Examination Requirement—Health Maintenance Organizations; HB 2486

HB 2486 amends an examination provision in the Insurance Code to require the examination of health maintenance organizations and Medicare provider organizations (and providers with whom the provider organization has contracts, agreements, or other arrangements) every five years. Under prior law, these organizations were examined every three years.

The bill maintains the existing statutory requirement (at least once every three years) for a separate on-site quality of care assessment by an independent quality review organization.