



2025 Incentive Program

1/1/2025-12/31/2025

Pay for Performance

| | |
|-------------------------|---|
| Objective | Enhance quality of care through a focus on preventive and screening services which align with Company goals while promoting engagement with our members |
| Eligible Members | Medicaid PSHP Members who have been formally assigned to a Provider |
| Performance Incentive | Each measure has its own incentive amount paid after achieving the minimum target score |
| Measures | Measures selected by Peach State based on State targets and NCQA focus |
| Measurement Time Period | HEDIS Calendar year January 1 – December 31 – But can adjust targets off cycle based on updates from NCQA and the State |
| Reports and Payments | Three cycles for reporting with interim payouts and annual reconciliation. |

Incentive Program

Other Key Provisions

- Pays to each TIN.
- No contract amendment needed.
- Monthly gap and member detail reports can be viewed through Provider Analytics which can be accessed through the provider Portal.
- Incentives are paid on each compliant member event once the target has been met for that specific measure.
- Each measure is evaluated independently, and a TIN can qualify and receive an incentive payment for one, multiple or all measures.
- Three tier targets are set by the plan based on low, medium, and high thresholds and each threshold pays an increased percentage of the incentive dollar amount.
- Opportunity to earn additional incentive if they are a PCMH as of 12/31/25.
- Opportunity to earn additional incentive if they allow EMR access as of 12/31/25.
- No claw back feature – No recoupment of past payments if scores drop in later periods.
- The plan can modify or discontinue the program at any time. If the Program is revised, the Plan will send a notice to P4P providers by email.

Pediatric 2025 P4P Program

Measures, Payouts, and Target Rates

| Number | Abb. | MeasureName | Payout | Target 1 | Target 2 | Target 3 |
|--------|-----------|--|--------|----------|----------|----------|
| 1 | ADD | Follow-Up Care for Children Prescribed ADHD Medication - Continuation and Maintenance Phase | \$50 | 56.9% | 64.8% | 72.0% |
| 2 | APM | Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose and Cholesterol Testing (Total) | \$50 | 39.7% | 49.9% | 62.5% |
| 3 | APP | Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (Total) | \$50 | 62.5% | 72.1% | 82.1% |
| 5 | CIS7 | Childhood Immunization Status - Combo 7 | \$10 | 59.3% | 65.9% | 73.9% |
| 6 | CIS10 | Childhood Immunization Status - Combo 10 | \$140 | 32.3% | 39.3% | 50.3% |
| 7 | IMA1 | Immunizations for Adolescents - Combination 1 | \$5 | 83.2% | 93.4% | 96.1% |
| 8 | IMA2 | Immunizations for Adolescents - Combination 2 | \$95 | 39.3% | 46.6% | 56.6% |
| 9 | WCC | Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI percentile (Total) | \$5 | 84.8% | 94.1% | 99.2% |
| 10 | WCV | Child and Adolescent Well-Care Visits (Total) | \$5 | 53.6% | 65.4% | 70.7% |
| 11 | W30 1-15 | Well-Child Visits in the First 30 Months of Life (First 15 Months) | \$50 | 59.4% | 69.2% | 75.6% |
| 12 | W30 15-30 | Well-Child Visits in the First 30 Months of Life (15 Months-30 Months) | \$50 | 70.1% | 80.2% | 86.1% |

Family Practice 2025 P4P Program

Measures, Payouts and Target Rates

| Number | Abb. | MeasureName | Payout | Target 1 | Target 2 | Target 3 |
|--------|--------------|--|--------|----------|----------|----------|
| 1 | ADD | Follow-Up Care for Children Prescribed ADHD Medication - Continuation and Maintenance Phase | \$50 | 56.9% | 64.8% | 72.0% |
| 2 | APM | Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose and Cholesterol Testing (Total) | \$50 | 39.7% | 49.9% | 62.5% |
| 3 | APP | Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (Total) | \$50 | 62.5% | 72.1% | 82.1% |
| 4 | CIS7 | Childhood Immunization Status - Combo 7 | \$10 | 59.3% | 65.9% | 73.9% |
| 5 | CIS10 | Childhood Immunization Status - Combo 10 | \$140 | 32.3% | 39.3% | 50.3% |
| 6 | IMA1 | Immunizations for Adolescents - Combination 1 | \$5 | 83.2% | 93.4% | 96.1% |
| 7 | IMA2 | Immunizations for Adolescents - Combination 2 | \$95 | 39.3% | 46.6% | 56.6% |
| 8 | WCC | Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI percentile (Total) | \$5 | 84.8% | 94.1% | 99.2% |
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| 10 | W30 1-15 | Well-Child Visits in the First 30 Months of Life (First 15 Months) | \$50 | 59.4% | 69.2% | 75.6% |
| 11 | W30 15-30 | Well-Child Visits in the First 30 Months of Life (15 Months-30 Months) | \$50 | 70.1% | 80.2% | 86.1% |
| 12 | GSD | Glycemic Status Assessment for Patients With Diabetes—Glycemic Status (<8%) | \$100 | 62.5% | 67.6% | 71.5% |
| 13 | BPD | Blood Pressure Control for Patients With Diabetes | \$100 | 73.3% | 79.7% | 85.3% |
| 14 | EED | Eye Exam for Patients With Diabetes | \$25 | 57.1% | 65.0% | 72.0% |
| 15 | KED | Kidney Health Evaluation for Patients With Diabetes | \$100 | 41.0% | 50.0% | 57.7% |
| 16 | CBP | Controlling High Blood Pressure | \$150 | 69.4% | 75.3% | 80.7% |
| 17 | BCS | Breast Cancer Screening | \$50 | 57.2% | 64.6% | 71.4% |
| 18 | CCS | Cervical Cancer Screening | \$50 | 60.0% | 68.0% | 75.4% |
| 19 | PCE-Sys | Pharmacotherapy Management of COPD Exacerbation—Systemic Corticosteroid | \$25 | 74.8% | 82.7% | 90.8% |
| 20 | PCE-Bronch | Pharmacotherapy Management of COPD Exacerbation—Bronchodilator | \$25 | 88.1% | 94.5% | 97.9% |
| 21 | SAA | Adherence to Antipsychotic Medications for Individuals With Schizophrenia | \$50 | 66.5% | 74.1% | 82.8% |
| 22 | SSD | Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications | \$100 | 87.5% | 91.5% | 95.2% |
| 23 | SPC - RATE 1 | Statin Therapy for Patients With Cardiovascular Disease - Received Statin Therapy (Total) | \$100 | 87.8% | 91.0% | 93.8% |
| 24 | SPC - RATE 2 | Statin Therapy for Patients With Cardiovascular Disease - Statin Adherence 80% (Total) | \$100 | 75.4% | 82.0% | 89.7% |
| 25 | SPD - RATE 1 | Statin Therapy for Patients With Diabetes - Received Statin Therapy | \$100 | 70.6% | 75.0% | 79.4% |
| 26 | SPD - RATE 2 | Statin Therapy for Patients With Diabetes - Statin Adherence 80% | \$100 | 72.1% | 78.9% | 87.7% |

Scorecard Example

(for illustrative purposes only)

***Payout Calculation: Number Compliant * Incentive Amount * Percentage Payout = Bonus Earned**

| Measures | Incentive Amount | Qualified | Compliant | Quality Score | Percentage Payout | | | Target Achieved | Bonus Earned | Maximum Potential Bonus |
|---|------------------|-----------|-----------|---------------|-------------------|----------|----------|-----------------|--------------|-------------------------|
| | | | | | Target 1 | Target 2 | Target 3 | | | |
| Child and Adolescent Well-Care Visits (WCV) | \$5 | 625 | 468 | 74.9% | 53.6% | 65.4% | 70.7% | Target 3 | \$2,340 | \$3,125 |
| Childhood Immunization Status Combo 10 (CIS) | \$140 | 250 | 85 | 34.0% | 32.3% | 39.3% | 50.3% | Target 1 | \$5,950 | \$35,000 |
| Controlling High Blood Pressure (CBP) | \$150 | 350 | 181 | 51.7% | 69.4% | 75.3% | 80.7% | None | - | \$52,500 |
| Breast Cancer Screening (BCS) | \$50 | 480 | 326 | 67.9% | 57.2% | 64.6% | 71.4% | Target 2 | \$12,225 | \$24,000 |
| Follow-up Care for Children Prescribed ADHD Medication (ADD) | \$50 | 520 | 381 | 73.3% | 56.9% | 64.8% | 72.0% | Target 3 | \$19,050 | \$26,000 |
| Glycemic Status Assessment for Patients With Diabetes—Glycemic Status (<8%) (GSD) | \$100 | 725 | 501 | 69.1% | 62.5% | 67.6% | 71.5% | Target 2 | \$37,575 | \$72,500 |

***Calculation breakdown example:**

1. WCV: $468 * \$5 * 100%$ (Target 3 payout percentage) = \$2,340
2. CIS: $85 * \$140 * 50%$ (Target 1 payout percentage) = \$5,950
3. CBP: $181 * \$150 * 0$ (Quality score below Target 1) = \$0
4. BCS: $326 * \$50 * 75%$ (Target 2 payout percentage) = \$12,225
5. ADD: $381 * \$50 * 100%$ (Target 3 payout percentage) = \$19,050
6. GSD: $501 * \$100 * 75%$ (Target 2 payout percentage) = \$37,575

*The total payout for this example is \$77,140 out of a maximum potential bonus of \$213,125.

Additional/Enhanced PCMH Incentive



Pay additional incentive to any PCP TIN tied to a PCMH address/location as of 12/31/25.



Pay once per year in the final payout – July of the following year with the final program payment.



Pay \$10 per compliant member for those measures hitting the target 3 threshold.



Providers will need to submit certificates to their Provider Relations representative, Quality Practice Advisor, or Practice Quality Liaison by Q1 2026 for final payout.

Additional/Enhanced EMR Incentive



Pay additional incentive to any PCP TIN who allows EMR access via data sharing or flat file as of 12/31/25.



To qualify a TIN must reach Target 3 in a P4P measure in 2025.



Pays \$10 per **unique** compliant member in the supplemental data file for measures hitting the Target 3 threshold.



Pays once per year in the final payout of the following year - July 2026.

Reports and Payments

All reports and payouts will be based on year to date (YTD) results. If prior YTD payments have been made for the year, they will be deducted from the amount due.

- The **first** payout will cover January – June
- The **second** payout will cover January – September
- The **third** payout will cover January – December

Payouts will be based using the amounts noted on slides 4-5 for the measures meeting one of three targets. Providers have 30 days post payment to dispute any results, otherwise payments will be deemed accepted and final.

Of the dollar amount:

- Target 1 pays 50%,
- Target 2 pays 75%, and
- Target 3 pays 100%.

It is the Plan's discretion to discontinue or make changes to the program at any time.