

FISCAL NOTE

The draft bill permits the Governor, Department of Insurance, and Wyoming Department of Health (WDH) to work with the federal Centers for Medicare and Medicaid Services (CMS) to explore options to potentially expand Wyoming's Medicaid eligibility. If the Governor and the WDH believe Medicaid expansion is viable and financially advantageous to the state, the Governor may pursue amendments to the Medicaid State Plan. The bill requires that before the Governor makes an application to expand Medicaid eligibility, he must provide notice to the Legislature in writing and provide a report to the Joint Labor Health and social services interim committee and the Joint Appropriations Committee detailing his determination and supporting process and financial information. The notice and report shall be provided at least three (3) months before the Governor makes application to expand Medicaid to allow for the Legislature to call a special session to specifically consider expansion.

The fiscal impact of potentially expanding Medicaid is indeterminable based on the proposed bill draft as the costs of any expansion or waiver will depend on plan design, including cost sharing, benefit package and other program components and administrative costs, which are not specified in the bill.

While the WDH is currently working to revise its estimates for Medicaid expansion in Wyoming, it provided the following information to the Legislature in December 2019 about potential fiscal and programmatic estimates and impacts:

- An initial biennial appropriation of \$18 million State funds and \$135 million federal funds would be recommended;
- Medicaid would be expanded to non-disabled, childless adults under 138% of the federal poverty level in accordance with the Patient Protection and Affordable Care Act (ACA);
- Enrollment growth would carry forward after the first two years (biennium), which would likely require larger biennial appropriations;
- Enrollment growth is expected to level-off or flatten after thirty-six (36) month of program initiation and implementation;
- The WDH assumes a regular or straight expansion with no special provisions that would require a waiver;
- The WDH estimates approximately 19,000 new Medicaid enrollees would likely access the program by the end of the first biennium, although there is some variability to this estimate that it could be higher or lower;

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