

SB 5523 - DIGEST

Requires the state health care authority to: (1) Contract with an external quality improvement organization to annually analyze the performance of managed care organizations that provide services to certain clients in comparison to managed care organizations in other states, based on performance outcomes in each performance measure; and

(2) Notify managed care organizations of any required remissions of funding for the preceding plan year no later than January 30th of each year.

Requires the external quality improvement organization to report its findings to the state health care authority, the governor, and the legislature.