

FISCAL NOTE

This bill contains a continuous appropriation totaling an estimated \$615,014,229 from the FEDERAL FUNDS to the Department of Health, effective immediately, for FY 2026, FY 2027, and FY 2028.

	FY 2026	FY 2027	FY 2028
NON-ADMINISTRATIVE IMPACT			
Anticipated Revenue increase			
FEDERAL FUNDS	\$205,004,743	\$205,004,743	\$205,004,743

	FY 2026	FY 2027	FY 2028
NON-ADMINISTRATIVE IMPACT			
Anticipated Expenditure increase			
FEDERAL FUNDS	\$205,004,743	\$205,004,743	\$205,004,743

Description of appropriations, assumptions, and source of revenue and expenditure increases:

This bill provides that federal funds awarded to the state of Wyoming under the federal rural health transformation program established by section 71401 of the federal One Big Beautiful Bill Act, P.L. 119-21, are appropriated to the Department of Health, subject to the following:

In federal fiscal year 2026 of \$205,004,743, \$164,003,794 or (80%) shall be deposited into the Wyoming rural health transformation perpetuity fund as defined in W.S. 35-25-702(a) (iv) created in this bill, and \$41,000,949 (20%) is appropriated for the time-limited initiatives authorized in W.S. 35-25-207, as created in this bill. In each subsequent federal fiscal year \$62,221,447 (30.5%) is appropriated for the time limited initiatives authorized in W.S. 35-25-707, as created in this act, and the balance (69.5%) is directed to the perpetuity fund. It is anticipated that the Department of Health shall receive an award of \$205,004,743 per year from fiscal year 2027 to fiscal year 2029, a total of \$615,014,229.

Further, the Wyoming rural health transformation program's allowable perpetuity fund expenditures are subject to annually required distributions and are for the following purposes:

- Critical access hospital basic incentive (CAHB) program (40.7%)
- Emergency medical regionalization (26.9%)
- Workforce education individual support (21.6%)
- Physician post-graduate medical education (GME) individual support (10.8%)

Further, the Wyoming rural health transformation program's time-limited initiatives expenditures are subject to the following purposes and specified percentages:

- Integrated primary care (36.4%)
- Technology adoption challenge program (15.1%)

- Exercise and diet program (9.8%)
- Statewide tele-specialist program (8.2%)
- Workforce education startup costs (8.2%)
- Time limited initiatives for care coordination (8.2%)
- Centralized billing capacity (\$4.9%)
- Nonemergency transportation coordination platform (2.0%)
- Administration (2.6%)
- Redistributed amounts from non-authorized time-limited initiatives (4.6%)

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