

Amend **CSHB 1** (house committee printing) in Article II of the bill immediately following the appropriations to the Health and Human Services Commission (page II-73) by adding the following appropriately numbered rider and renumbering subsequent riders accordingly:

\_\_\_\_. Transparency in Medicaid and CHIP Rate-setting Process. The Health and Human Services Commission may not spend any of the funds appropriated in this Act to the commission for purposes of Goal B, Medicaid, or Goal C, CHIP Services, unless the commission, using money appropriated by this Act, ensures the transparency of the premium payment rate-setting process for the payment of premiums under the Medicaid and CHIP managed care programs by publishing actuarial reports. It is the intent of the legislature that the actuarial reports satisfy the following requirements:

a. A report must be in a format that allows for tracing data and formulas across attachments, exhibits, and examples.

b. A report must clearly identify and describe the methodology by which the executive commissioner of the Health and Human Services Commission set the payment rates, the data sources used, the components of the process that are assumptions and how the assumptions are developed, multipliers and factors used throughout the reports, including the source and purpose of the multipliers and factors, and the methodology by which the executive commissioner determined that the rates are actuarially sound for the populations covered and the services provided.