



777 Woodward Ave., Suite 700  
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1-888-437-0606  
TTY: 711  
mimeridian.com

Effective 9/1/2025, Meridian will require that you obtain prior approval to see an out-of-network Behavioral Health provider. This change will help ensure that you receive the highest quality of care. Key exclusions include emergency room care, urgent care, any service at a Federally Qualified Health Center (FQHC), Rural Health Center (RHC), or Tribal Health Center (THC).

To find out if your Behavior Health provider is in-network, visit [mimeridian.com/members/medicaid.html](https://mimeridian.com/members/medicaid.html) and use the "Find a Provider" tool. This tool will have the most up-to-date information about providers in our network.

If your provider is out of network, you will need to do one of two things:

1. Find a new provider using the "Find a Provider" tool or calling Member Services.
2. Request approval to see an out-of-network provider. Your request for approval is called a Prior Authorization. To request a prior authorization, you must have your provider fill out a Prior Authorization (PA) Request Form and send it to us for approval. When a provider submits a PA form, clinical staff reviews the request(s) and decides if:
  - It is medically necessary, which means that the healthcare services or supplies needed to diagnose or treat an illness, injury, condition, disease, or its symptoms meet accepted standards of medicine.
  - You can get the care from a provider in our network.
  - Seeking services out of network may require PA. All out-of-state services require prior authorization.

If it's not approved, we will notify your doctor and send you a written notice of the decision.

For questions regarding this message or to request a printed copy of this notice, free of charge, please call Meridian Member Services at 888-437-0606 (TTY: **711**), Monday through Friday, 8 a.m. to 6:30 p.m.