

ENROLLED ACT NO. 68, SENATE

SIXTY-EIGHTH LEGISLATURE OF THE STATE OF WYOMING
2026 BUDGET SESSION

AN ACT relating to welfare; amending the intervals at which the department of health and department of family services shall determine specified information of an applicant for or recipient of public welfare and assistance; making conforming amendments; amending the requirements for public welfare and assistance qualification and participation; establishing citizen, noncitizen and qualified alien eligibility for public welfare and assistance; requiring the reporting of illegal alien status; requiring specified hospitals to collect citizenship status information; requiring rulemaking; requiring reporting; providing definitions; specifying applicability; and providing for an effective date.

Be It Enacted by the Legislature of the State of Wyoming:

Section 1. W.S. 42-2-115, 42-10-108 through 42-10-110, 42-10-201 and 42-12-101 through 42-12-106 are created to read:

42-2-115. Supplemental nutrition assistance program eligibility recertification frequency.

(a) The department shall assign certification periods of not greater than four (4) months to households that include an able bodied adult without dependents and other households whose circumstances are determined by the department to be unstable, unless otherwise prohibited under federal law for the supplemental nutrition assistance program.

(b) The department shall assign certification periods of one (1) or two (2) months to households that the department determines will become ineligible for the

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supplemental nutrition assistance program in the near future, unless otherwise prohibited under federal law.

(c) Except as provided by subsections (a) and (b) of this section, the department shall assign certification periods of not more than six (6) months to households whose members are not elderly or disabled, unless otherwise prohibited under federal law.

42-10-108. Prohibition on self-attestation.

(a) Except as required under federal law, self-attestation shall not be accepted for any of the following eligibility factors without verification prior to enrollment in the medicaid program:

(i) Income in excess of zero dollars (\$0.00);

(ii) Residency;

(iii) Identity;

(iv) Except for any presumptive eligibility period, citizenship or immigration status.

(b) The department shall not rely on self-attestation to establish any medicaid eligibility factor unless expressly required by federal law.

42-10-109. Residency verification; monthly address checks; multistate enrollment; monthly death record checks.

(a) As used in this section, "address change information" means postal change of address data, state address change databases or comparable systems.

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(b) On not less than a monthly basis, the department of health shall review address change information to identify potential changes in residency for medicaid recipients.

(c) The department of health shall conduct monthly cross checks of address change information against enrollment records and shall initiate an eligibility redetermination when a change in residency is indicated.

(d) The department of health shall submit enrollment information to any national database used to identify persons enrolled in medicaid in multiple states. Implementation of this subsection shall occur no later than October 1, 2029.

(e) Not later than August 31 of each year, the department of health shall submit a public report to the joint labor, health and social services interim committee of the Wyoming legislature, including:

(i) The number of persons flagged through address change information or out of state benefit activity;

(ii) The number of persons removed from the medicaid program due to enrollment in multiple states;

(iii) The estimated fiscal impact of this section.

(f) On not less than a monthly basis, the department of health shall receive and review information from the vital statistics services and the social security

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administration master death file to identify any deceased persons enrolled in the medicaid program. Upon confirmation of death, the department shall promptly remove the deceased person from the program.

42-10-110. Retroactive medicaid eligibility; rulemaking; reporting.

(a) As used in this section:

(i) "Retroactive eligibility" means coverage for services furnished prior to the month of application as authorized by 42 U.S.C. § 1396a(a)(34);

(ii) "Medicaid eligible population" means persons eligible for medicaid under state or federal law.

(b) Retroactive medicaid eligibility shall not extend more than two (2) months prior to the month in which a completed medicaid application is submitted.

(c) This limitation applies only to initial applications and shall not affect ongoing eligibility.

(d) The department of health shall adopt rules necessary to implement this section.

(e) Not later than August 1 of each year, the department of health shall submit a report to the joint labor, health and social services interim committee of the Wyoming legislature, including:

(i) The number of medicaid applications processed;

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(ii) The number of applicants denied retroactive eligibility under this section; and

(iii) The estimated fiscal impact of the limitation.

(f) This section shall be implemented not later than January 1, 2027.

ARTICLE 2
WAIVER OF WORK REQUIREMENTS

42-10-201. Prohibition on waiver of work requirements and exemptions.

(a) The department of family services shall not seek, apply for, accept or renew any waiver of work requirements under 7 U.S.C. § 2015(o)(4) without first obtaining specific authorization from the legislature. Such authorization shall be provided in a duly enacted statute.

(b) The department of family services shall not exercise the state's option to provide any exemptions from the work requirement under 7 U.S.C. § 2015(o)(6)(F), except for family caregivers as defined in section 2 of the Recognize, Assist, Include, Support and Engage Family Caregivers Act of 2017.

CHAPTER 12
CITIZENS AND QUALIFIED ALIENS STATUS VERIFICATION FOR
WELFARE

42-12-101. Definition of citizens who are eligible for public assistance.

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(a) Unless required by federal law, no person who is not a United States citizen or national of the United States shall be eligible to receive food assistance through the supplemental nutrition assistance program, unless that individual meets the definition of a qualified alien pursuant to 8 U.S.C. § 1641(b).

(b) No person who is not a United States citizen or national of the United States shall be eligible to receive medical assistance through medicaid, unless that person meets the definition of an eligible alien pursuant to 42 U.S.C. § 1396b(v) and meets the definition of a qualified alien pursuant to 8 U.S.C. § 1641(b).

(c) No person who is not a United States citizen or national of the United States shall be eligible to receive assistance through the personal opportunities with employment responsibilities (POWER) program, unless that person meets the definition of a qualified alien pursuant to 8 U.S.C. § 1641(b).

42-12-102. Verification of citizenship or eligible alien status.

(a) The department of family services shall be required to verify that a person is eligible to participate in the supplemental nutrition assistance program during enrollment and eligibility recertification by verifying citizenship or eligible alien status by using the United States citizenship and immigration services' systematic alien verification for entitlements (SAVE) online service or requiring the person to provide an acceptable form of proof of citizenship or eligible alien status, including but not limited to certified birth certificates, United

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States passports and United States customs and immigration services documentation.

(b) The department of health shall be required to verify that a person is eligible for medicaid during enrollment and eligibility redetermination by verifying citizenship or eligible alien status using the SAVE online service or requiring the person to provide an acceptable form of proof of citizenship or eligible alien status, including but not limited to, certified birth certificates, United States passports and United States customs and immigration services documentation.

(c) The department of family services or other applicable agency shall be required to verify that a person is eligible for the POWER program during enrollment and eligibility redetermination by verifying citizenship or eligible alien status using the SAVE online service or requiring the person to provide an acceptable form of proof of citizenship or eligible alien status, including but not limited to, certified birth certificates, United States passports and United States customs and immigration services documentation.

(d) The department of family services shall submit to the United States department of agriculture information concerning any assistance unit member for whom it is unable to verify eligible alien status.

(e) The department of health shall submit to the United States department of health and human services information concerning any person member for whom it is unable to verify eligible alien status.

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42-12-103. Referral of illegal aliens to law enforcement.

The department of health and department of family services shall submit to the appropriate law enforcement authorities, including but not limited to the United States department of homeland security, information concerning any household member or assistance unit member who it is determined by the applicable department while applying the requirements of this title to be an unlawfully present alien, regardless of whether such household member or assistance unit member is applying to participate in a public assistance program, including but not limited to, the supplemental nutrition assistance program or medicaid.

42-12-104. Counting of ineligible alien income in determination of benefits under the supplemental nutrition assistance program.

The entire income and financial resources of any individual rendered ineligible for participation in the supplemental nutrition assistance program under 7 U.S.C. § 2015(f) shall be considered in determining the eligibility and benefit allotment of the household of which such individual is a member.

42-12-105. Reasonable opportunity periods for noncitizens applying for medicaid.

(a) The department of health shall adhere to the following requirements regarding the reasonable opportunity period for verification of United States citizenship or eligible alien status for medicaid:

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(i) When an applicant's status cannot be verified through available data sources, the department shall provide only a single reasonable opportunity period, consistent with the minimum period required under federal law, for the applicant to provide verification;

(ii) Medicaid coverage may only be provided provisionally during the reasonable opportunity period;

(iii) Failure to submit acceptable documentation within the reasonable opportunity period required under federal law shall result in denial or termination of medicaid eligibility, subject to required notice;

(iv) No additional reasonable opportunity period shall be granted to any applicant for medicaid who has previously been denied eligibility at any time due to a failure to verify citizenship or eligible alien status.

42-12-106. Citizenship data collection and presumptive eligibility integrity, medicaid.

(a) The department of health shall require a field for citizenship or eligible alien status on all presumptive eligibility applications. The department shall require hospitals, clinics and other qualified entities authorized to conduct presumptive eligibility determinations to collect and transmit attestations of citizenship or eligible alien status to the department. No presumptive eligibility application shall be approved unless the applicant certifies that they are a United States citizen, United States national, or alien eligible for medicaid pursuant to 42 U.S.C. § 1398b(v) and W.S. 42-12-101(b).

(b) The department of health shall:

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(i) Beginning not later than April 1, 2027, require each hospital that accepts medicaid to include a provision on its patient admission or registration form for the patient or the patient's representative to state or indicate whether the patient is a United States citizen or lawfully present in the United States or is not lawfully present in the United States;

(ii) Beginning not later than April 1, 2027, require each hospital that accepts medicaid to inform a patient, at the time this information is collected, that any submission made on an admission or registration form will not affect patient care, as required by federal law;

(iii) Beginning with the calendar year ending on December 31, 2027 and each calendar year thereafter, require that each hospital shall submit an annual report to the department of health within thirty (30) days after the end of each calendar year which reports the total deidentified number of hospital admissions and emergency department visits within the previous calendar year, disaggregated based on whether the patient or the patient's representative indicated that he or she was or was not a citizen of the United States or lawfully present in the United States or declined to answer together with other information required by the department;

(iv) Beginning on April 1, 2028 and each April 1 thereafter, submit a report to the governor and the joint labor, health and social services interim committee, which includes the number of total deidentified hospital admissions and emergency department visits for the previous calendar year, disaggregated based on whether the patient or patient's representative reported that the patient was

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or was not a citizen of the United States or lawfully present in the United States or declined to answer. The report shall also describe information relating to the costs of uncompensated care for aliens who are not lawfully present in the United States, the impact of uncompensated care on the cost or ability of hospitals to provide services to the public, hospital funding needs and other related information. The report shall also contain information based on the hospital's presumptive eligibility applications that are submitted to the department by participating providers, including the number of persons determined to be presumptively eligible for medicaid in the prior calendar year, the proportion of the persons presumptively eligible for medicaid who were verified as eligible for medicaid and the proportion of the persons presumptively eligible for medicaid who were determined to be ineligible for medicaid;

(v) Adopt rules relating to the format and information to be contained in quarterly reports and the acceptable formats for hospitals to use in requesting information regarding a patients immigration status on hospital admission or registration forms.

Section 2. W.S. 42-2-103(b) (xvi) and 42-10-103(a) (intro), (iii) through (viii), (x) through (xv) and by creating a new subsection (d) is amended to read:

42-2-103. Provision of assistance and services; duties of department; burial assistance; department of health state supplemental security income program.

(b) In carrying out subsection (a) of this section and except as provided under the Wyoming Medical Assistance and Services Act, the department shall:

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(xvi) Conduct the applicable eligibility and identity verification process as provided in W.S. 42-10-101 through ~~42-10-107~~ 42-10-110.

42-10-103. Enhanced eligibility verification process.

(a) Prior to awarding any public welfare benefit, and ~~on a quarterly basis at the intervals specified in this section~~ after any benefit is awarded, the department shall, to the extent practicable, determine the following information as it relates to each applicant for or recipient of a public welfare benefit:

(iii) Income information maintained by the United States social security administration, reviewed by the department at every application and recertification period;

(iv) Immigration status information maintained by the United States citizenship and immigration services and verified through the SAVE online service or other acceptable documentation;

(v) Death register information maintained by the United States social security administration, reviewed by the department not less than on a monthly basis;

(vi) Prisoner information maintained by the United States social security administration, reviewed by the department of family services at every application and recertification period;

(vii) Public housing and section 8 housing assistance payment information, reviewed by the department

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of family services at every application and recertification period;

(viii) Fleeing felon, probation or parole violation information, reviewed by the department of family services at every application and recertification period;

(x) Beneficiary records and earnings information maintained by the United States social security administration in the beneficiary and earnings data exchange system, reviewed by the department at every application and recertification period;

(xi) Earnings and pension information maintained by the United States social security administration in the beneficiary earnings exchange record system, reviewed by the department at every application and recertification period;

(xii) Earnings and pension information maintained by the Wyoming retirement system, reviewed by the department of family services at every application and recertification period and by the department of health upon the receipt of applicable information from the Wyoming retirement system;

(xiii) Employment information, ~~maintained by the department of workforce services~~ reviewed by the department at every application and recertification period;

(xiv) Employment information maintained by the United States department of health and human services in the national directory of new hires, reviewed by the department of family services at every application and recertification period;

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(xv) Supplemental security income information maintained by the United States social security administration in the social security income state data exchange system, reviewed by the department at every application and recertification period;

(d) On not less than a quarterly basis, the department of family services and department of health shall each make available on their public websites all of the following data from findings on noncompliance and fraud investigations, provided the data is presented in the aggregate and does not include confidential or personally identifying information:

(i) The total number of public benefit cases investigated for intentional program violations or fraud;

(ii) The total number of public benefit cases referred to the attorney general's office for prosecution;

(iii) Total improper payments and expenditures;

(iv) Total monies received;

(v) Aggregate data concerning improper payments and ineligible recipients as a percentage of those recipients investigated and reviewed.

ORIGINAL SENATE
FILE NO. SF0106

ENGROSSED

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Section 3. This act is effective January 1, 2027.

(END)

Speaker of the House

President of the Senate

Governor

TIME APPROVED: _____

DATE APPROVED: _____

I hereby certify that this act originated in the Senate.

Chief Clerk