94%	64.26%	69.67%
Breast Cancer Screening	45.23%	50.95%	56.52%
Controlling High Blood Pressure	54.50%	59.85%	65.10%
Cervical Cancer Screening	52.39%	57.64%	62.53%
Blood Pressure Control for Patients with Diabetes	55.47%	60.83%	67.40%
Eye Exam for Patients with Diabetes	45.01%	51.09%	56.51%
Hemoglobin A1c Control for Patients with Diabetes	43.80%	50.12%	54.26%
Chlamydia Screening in Women (16-20 years)	44.53%	50.14%	59.61%
Chlamydia Screening in Women (21-24 years)	55.96%	61.34%	66.59%
Childhood Immunizations - Combo 10	28.95%	34.79%	42.09%
Healthy Michigan Plan Health Risk Assessment Annual Completion	8.00%	10.00%	12.00%
Immunizations for Adolescents - Combo 2	30.41%	35.04%	41.12%
Lead Screening in Children	53.28%	63.99%	72.67%
Prenatal and Postpartum Care - Postpartum Care	72.87%	77.37%	81.27%
Prenatal and Postpartum Care - Timeliness of Prenatal Care	81.27%	85.40%	88.86%
Well-Child Visits in the First 30 Months of Life - 6+ visits in the first 15 months of life	49.88%	55.72%	61.19%
Well-Child Visits in the First 30 Months of Life - 2 visits from 15-30 months of life	60.53%	65.83%	72.24%
Child and Adolescent Well-Care Visits	43.50%	48.93%	57.44%
Kidney Health Evaluation for Patients with Diabetes	45.01%	51.09%	56.51%

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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)	
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.
Well Child Visits for Age 15-30 Months	Two or More Well-Child Visits between 15-30 Months of Life	Children who turned 30 months old during the measurement year and had two or more well-child visits with a PCP between their 15-month birthday and 30-month birthday.

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Comprehensive Child and Adolescent Care

Service	Procedure	Performance Criteria*
Child and Adolescent Well-Care Visits	Well-Care Visit	Members 3 – 21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.
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.

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.
Cervical Cancer Screening	Cervical Cytology/Testing	Women 21 – 64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> • Women 21 – 64 years of age who had cervical cytology performed within the last three years. • Women 30 – 64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years. • Women 30 – 64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last five years.
Chlamydia Screening in Women Ages 16-20 Years Old	Screening for Chlamydia	Women 16 – 20 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.
Chlamydia Screening in Women 21-24 Years Old	Screening for Chlamydia	Women 21 – 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.
Adults' Access to Preventive/Ambulatory Health Services 20-44 Years Old	Ambulatory or Preventive Care Visit	Members 20 – 44 years of age who had an ambulatory or preventive care visit during the measurement year.

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Adults' Access to Preventive/Ambulatory Health Services 45-64 Years Old	Ambulatory or Preventive Care Visit	Members 45 – 64 years of age who had an ambulatory or preventive care visit 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.
Comprehensive Diabetes		
Service	Procedure	Performance Criteria*
Comprehensive Diabetes Care	Eye Exam	Members 18 – 75 years of age with diabetes (type 1 and type 2) that had a retinal eye exam performed during the measurement year.
	Blood Pressure Control (<140/90 mm Hg)**	Members 18 – 75 years of age with diabetes (type 1 and type 2) that had a controlled blood pressure (<140/90 mm Hg) as of the latest reading of the measurement year.
	HbA1c Good Control (<8.0%)**	Members 18 – 75 years of age with diabetes (type 1 and type 2) that had a controlled HbA1c level (<8.0%) as of the latest reading of the measurement year.
Obstetrical Care		
Service	Procedure	Performance Criteria*
Prenatal and Postpartum Care	Timeliness of Prenatal Care Visit	Women who delivered that received a prenatal care visit in the first trimester (280 – 176 days prior to delivery or estimated date of delivery) or within 42 days of enrollment in the organization.
	Postpartum Care Visit	Women who had a postpartum visit on or between seven and 84 days after delivery.
Healthy Michigan Plan (HMP)^		
Service	Procedure	Performance Criteria
Annual Health Risk Assessment (HRA)	Completion of Annual HRA	HMP members 19 – 64 years of age who completed the HMP Health Risk Assessment during the calendar year and had an ambulatory or preventive care visit during the measurement year.

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		<p>One incentive paid per member, per year. Incentive is paid to the in-network provider NPI listed in the Healthy MI HRA. For HRA's completed by health plan staff, the incentive will pay to the member's assigned PCP. The HMP HRA incentive payment will come as a separate payment from other incentive payments.</p>
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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**.

† Plan Definitions:

Medicaid	Meridian Medicaid members
Healthy Michigan Plan	Meridian Medicaid Expansion members

* Incentive is paid upon completion of all qualifying services in compliance with HEDIS® measurement year 2023 guidelines. Unless otherwise noted, one incentive is paid per member, per year. Incentives will begin being paid in 2023. Incentive is paid to the assigned PCP at the time of payment.

** Incentive is paid if the member is adherent to their medications or blood pressure or HbA1c level is controlled as of December 31, 2023.

^ HMP members are eligible to qualify for a 50 percent premium reduction dependent on their income/Federal Poverty Level. Qualification is as follows: The member must attest to a healthy behavior (at the bottom of the HRA) and the provider bills appropriately. Members can complete one HRA every eleven months to qualify.

Meridian maintains the right to modify or discontinue the P4P Program at any time. Meridian will notify providers of any changes or incentive program alterations.

Please note: The Annual Health Michigan HRA Service is the only P4P service in which providers in value-based arrangements will receive P4P incentives.