

Wyoming Healthcare Authority Proposal

DRAFT

From: Governor Gordon's Health Task Force

“Wyoming’s greatest natural resource is not the coal in the Powder River Basin, the oil in the Big Horn Basin or the trona in the Green River Basin. It is not the pure water of our streams, the strong grass on our prairies or the stunning views of our mountains. Wyoming’s greatest natural resource is our people. Caring for their health is essential to the future of our state.”

— Thomas Stroock, 1993

Purpose of Proposal:

Wyoming has historically struggled to control costs of healthcare and ensure access to services. Many factors contribute to cost and access issues including low patient volumes, large geographical areas, difficulty recruiting and retaining healthcare providers and other barriers. Wyoming is at a pivotal point for healthcare reform and must establish a permanent mechanism that constantly monitors and adapts to the ever-evolving science of healthcare while leveraging collaboration and innovation to build the future of health and wellness. It is time to elevate the importance of healthcare in Wyoming, to understand the connection it has to economic development and stability in the state, and keep our greatest natural resource here at home.

The benefits of a strong healthcare system will ensure a thriving economy for Wyoming in the years to come. Healthcare is a large industry in Wyoming and directly impacts the wellbeing of our other industries across the state. The Wyoming hospitals and nursing homes employ over 32,000 individuals, contributing to the GDP at approximately \$2.56B annually, according to the recent report from the Wyoming Hospital Association and the University of Wyoming. According to the AMA Economic Impact Study of 2018, each dollar in direct output applied to physician services supports \$1.58 in economic activity in Wyoming. Physician driven economic activity is greater than legal services, home health care, higher education, and nursing home and residential care. The average economic output by each physician in Wyoming is \$1.8 million with total economic activity in Wyoming at \$1.5 billion.

Additionally, the economic benefits from the Community Health Centers in Wyoming save the state millions of dollars in Medicaid spending. According to

Capital Link and the Wyoming Primary Care Association, in 2020 the Community Health Centers saved Wyoming Medicaid \$15M and \$53M in the overall health system, while generating \$8.3M in tax revenue, compared to the \$79M in state tax revenue from hospitals and nursing homes. We can not ignore the significant economic impacts a thriving healthcare system has in driving a robust economy in Wyoming.

This proposal will demonstrate the need for a collective authority to monitor changes in the healthcare ecosystem, as well as offer policy recommendations to align with the Wyoming Healthcare Strategy. The Wyoming Healthcare Authority will establish a formal public/private partnership to ensure the health industry's voice as an equal partner with the state government. This partnership will overcome the current echo chamber of government regulation and oversight without consideration of impacts in the field, push us to do better, while always keeping the people of Wyoming at the center of the conversation.

As Governor Gordon's Health Task Force contemplates recommending a new Healthcare Authority for Wyoming, Wyoming must acknowledge that we have only made incremental changes in the last 40 years. If Wyoming wants change, we must be bold and change the future.

Historical Background:

Wyoming has had two previous Healthcare Commissions that have successfully established recommendations for system improvements, but never had authority to ensure that recommendations moved forward.

In 1993, Governor Mike Sullivan established the Wyoming Health Reform Commission. The Commission had 23 members that were tasked to work within the federal health care reform parameters, guarantee affordable, high-quality healthcare to every citizen, and protect the positive aspects of the existing healthcare system. Then in 2003-2009 the legislature approved the Wyoming Healthcare Commission to generate solutions for medical malpractice liability, medical errors, rural healthcare, provider supply, health information technology, Wyoming's uninsured population, Medicaid and expanded access to healthcare.

Healthy People 2030 uses the percent of persons under 65 years of age with medical insurance as a leading indicator of a healthy population. Without health insurance, people are less likely to have a regular health care provider and more likely to skip routine health care. This puts them at increased risk for serious health problems. Evidence has shown that strategies to reduce financial and other barriers to health insurance access can help increase coverage rates. In 1993 we had 63,000 residents uninsured. According to the U.S. Census Bureau in 2022, Wyoming still had 14.8% of our population without health insurance, equating to 86,044 uninsured residents. The lack of insurance coverage coupled with the high cost of healthcare in Wyoming continues to be a barrier for Wyoming residents seeking care but is also a barrier for attracting new businesses to Wyoming.

Additionally in 1993, 126,000 residents were paying more than 20% of their household income on health related expenses, while data from 2021 shows that 13.5% of our adult population are not seeking care due to the high cost of healthcare in Wyoming. Regardless of the previous commission's efforts, Wyoming has fallen flat in improving cost and accessibility to healthcare services.

In 1993 the Wyoming Health Reform Commission's chairman, Thomas Stroock, said "Wyoming's greatest natural resource is our people. Caring for their health is essential to the future of our state." This still rings true today although healthcare policy does not rise to the level of importance as coal, oil, and trona. We must change the Wyoming narrative to ensure economic growth and stability by valuing people's health and wellbeing. By establishing a healthcare authoritative body, similarly to demonstrating how we value the energy sector through the Energy Authority, demonstrates our commitment to the people of Wyoming.

In 1994, the Commission had 49 recommendations including extension of health care coverage for low income individuals, funding for recruitment and retention efforts for primary care, mid-level, and mental health providers, funding to improve emergency medical services and trauma management, establishment of a mental health policy board to set priorities for funding, accountability, and quality, development of managed care programs for cost controls, and development of wellness and prevention programs.

The 1994 Commission was dissolved and many of the recommendations remained unresolved. In 2003 the Legislature approved the Wyoming Healthcare Commission for three years and then approved an extension to 2009. In the 2009 final report by the Wyoming Healthcare Commission, the recommendations included establishment of a non-for-profit patient safety organization, establishment of a permanent health policy entity, and continuation of the health professions database. Additionally the commission recommended continued focus on Medicaid redesign, WHIP modifications, tracking medical errors, and increasing the workforce pipeline.

Upon dissolution of the Wyoming Healthcare Commission in 2009, the need for healthcare reform continued to loom over the residents of Wyoming. The commissioners in 2009 summed up the challenges they faced that continue to plague our system in 2023;

“We acknowledge the difficulties associated with translating our research and recommendations into action. Our vision for health reform was not always shared by elected officials, interest groups, and stakeholders of the system. However, it is important to recognize that discord within policy making is not grounds for inaction; rather, it is an opportunity to find shared priorities and move forward.” - Wyoming Healthcare Commission, 2009

Wyoming must acknowledge that we have only made incremental changes in the last 40 years with many of the prior commissions' recommendations still being valid and proposed today. If Wyoming wants change, we must be bold and change the future.

History of the Current Governor's Health Task Force

Governor Mark Gordon initiated the Health Task Force in August of 2019 during the COVID pandemic to address the immediate needs of the healthcare industry and develop strategies for implementation to avoid serious complications and death. Upon stabilization of the emergency response, the Health Task Force morphed into a comprehensive overview of healthcare issues relevant to Wyoming. Governor Gordon's directive to the current Health Task Force was to develop recommendations to decrease costs for Wyoming consumers while still ensuring adequate access to care for all Wyoming residents. The Health Task Force has been

successful in bringing forward recommendations to the Governor and to the legislature. The Health Task Force successfully recommended funding proposals to develop Family Resource Centers in Wyoming, additional funding to support capacity building for Wyoming 2-1-1, funding to support EMS stability and certification of Emergency Medical Dispatch across the state, passage of the 12 month postpartum coverage for women on Medicaid and passage of the Collaborative Care Model which is an integrated care model for physical and behavioral health. The Health Task Force continues to work on developing recommendations for alternative payment models, behavioral health system infrastructure, aging services, and access to primary care.

Objective of Healthcare Authority:

The objective of the newly established Wyoming Healthcare Authority will be to formalize the efforts of the Governor's Health Task Force by establishing a permanent entity that will offer consistency to the healthcare system in Wyoming. The landscape of healthcare is diverse and constantly changing; therefore, it is important to have a Healthcare Authority that is efficient, responsive, and innovative. The Healthcare Authority will provide expertise from the vast healthcare system and will be reflective of broad and diverse perspectives related to cost, quality and access to healthcare in Wyoming. The Wyoming Healthcare Authority will develop a data driven approach for decision making, evaluate and recommend evidence-based practices, and coordinate a multi-level system of care throughout Wyoming. Additionally, the Authority will establish the Wyoming Healthcare Strategy which will require continual adaptations to meet the unique and evolving needs of Wyoming residents over time.

Purpose of the Wyoming Healthcare Authority:

Utilize the expertise from the public and private sector partners to inform conversations and recommendations to establish the Wyoming Healthcare Strategy while supporting public information and education.

Vision of the Wyoming Healthcare Authority:

A comprehensive healthcare system that supports healthy living and economic security

Mission of the Wyoming Healthcare Authority:

Engage in collaborative decision making for improved health outcomes and economic diversification

Guiding Principles/Values of the Wyoming Healthcare Authority:

- Focus on ensuring high quality healthcare for all residents
- Collaborate with partners to minimize the burden of unnecessary regulations, while supporting appropriate regulations as necessary
- Ensure transparency in the healthcare system
- Share responsibility for developing and achieving goals
- Support the importance of personal responsibility of your own health and wellbeing
- Ensure effective, collaborative communication
- Acknowledge shared responsibility for success of the system
- Focus on rural health strategies to ensure access and quality care in the remote locations of the state

Accountability and responsibility for oversight of the recommendations and strategies will be an essential component of the Healthcare Authority. The development of the Wyoming Healthcare Strategy will establish accountability through data driven decision making and achievable outcomes through strategic assignment of responsibilities.

Governance and Structure of the Healthcare Authority:

The Wyoming Healthcare Authority will blend expertise from a variety of public and private entities through a diversity of perspectives related to healthcare in Wyoming. The intent is to provide private industry an opportunity to collaborate with public efforts to deliver the most comprehensive and effective healthcare system for Wyoming residents. The Authority will be represented as a quasi governmental entity as an Executive Branch Cabinet member under the Governor's authority. All members will be non-partisan. All public representatives will act as ex-officio members and will be appointed by the Governor. All other members will be appointed by the Governor in accordance with the membership designation. Members will be appointed for a three year term. Members can be reappointed upon expiration for a maximum of three consecutive terms. After three terms, an individual can be reappointed after a minimum of a one-year absence.

The Wyoming Healthcare Authority will have one full-time equivalent who will serve as the Executive Director and coordinate all efforts of the Authority. The Executive Director will report to the governing body and act as a representative in the Governor's cabinet. The governing body will elect a Chairperson who will serve a two year term and can be re-elected for one additional term as Chairperson. The Chairperson can not be a representative of the ex-officio membership. Additional Executive Committee members will include a Vice-Chairperson, Secretary, Member At-Large, and an Ex-Officio Member.

The Wyoming Hub for Healthcare Excellence will be embedded into the Wyoming Healthcare Authority to focus on four major areas of interest.

- Wyoming Hub for Healthcare Excellence
 - Healthcare Accessibility
 - Workforce
 - Primary Care
 - Speciality Care/Critical Care
 - Mental Health
 - Facilities
 - Healthcare Affordability
 - Insurance Coverage
 - Alternative Payment Models
 - Safety Net Services
 - Volume Based Care
 - Quality Healthcare
 - Integrated Care Models
 - Valued Based Care
 - Patient Satisfaction
 - Provider Accountability
 - Innovations in Healthcare
 - Ideas From The Field
 - Wyoming Innovators
 - Solicitations
 - Identified Needs in Wyoming

In order to achieve the projected outcomes of the Wyoming Healthcare Authority, it will be essential to establish an appropriate membership list that is diverse and inclusive of the Wyoming healthcare industry. The following membership establishes a comprehensive and diverse collection of individuals who have an in-depth understanding of the different areas in the healthcare continuum. The healthcare system is complicated and complex and will require additional non-voting participation through committee work and special invitation for expertise including, but not limited to, workforce experts such as Wyoming Department of Workforce Services, educational experts from local school districts, and other healthcare professionals as it pertains to the discussion such as pharmacists and speciality physicians. Committees will be established based on the direction of the full membership.

The recommended membership is as follows.

- Membership for the Wyoming Healthcare Authority
 - Governor Appointed Ex-Officio Members (State Agency Representatives)
 - Wyoming Governor's Office- Senior Health Policy Advisor
 - Wyoming Department of Health-Director
 - Wyoming Department of Insurance-Senior Health Policy Analyst
 - Wyoming Department of A&I-Program Manager for Employee Group Insurance
 - Wyoming Department of Family Services-Director
 - Joint Labor, Health, and Social Services Legislative Committee-Senate and House Chairpersons
 - Governor Appointed Board Members
 - Wyoming Licensed Physician Practicing in Wyoming
 - Wyoming Licensed Nurse Practicing in Wyoming
 - Wyoming Hospital Administrator
 - Wyoming Administrator of a Federally Qualified Health Center
 - Wyoming Licensed EMS Provider
 - Wyoming Licensed Behavioral Health Provider Practicing in Wyoming
 - Administrator or Dean from a Wyoming higher education institution

- Wyoming Business owner
- Private Insurance Carrier/Self Insured Employer
- Marketplace Insurance Carrier
- Wind River Tribal Member
- Consumer-Member At-Large

Recommendation and Timeline:

- Pending Legislative approval, the Authority will become operational in July of the year approved by statute.
- The current Governor's Health Task Force will continue to meet and focus on objectives set forth by the current coordinating body.

(This is a guiding document for the initiation of the Wyoming Healthcare Authority, and has the flexibility to change direction based on immediate issues requiring attention in Wyoming).