

Physician Pay for Value (P4V) Program

MDwise is committed to providing high-quality, cost-effective health care to our members. By establishing our P4V Program, MDwise will maintain a strong partnership with our Primary Medical Providers (PMPs), resulting in improved quality and access to health care services. The goal of the program is to improve access and health outcomes for all members. *(The 2025 P4V Program is outlined below.)*

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PMPs will be incentivized to reach specific quality and access metrics. The P4V allows PMPs to receive an award per member included in the specified HEDIS denominators for Healthy Indiana Plan (HIP) members and Hoosier Healthwise (HHW) members, to be awarded to individual providers based upon their attributed MDwise membership and achievement of the defined metrics. The actual award is subject to the following conditions:

- MDwise must meet its overall performance benchmarks for the Pay for Value Program in order for providers to receive their incentive.
- The provider is not participating in another Value-Based Agreement or Value-Based Payment Arrangement.
- Per state requirements, providers that may serve as PMPs include internal medicine physicians, general practitioners, family medicine physicians, pediatricians, obstetricians, gynecologists and endocrinologists if primarily engaged in internal medicine with assigned membership. MDwise will also allow nurse practitioners and physician assistants with a panel of MDwise members to participate.
- The PMP must be contracted with MDwise for at least six (6) months of the measurement year and be contracted at the time of the payment.
- The PMP must have an annual average of 50 attributed members per month, with those members assigned to the PMP for at least six (6) months of the measurement year.
- The PMP must have an open panel to accept new MDwise HHW and HIP members at least six (6) months of the measurement year. Please see FAQ #1 below for further details.
- The PMP must participate in both HHW and HIP. Please see FAQ #2 below for further details.
- Ninety percent (90%) of all claims must be submitted electronically during the measurement year.

Measures, Performance Goals and Awards

The attached table describes the Program's measures, performance goals and awards.

- Measures and awards are reviewed periodically to ensure they bring the expected value to our members. These goals may be adjusted annually if warranted by MDwise.
- Failure to meet performance goals in a calendar year result in the provider being ineligible for performance incentives the following year. (i.e., not meeting quality goals in CY25, resulting in no opportunity to earn in CY26)

Value, Proposition, Payment and Distribution

The P4V program calculation and payments will be distributed as follows:

- MDwise will determine the provider's score for each HEDIS measure.
- MDwise will compare the provider score to the set goal for the measurement year.
- MDwise will calculate the per-member HEDIS denominator of membership as of December 31 of the measurement year.
- MDwise will pay these annual metrics within six (6) months of the end of the measurement year. Payments will be made directly to the PMP group NPI.

Physician Pay for Value (P4V) FAQ

Q: The requirement states that a PMP must have an open panel to accept new patients for at least 6 months of the year. We have panels that are consistently full and are unable to accept new patients but are technically 'open' as opposed to being 'on hold.' If the restriction is solely regarding providers being on 'hold', how will MDwise be able to tell the difference?

A: MDwise will track panel status in the Provider Repository.

Q: The requirement states that a PMP must participate in both HHW and HIP. Does this apply to pediatric providers as PMPs in the HIP program or internal medicine PMPs in HHW?

A: The requirement does not apply to all provider types. If a provider's practice area is not included in both programs, that fact alone will not disqualify a provider from receiving P4V payments. For example, if a HHW pediatrician does not participate in the HIP program because members are all 19 years old or older, that provider will still be able to earn P4V payments. Likewise, if a HIP internal medicine physician does not participate in HHW because members are mostly children, that provider will still be able to earn P4V payments.

MDwise Physician Pay for Value (P4V) Metrics

Hoosier Healthwise

Quality Measures	HEDIS Specifications	2025 Goal	Provider Award per Member (HEDIS Denominator Specific)
Well Child	WCV	Achieve 75th %ile for children ages 3-21 who had a well-child visit	\$15
Well Child	W30	Achieve 75th %ile for children with 6 or more visits in the first 15 months of life	\$30
Lead Screening	LSC	Achieve 50th %ile for percentage of members under 2 years of age who had a lead screening	\$10
Combo 10 CIS	CIS	Achieve 50th %ile for percentage of members who had Childhood Immunization Status Combo 10	\$20

Healthy Indiana Plan

Quality Measures	HEDIS Specifications	2025 Goal	Provider Award per Member (HEDIS Denominator Specific)
Adult Visits	AAP	Achieve 75th %ile for percentage of members 20-44 years of age who had an ambulatory care visit	\$15
Adult Visits	AAP	Achieve 75th %ile for percentage of members 45-64 years of age who had an ambulatory care visit	\$15
Glycemic Status	GSD	Achieve 50th %ile for percentage of Glycemic Status assessment for members with Diabetes below 8.0	\$10
Tobacco Cessation		Screen at least 50 unique assigned members	\$15

MDwise will make no specific payment directly or indirectly to a physician or physician group as an inducement to reduce or limit medically necessary services furnished to an individual member per section 1903(m)(2)(A)(X) or the Social Security Act 42 CFR 422.208(c)(1), and 42CFR 438.3(i).