House Bill 2084

Senate Amendments Section-by-Section Analysis

HOUSE VERSION

SECTION 1. Subchapter A, Chapter 533, Government Code, is amended by adding Section 533.01314 to read as follows:

Sec. 533.01314. TRANSPARENCY OF PREMIUM PAYMENT RATE-SETTING PROCESS FOR MEDICAID MANAGED CARE PROGRAM. The commission shall ensure the transparency of the premium payment rate-setting process for the Medicaid managed care program by publishing actuarial reports:

- (1) in a format that allows for tracing data and formulas across attachments, exhibits, and examples; and
- (2) that clearly identify and describe:
- (A) the methodology by which the executive commissioner set the payment rates;
- (B) the data sources used;
- (C) the components of the process that are assumptions and how the assumptions are developed;
- (D) multipliers and factors used throughout the reports, including the source and purpose of the multipliers and factors; and
- (E) the methodology by which the executive commissioner determined that the rates are actuarially sound for the populations covered and the services provided.

SECTION 2. Subchapter B, Chapter 62, Health and Safety Code, is amended by adding Section 62.061 to read as follows:

Sec. 62.061. TRANSPARENCY OF PREMIUM PAYMENT RATE-SETTING PROCESS. The commission shall ensure

SENATE VERSION (IE)

SECTION 1. Subchapter A, Chapter 533, Government Code, is amended by adding Section 533.01314 to read as follows:

Sec. 533.01314. TRANSPARENCY OF PREMIUM PAYMENT RATE-SETTING PROCESS FOR MEDICAID MANAGED CARE PROGRAM. (a) The commission shall ensure the transparency of the premium payment rate-setting process for the Medicaid managed care program by publishing actuarial reports: [FA1(1)]

- (1) in a format that allows for tracing data and formulas across attachments, exhibits, and examples; and
- (2) that clearly identify and describe:
- (A) the methodology by which the executive commissioner set the payment rates;
- (B) the data sources used;
- (C) the components of the process that are assumptions and how the assumptions are developed;
- (D) multipliers and factors used throughout the reports, including the source and purpose of the multipliers and factors; and
- (E) the methodology by which the executive commissioner determined that the rates are actuarially sound for the populations covered and the services provided.
- (b) Notwithstanding Subsection (a), the commission is not required to publish particular information in an actuarial report if the commission determines the information is proprietary. [FA1(2)]

SECTION 2. Subchapter B, Chapter 62, Health and Safety Code, is amended by adding Section 62.061 to read as follows:

Sec. 62.061. TRANSPARENCY OF PREMIUM PAYMENT RATE-SETTING PROCESS. (a) The commission shall

CONFERENCE

15.142.1019

House Bill 2084

Senate Amendments Section-by-Section Analysis

HOUSE VERSION

the transparency of the premium payment rate-setting process for the child health plan program by publishing actuarial reports:

- (1) in a format that allows for tracing data and formulas across attachments, exhibits, and examples; and
- (2) that clearly identify and describe:
- (A) the methodology by which the executive commissioner set the payment rates;
- (B) the data sources used;
- (C) the components of the process that are assumptions and how the assumptions are developed;
- (D) multipliers and factors used throughout the reports, including the source and purpose of the multipliers and factors; and
- (E) the methodology by which the executive commissioner determined that the rates are actuarially sound for the populations covered and the services provided.

SECTION 3. If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 4. This Act takes effect September 1, 2015.

SENATE VERSION (IE)

ensure the transparency of the premium payment rate-setting process for the child health plan program by publishing actuarial reports: [FA1(3)]

- (1) in a format that allows for tracing data and formulas across attachments, exhibits, and examples; and
- (2) that clearly identify and describe:
- (A) the methodology by which the executive commissioner set the payment rates;
- (B) the data sources used;
- (C) the components of the process that are assumptions and how the assumptions are developed;
- (D) multipliers and factors used throughout the reports, including the source and purpose of the multipliers and factors; and
- (E) the methodology by which the executive commissioner determined that the rates are actuarially sound for the populations covered and the services provided.
- (b) Notwithstanding Subsection (a), the commission is not required to publish particular information in an actuarial report if the commission determines the information is proprietary. [FA1(4)]

SECTION 3. Same as House version.

SECTION 4. Same as House version.

CONFERENCE

2 15.142.1019