

Wyoming Department of Health - Budget Roadmap

December 11, 2024

Full budget overview

We recognize that the Department of Health's budget is long, complex, and only presented in full once a biennium. This section presents a short table¹ of our entire budget broken into major function, and ordered by total spending.

Generally speaking:

- Approximately 82.5% of the Department's budget is paid to private and non-profit providers in communities throughout the State to reimburse them for necessary medical and long-term care support they provide to vulnerable people.
- An additional ~ 10% pays for healthcare services provided directly by our five State-operated safety-net facilities (e.g the State Hospital in Evanston) or in local communities (Public Health Nurses).
- The remaining 7.5% pays for the overhead to effectively and efficiently operate the Department. This ranges from Medicaid's claims processing and eligibility infrastructure, to staff that execute our regulatory responsibilities (EMS licensing, healthcare licensing and surveys), to customer-facing services (Vital Records).

Table 1: Department budget by programmatic category

Category	Budget (millions)				Percent of budget		
	SGF	FF	OF	Total	SGF	Total	Cumulative
Medicaid/CHIP medical services	\$207.66	\$419.50	\$56.65	\$683.81	20.7%	30.8%	30.8%
Medicaid I/DD services	\$147.93	\$170.17	\$1.80	\$319.90	14.7%	14.4%	45.3%
Medicaid long-term care (institutional)	\$114.58	\$155.32	\$37.38	\$307.29	11.4%	13.9%	59.1%
State-operated facilities	\$141.77	\$20.57	\$37.95	\$200.29	14.1%	9.0%	68.2%
Administration	\$51.15	\$79.55	\$2.46	\$133.16	5.1%	6.0%	74.2%
Medicare-related obligations	\$81.36	\$37.41	\$0.06	\$118.82	8.1%	5.4%	79.5%
Community behavioral health	\$84.08	\$12.92	\$11.31	\$108.30	8.4%	4.9%	84.4%
Early intervention and education	\$75.71	\$7.34	\$9.68	\$92.74	7.5%	4.2%	88.6%
Medicaid long-term care (community)	\$42.84	\$37.60	\$0.12	\$80.55	4.3%	3.6%	92.2%
Community senior services	\$17.63	\$14.34	\$0.00	\$31.97	1.8%	1.4%	93.7%
Prevention	\$5.06	\$10.97	\$12.16	\$28.19	0.5%	1.3%	94.9%
Public health nursing	\$16.65	\$1.04	\$9.35	\$27.04	1.7%	1.2%	96.1%
WIC	\$1.63	\$18.98	\$5.02	\$25.63	0.2%	1.2%	97.3%
Infectious disease and immunizations	\$10.46	\$11.67	\$2.79	\$24.92	1.0%	1.1%	98.4%
Emergency preparedness, EMS	\$1.76	\$13.95	\$0.06	\$15.76	0.2%	0.7%	99.1%
Community Service Block Grants	\$0.00	\$7.24	\$0.00	\$7.24	0.0%	0.3%	99.5%
Healthcare licensing and survey	\$1.30	\$4.57	\$0.00	\$5.87	0.1%	0.3%	99.7%
Rural health and workforce	\$1.15	\$2.16	\$0.04	\$3.35	0.1%	0.2%	99.9%
Vital Statistics	\$1.66	\$0.67	\$0.28	\$2.61	0.2%	0.1%	100.0%

¹ Please note that this table, while broadly accurate, is meant to be illustrative. There are some smaller direct service expenses, for example, collapsed into the "administration" category (e.g. client transportation, Medication Donation program).

In addition to budget, we also present the table below, which summarizes where Department positions are allocated. Note that, of the Department's 1,442 positions, around two-thirds work in our direct-care facilities.

Table 2: Positions by division and location

Division	Location			Total	Percent by division
	Cheyenne	County Field Offices	State Facilities		
AGD	30.0	0.0	209.0	239.0	16.6%
BHD	25.0	0.0	756.0	781.0	54.2%
DO	45.4	0.0	0.0	45.4	3.1%
HCF	100.1	11.0	0.0	111.1	7.7%
PHD	143.5	122.0	0.0	265.5	18.4%
Total	344.0	133.0	965.0	1442.0	100.0%
Percent by location	23.9%	9.2%	66.9%	100.0%	

Exception requests

For its 2025-26 supplemental budget, the Department of Health is requesting \$14,174,455 in State General Funds, \$4,413,024 in Federal Funds, \$100,000 in Other Funds, and 1 net position. The Governor has recommended approval of \$2,364,647 in State General Funds, \$4,225,024 in Federal Funds, and \$100,000 in Other Funds.

Table 3, below, shows these requests broken out by division.

Table 3: Exception requests by division

Division	Request (\$)				Gov. Rec.	Net Positions
	SGF	FF	OF	Total	SGF	
HCF	\$2,405,574	\$2,458,010	\$0	\$4,863,584	\$2,364,652	1
BHD	\$11,754,467	\$0	\$100,000	\$11,854,467	\$0	0
PHD	\$63,918	\$435,958	\$0	\$499,876	\$-5	0
AGD	\$0	\$1,424,414	\$0	\$1,424,414	\$0	0
DO	\$-49,504	\$94,642	\$0	\$45,138	\$0	0
Department	\$14,174,455	\$4,413,024	\$100,000	\$18,687,479	\$2,364,647	1

For the purposes of this roadmap, we organize our requests into four major categories, listed in Table 4, below, and described in detail in the subsequent sections.

Table 4: Exception requests by category

Category	Request				Gov. Rec.	Net Positions
	SGF	FF	OF	Total	SGF	
Medicaid rate increases	\$2,364,652	\$2,364,652	\$0	\$4,729,304	\$2,364,652	0
Admin capacity	\$-8,587	\$623,958	\$0	\$615,371	\$-5	1
Required requests	\$11,818,390	\$0	\$0	\$11,818,390	\$0	0
Other	\$0	\$1,424,414	\$100,000	\$1,524,414	\$0	0
Total	\$14,174,455	\$4,413,024	\$100,000	\$18,687,479	\$2,364,647	1

Medicaid rate increases

The rates that Wyoming Medicaid pays its medical and long-term care providers are closely tied with access to care. If we pay too low, providers will either leave the program or go out of business.²

These requests will increase rates for three types of providers:

- **All physicians**, but with a focus on obstetrics and maternity care. The objective of this request is to help slow the loss of labor and delivery services around Wyoming.
- **Behavioral health providers**. A 2024 study showed worsening cost coverage of current rates, largely for outpatient mental health and substance abuse services, but also for autism-related Applied Behavior Analysis (ABA) services.
- **Home-health services** provided under the Medicaid State Plan. Because older people in need of long-term care typically also have Medicare and/or Medicaid waiver services, the primary people depending on this service are typically children with high medical needs. These rates have not been increased in more than a decade.

²This depends on how much Medicaid volume providers see, compared with private pay and Medicare. Nursing homes and in-home care (“waiver”) providers are the most dependent on Medicaid payments; hospitals and physicians less so. Behavioral health providers are somewhere in the middle.

Table 5: Medicaid provider rate increases

Description	Division	Request (millions)				Gov. Rec.
		SGF	FF	OF	Total	SGF
Maternity svcs and physicians (pg. 27)	HCF	\$1,195,135	\$1,195,135	\$0	\$2,390,270	\$1,195,135
Behavioral health providers (pg. 28)	HCF	\$833,153	\$833,153	\$0	\$1,666,306	\$833,153
Home health providers (pg. 30)	HCF	\$336,364	\$336,364	\$0	\$672,728	\$336,364
Total rate increases		\$2,364,652	\$2,364,652	\$0	\$4,729,304	\$2,364,652

Required requests

This category includes requests for programs like Early Intervention and Education, where statute compels the Department to ask for inflationary increases. There is a similar requirement in W.S. 35-1-243(f) for the Department to request funding for independent county health departments when State employee nurse compensation increases.

Table 6: Required requests

Description	Division	Request (millions)				Gov. Rec.
		SGF	FF	OF	Total	SGF
EIEP External Cost Adjustment (pg. 46)	BHD	\$11,754,467	\$0	\$0	\$11,754,467	\$0
Independent county health (pg. 41)	PHD	\$63,923	\$0	\$0	\$63,923	\$0
Total required		\$11,818,390	\$0	\$0	\$11,818,390	\$0

Administrative capacity

These requests are small, but meaningful, increases to the Department's capacity to perform its mission.

- Long-term Care Eligibility Unit workloads, for example, are increasing to the point where retention is affected. An additional position would reduce this strain.
- Similarly, converting five (5) technology and project manager at-will employee contractors (AWECs) to full-time positions will help Wyoming Medicaid recruit and retain talent in managing the complex procurement of Medicaid's modular technology system.

Table 7: Administrative capacity

Description	Division	Request (millions)				Gov. Rec.
		SGF	FF	OF	Total	SGF
LTC eligibility staff (pg. 21)	HCF	\$38,388	\$38,388	\$0	\$76,776	\$0
AWEC conversion (pg. 22)	HCF	\$2,534	\$54,970	\$0	\$57,504	\$0
WIC position conversion (pg. 35)	PHD	\$-5	\$435,958	\$0	\$435,953	\$-5
AWEC conversion (pg. 15)	DO	\$-49,504	\$94,642	\$0	\$45,138	\$0
Total administrative capacity		\$-8,587	\$623,958	\$0	\$615,371	\$-5

Other

This category has non-State General Fund miscellany, the largest of which is increasing Federal Funds budget authority to reduce the need for B-11s for Older Americans Act senior services.

Table 8: Other

Description	Division	Request (millions)				Gov. Rec.
		SGF	FF	OF	Total	SGF
FF - senior supportive services (pg. 57)	AGD	\$0	\$144,856	\$0	\$144,856	\$0
FF - senior nutrition services (pg. 59)	AGD	\$0	\$1,260,506	\$0	\$1,260,506	\$0
FF - ombudsman services (pg. 61)	AGD	\$0	\$19,052	\$0	\$19,052	\$0
WLRC canteen (pg. 52)	BHD	\$0	\$0	\$100,000	\$100,000	\$0
Other		\$0	\$1,424,414	\$100,000	\$1,524,414	\$0