



WYOMING LEGISLATIVE SERVICE OFFICE

Memorandum

DATE September 1, 2025
TO Members, Subcommittee on Wyoming Department of Health Budget
FROM Elizabeth Martineau, Senior Fiscal Analyst
SUBJECT Background on Wyoming Department of Health Budget

This memorandum provides information about the Wyoming Department of Health budget as compiled by Legislative Service Office (LSO) staff.

Request 1. Summarize the optional Medicaid services authorized by the Legislature.

Although federal law allows states to cover a wide range of optional services approved by the Center for Medicare and Medicaid Services (CMS), Wyoming only offers a limited number of these optional services.¹ Table 1 summarizes the optional services the Legislature has authorized and identifies the relevant legislation for those added after FY 2003. As a caveat, Table 1 does not include those optional services related to certain facilities, existing Medicaid waivers (e.g., Home and Community Based Services waivers) or optional services that the Legislature has approved only for a limited time (e.g., extended postpartum coverage as found in **2023 Session Laws, Chapter 152**, which has a sunset of March 21, 2027). While some of these services are optional for adults, they may otherwise be mandatory for children.

These optional services can be found in the WDH, Healthcare Financing Division, in Unit 0470, Optional Services – Adult. For the 2025-2026 biennium, the total appropriation for Unit 0470 is \$13,212,438 (\$5,795,979 GF and \$7,416,459 FF).² The WDH expends funds in Unit 0470 primarily from the 600 series (Client/Recipient Benefits Paid) with \$18,330 in the 300 series (Cost Allocation).

Table 1. Authorized Optional Medicaid Services, FY 2003 through FY 2025.

Optional Services	Short Description	Authorizing Legislation
Podiatry	Services provided by a licensed podiatrist upon referral of a qualified practitioner.	2023 SL, Ch. 80
Pharmacist services	Professional services provided by a licensed pharmacists.	2023 SL, Ch. 107
Dietitian	Services provided by a licensed dietician upon referral of a qualified practitioner.	2016 SL, Ch. 3
Hospice	Services delivered in a member's home, hospice facility, or a nursing facility under a physician's order to terminally ill individuals. These services are only for care related to the terminal illness during the last months of the person's life.	2013 SL, Ch. 111
Audiologist and hearing aids	Services of an audiologist and hearing aids, hearing aid molds and fittings for eligible adults	2009 SL, Ch. 152

¹ For reference, a list of all mandatory and optional Medicaid benefits, as maintained by CMS, can be found here: <https://www.medicaid.gov/medicaid/benefits/mandatory-optional-medicaid-benefits>.

² The Legislature added an additional \$90,000 GF to Unit 0470 in 2024 Session Laws, Chapter 94, to provide hearing aids, hearing aid molds and fittings to eligible adults.

Optional Services	Short Description	Authorizing Legislation
Transplants (kidney, liver and bone marrow)	All medically necessary services related medically necessary organ transplants.	2004 SL, Ch. 43
Occupational therapist	Rehabilitative therapy under written orders of a qualified medical practitioner, when provided through a hospital, qualified medical practitioner's office or by an independent occupational, physical, or speech therapist.	2003 SL, Ch. 92
Ambulatory Surgical Center	Outpatient surgeries performed in a free-standing facility.	Authorized before 2003
Behavioral Health (including mental health and substance abuse related services)	Outpatient and community-based behavioral health services for Wyoming Medicaid clients who are experiencing mental health and/or substance use symptoms.	Authorized before 2003
Dental	Dental benefits including basic cleaning, dental x-rays, exams, extractions, and repair/realignment of existing dentures.	Authorized before 2003
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	Medicaid may cover a member's specific medical equipment if it is medically necessary or can restore a member's level of functionality.	Authorized before 2003
End Stage Renal Disease Clinic (ESRD)	All medically necessary services related to end stage renal disease care.	Authorized before 2003
Vision and optometrist services	Eye exams to diagnose an eye disease or injury, treatment of age-related macular degeneration, and office visits for eye disease or injury. Glasses and contact lenses are not covered.	Authorized before 2003
Certain Physician and Other Practitioner Services ¹	Services provided by physicians and other practitioners, with limits (e.g., hospital outpatient departments, physician offices, and optometrist offices have a maximum of 12 visits per calendar year for individuals over age 21.) There are no limits for family planning visits, health check services, or emergency services.	Authorized before 2003
Physical therapy	Rehabilitative therapy under written orders of a qualified medical practitioner, when provided through a hospital, qualified medical practitioner's office or by an independent occupational, physical, or speech therapist.	Authorized before 2003
Prescription drugs	Medicaid covers most prescription drugs and specific over-the-counter drugs. A prescription is required for all drugs for most individuals. Co-payments may apply for members aged 21 and older.	Authorized before 2003
Targeted case management	A care coordination benefit to assist eligible individuals in gaining access to needed medical, social, educational, and other services.	Authorized before 2003

Source: LSO staff review of budget requests, legislation, and W.S. 42-4-103 (Authorized services and supplies), as well as the Wyoming Department of Health **2024 Medicaid Annual Report** (released February 2025) and the **Wyoming Medicaid Handbook** for adults.

¹ The following are mandatory "Physician and Other Practitioner Services" for all populations including: Physician services (1905(a)(5), 42 CFR 440.50); Home health services (1905(a)(7), 42 CFR 440.70 and 42 CFR 441.15); Nurse Midwife services (1905(a)(17), 42 CFR 440.165 and 42 CFR 441.21); and, Certified pediatric and family nurse practitioner services (1905(a)(21), 42 CFR 440.166(b) and 42 CFR 441.22).

Request 2. Summarize the Department of Health 2025-2026 budget, by unit.

A summary of the WDH 2025-2026 budget, by unit, is found in Attachment A. Units shaded in light grey do not have any General Fund appropriations. As a caveat, because the Legislature granted flexibility to the WDH through **2024 Session Laws, Chapter 305** to move funds internally within the agency, Attachment A only summarizes the original, authorized legislative appropriations for each unit.³ Additionally, the short descriptions included in Attachment A are based on LSO staff understanding of the unit after reviewing the budget requests, legislative appropriations, and WDH website.

For reference, the WDH submitted additional information to the Committee regarding proposed budget reductions during the 2017–2018 and 2021–2022 biennia. The WDH also submitted a budget roadmap for the 2025-2026 biennium. These reports include further details on WDH programs that may be helpful.

- Attachment B - 2017-2018 WDH Budget Reduction Update: Joint Appropriations Committee (submitted December 2016)
- Attachment C - 2021-2022 WDH Budget Reduction Plan (submitted December 2020)
- Attachment D - 2025-2026 WDH Budget Road Map (submitted December 2024)

³ Additionally, Attachment A does not take into account those appropriations that were effective immediately.

Attachment A – Wyoming Department of Health 2017-2018 biennium through 2025-2026 biennium Budget Summary, by unit.

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0100 - Director's Office	0101 - Director's Office	This administrative unit oversees and supports the four WDH operating divisions and five state-owned healthcare facilities. This unit includes the Director's Unit for Policy, Research and Evaluation, fiscal services, office administration, the Public Information Officer and the Office of Privacy, Security and Contracts.	2025-2026	10,460,148	1,535,966	30,246	12,026,360
			2023-2024	9,010,845	1,415,608	30,163	10,456,616
			2021-2022	9,617,904	1,387,220	30,163	11,035,287
			2019-2020	10,977,092	1,279,721	30,163	12,286,976
			2017-2018	9,512,616	1,244,581	30,163	10,787,360
0100 - Director's Office	0130 - Vital Statistics	This administrative unit helps the public with vital records (i.e., birth, death, marriage and divorce). Vital records are filed with the registrar in the county of occurrence and recorded with the State.	2025-2026	1,661,522	668,281	282,795	2,612,598
			2023-2024	1,042,720	586,898	245,290	1,874,908
			2021-2022	1,059,989	591,889	245,171	1,897,049
			2019-2020	1,091,946	568,312	182,651	1,842,909
			2017-2018	1,145,779	558,320	179,454	1,883,553
0400 - Health Care Financing	0401 - HCF Admin	This administrative unit oversees and supports the Health Care Financing Division which includes the Wyoming Medicaid Program and the Medication Donation Program.	2025-2026	33,058,108	73,126,770	416,149	106,601,027
			2023-2024	29,810,798	57,960,913	420,000	88,191,711
			2021-2022	28,937,906	52,896,288	117,659	81,951,853
			2019-2020	29,435,102	63,440,998	14,020,000	106,896,100
			2017-2018	28,803,313	56,388,896	20,000	85,212,209
0400 - Health Care Financing	0420 - Children's Health Insurance Program (CHIP)	The SCHIP provides health insurance for eligible, uninsured children in families with income between 155% to 200% of the Federal Poverty Level (FPL) for children birth through 5 years of age, and 134% to 200% FPL for children 6 through 18 years of age.	2025-2026	7,040,472	15,618,818	0	22,659,290
			2023-2024	3,473,703	21,052,866	0	24,526,569
			2021-2022	5,198,703	19,327,866	0	24,526,569
			2019-2020	5,082,688	27,497,667	0	32,580,355
			2017-2018	3,666,760	26,148,795	0	29,815,555
0400 - Health Care Financing	0431 - Medicare Part D Clawback	The WDH uses these funds to meet the State's obligation to reimburse the federal government for a portion of the cost of providing prescription drug coverage for low-income Medicare individuals who are also eligible for Medicaid. These individuals are also referred to as "dually eligible" or "dually enrolled".	2025-2026	38,555,094	0	0	38,555,094
			2023-2024	29,223,574	0	0	29,223,574
			2021-2022	36,781,527	0	0	36,781,527
			2019-2020	29,223,574	0	0	29,223,574
			2017-2018	22,731,085	0	0	22,514,842
0400 - Health Care Financing	0432 - Dual Eligible Excluded Drugs	The WDH uses these funds to pay for those dually enrolled individuals with required medications that are not covered by the Medicare Plan D program.	2025-2026	77,500	77,714	0	155,214
			2023-2024	77,500	77,500	0	155,000
			2021-2022	77,500	77,500	0	155,000
			2019-2020	77,500	77,500	0	155,000
			2017-2018	77,500	77,500	0	155,000

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0400 - Health Care Financing	0433 - Medicare Crossovers	The WDH uses these funds to pay the required co-payments and co-insurance for certain dually enrolled individuals. In these instances, Medicare pays the primary medical claims, and Wyoming Medicaid pays its portion of the remaining deductibles and co-insurance.	2025-2026	7,528,494	7,549,251	0	15,077,745
			2023-2024	7,528,494	7,528,494	0	15,056,988
			2021-2022	7,528,494	7,528,494	0	15,056,988
			2019-2020	7,528,494	7,528,494	0	15,056,988
			2017-2018	7,528,494	7,528,494	0	15,056,988
0400 - Health Care Financing	0450 - Medicare Buy-in Premiums	The WDH uses these funds to pay premiums for Medicare Parts A and B on behalf of its dually eligible individuals. The federal government sets the monthly Medicare premiums and the annual co-insurance and deductible levels, and Wyoming Medicaid is required to pay these amounts.	2025-2026	35,195,025	29,836,972	0	65,031,997
			2023-2024	25,518,858	20,125,124	0	45,643,982
			2021-2022	24,835,221	12,941,487	0	37,776,708
			2019-2020	24,018,858	12,125,124	0	36,143,982
			2017-2018	12,577,444	14,888,734	0	27,466,178
0400 - Health Care Financing	0451 - Wyoming Health Insurance Premiums	The WDH uses these funds to pay the premiums for a limited number of Medicaid eligible individuals when the individuals have access to private insurance, and it is determined cost effective to Medicaid to continue their private insurance coverage when they enroll in Medicaid. Since both conditions are rare, this program only serves approximately 10-20 individuals per year.	2025-2026	37,500	37,603	0	75,103
			2023-2024	37,500	37,500	0	75,000
			2021-2022	37,500	37,500	0	75,000
			2019-2020	37,500	37,500	0	75,000
			2017-2018	37,500	37,500	0	75,000
0400 - Health Care Financing	0460 - Adult Services	Medicaid provides basic health insurance coverage for approximately 30,000 eligible adults. The WDH uses these funds to provide the basic health care services that are mandated under the Social Security Act for all Medicaid beneficiaries.	2025-2026	42,392,465	117,053,759	49,789,563	209,235,787
			2023-2024	32,339,718	120,893,517	50,870,991	204,104,226
			2021-2022	36,807,004	93,393,518	28,947,365	159,147,887
			2019-2020	87,652,589	91,046,265	10,370,991	189,069,845
			2017-2018	85,452,589	91,046,265	10,370,991	186,869,845
0400 - Health Care Financing	0461 - Children Services	Medicaid provides basic health insurance coverage to approximately 51,000 eligible, low-income children. The WDH uses these funds to provide the basic health care services that are mandated under the Social Security Act for all Medicaid beneficiaries, as well as those mandatory under the Early and Periodic Screen, Diagnosis, and Treatment.	2025-2026	138,953,064	177,520,972	5,000,000	321,474,036
			2023-2024	137,828,064	175,929,871	5,000,000	318,757,935
			2021-2022	135,953,064	169,054,871	0	305,007,935
			2019-2020	138,453,064	171,554,871	0	310,007,935
			2017-2018	138,236,821	171,554,871	0	309,791,692
0400 - Health Care Financing	0462 - Out of Home Placements - Children	The WDH uses these funds to pay for the medical services for approximately 3,500 children who are in custody of the Department of Family Services.	2025-2026	13,528,238	10,261,403	0	23,789,641
			2023-2024	10,574,833	7,274,835	0	17,849,668
			2021-2022	10,251,535	12,028,239	1,476,702	23,756,476
			2019-2020	13,528,238	13,528,239	0	27,056,477
			2017-2018	13,528,238	13,528,239	0	27,056,477

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0400 - Health Care Financing	0463 - Nursing Facility Services	The WDH uses these funds to pay for the mandatory nursing facility and skilled nursing facility services.	2025-2026	114,070,422	155,640,553	37,060,656	306,771,631
			2023-2024	97,570,422	144,317,465	37,000,000	278,887,887
			2021-2022	90,936,884	117,183,927	22,000,000	230,120,811
			2019-2020	97,158,322	114,403,359	22,000,000	233,561,681
			2017-2018	78,877,902	108,903,359	22,000,000	209,781,261
			2025-2026	963,924	0	0	963,924
0400 - Health Care Financing	0464 - Hospice	These funds are used by the WDH to pay for room and board for eligible individuals in stand-alone hospice facilities, which are not reimbursable under Medicaid.	2023-2024	513,924	0	0	513,924
			2021-2022	513,924	0	0	513,924
			2019-2020	513,924	0	0	513,924
			2017-2018	513,924	0	0	513,924
			2025-2026	5,795,979	7,416,459	0	13,212,438
			2023-2024	4,955,979	6,648,129	0	11,604,108
0400 - Health Care Financing	0470 - Optional Services - Adult	The WDH uses these funds to provide approved optional services such as dental, optometrist services, and medically necessary organ transplants. According to the WDH, while these benefits may be optional under federal law, many of these services are lower cost alternatives to mandatory benefits, or are essential to effective medical treatment, such as prescription drugs.	2021-2022	5,330,979	6,648,129	375,000	12,354,108
			2019-2020	3,456,996	4,399,146	0	7,856,142
			2017-2018	2,707,335	3,649,485	0	6,356,820
			2025-2026	0	92,552,358	1,363,010	93,915,368
			2023-2024	0	92,408,210	1,345,860	93,754,070
			2021-2022	0	47,407,830	1,345,479	48,753,309
0400 - Health Care Financing	0471 - Indian Health Services (IHS)	The WDH uses these funds to pay for Medicaid services provided by the Indian Health Service and in tribal facilities on an encounter basis.	2019-2020	0	47,404,679	1,342,329	48,747,008
			2017-2018	0	47,414,417	1,352,000	48,766,417
			2025-2026	20,291,051	20,346,995	0	40,638,046
			2023-2024	20,291,051	20,291,051	0	40,582,102
			2021-2022	20,291,051	20,291,051	0	40,582,102
			2019-2020	20,491,051	20,491,051	0	40,982,102
0400 - Health Care Financing	0472 - Wyoming Life Resource Center (ICFMR)	The WDH uses these funds to pay for health care services at Wyoming's only Intermediate Care Facility for the Intellectually Disabled, the Wyoming Life Resource Center (WLRC) in Lander. This service is unique to Medicaid and this type of specialty residential care for individuals with developmental, intellectual, or acquired brain injuries is not commonly covered by other payers.	2017-2018	20,491,051	20,491,051	0	40,982,102
			2025-2026	42,836,177	37,717,065	0	80,553,242
			2023-2024	42,836,177	37,598,445	0	80,434,622
			2021-2022	48,261,177	43,023,445	0	91,284,622
			2019-2020	49,015,873	43,378,140	0	73,790,142
			2017-2018	26,061,137	29,012,985	0	47,226,105
0400 - Health Care Financing	0483 - Community Choices Waiver ¹	The WDH uses these funds for the Home and Community-Based Services Community Choices Waiver, which offers care in the home or an assisted living facility to approximately 2,900 people ages 19 years and older who are functionally and financially eligible for Medicaid-reimbursed nursing home care.	2025-2026	42,836,177	37,717,065	0	80,553,242
			2023-2024	42,836,177	37,598,445	0	80,434,622
			2021-2022	48,261,177	43,023,445	0	91,284,622
			2019-2020	49,015,873	43,378,140	0	73,790,142
			2017-2018	26,061,137	29,012,985	0	47,226,105
			2025-2026	42,836,177	37,717,065	0	80,553,242

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0400 - Health Care Financing	0485 - Comprehensive Waiver ²	The WDH uses these funds to provide services to approximately 1,900 individuals with developmental, intellectual, or acquired brain related disabilities, such as 24-hour residential support. Participants receive individualized budget amounts that are developed based on a participant's assessed functional capabilities.	2025-2026	136,198,842	158,864,857	1,450,000	296,513,699
			2023-2024	114,957,717	137,299,799	1,450,000	253,707,516
			2021-2022	106,572,049	117,490,601	7,526,470	231,589,120
			2019-2020	107,479,011	113,771,094	2,300,000	223,550,105
			2017-2018	105,280,947	110,573,029	1,500,000	208,052,040
0400 - Health Care Financing	0486 - Supportive Services Waiver	The WDH uses these funds to promote independence and community integration by providing services to approximately 750 participants allowing them to live in their homes or community settings. The Supports Waiver is designed to provide more flexibility within a lower, set budget amount for waiver eligible participants when purchasing services and is typically used to provide more immediate services to individuals coming off the waiting lists.	2025-2026	11,730,562	11,652,274	0	23,382,836
			2023-2024	11,730,562	11,630,562	0	23,361,124
			2021-2022	7,974,923	7,874,923	0	15,849,846
			2019-2020	8,093,093	7,993,093	0	16,086,186
			2017-2018	8,093,093	7,993,093	0	16,086,186
0500 - Public Health	0501 - Public Health Division Administration	This administrative unit oversees and supports the Public Health Division including the Community Health, the Heath Readiness and Response, and the Public Health Sciences sections.	2025-2026	1,598,212	298,241	750,000	2,646,453
			2023-2024	1,456,273	267,297	150,000	1,873,570
			2021-2022	1,454,105	266,402	150,000	1,870,507
			2019-2020	1,578,474	210,362	150,000	1,938,836
			2017-2018	1,604,180	212,425	150,000	1,966,605
0500 - Public Health	0502 - Public Health Preparedness	The Public Health and Preparedness and Response unit strengthens and coordinates state and local public health preparedness and response to all hazards including acts of terrorism, infectious disease outbreak, pandemics, natural disasters and public health emergencies.	2025-2026	0	11,370,144	0	11,370,144
			2023-2024	0	11,112,784	0	11,112,784
			2021-2022	0	11,346,272	0	11,346,272
			2019-2020	0	11,370,443	0	11,370,443
			2017-2018	0	11,380,251	0	11,380,251
0500 - Public Health	0503 - Emerg Med SVS & Hospital Preparedness	The Office of Emergency Medical Services provides regulatory oversight of hospital trauma programs, licenses ambulance services and EMS personnel, assists with local EMS and trauma system design and improvement, builds capacity for response and mitigation of emergencies and disasters, assists local agencies in obtaining training and education.	2025-2026	1,756,347	2,618,047	19,535	4,393,929
			2023-2024	1,370,546	2,571,212	19,481	3,961,239
			2021-2022	1,599,533	2,570,230	19,481	4,189,244
			2019-2020	1,914,292	2,509,653	19,481	4,443,426
			2017-2018	1,898,861	2,491,031	19,481	4,409,373
0500 - Public Health	0510 - Rural And Frontier Health	The Rural and Frontier Health Unit coordinates programs aimed at improving access to healthcare in rural and frontier Wyoming communities by supporting workforce development, care delivery, and local health infrastructure.	2025-2026	1,154,275	9,431,929	9,526	10,595,730
			2023-2024	1,017,270	9,295,975	9,500	10,322,745
			2021-2022	1,365,385	9,335,607	9,500	10,710,492
			2019-2020	1,754,351	9,366,594	9,500	11,130,445
			2017-2018	1,718,230	9,286,489	9,500	11,014,219

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0500 - Public Health	0522 - Immunization	The Immunization unit is funded through a combination of state and federal funds for the control and management of vaccine-preventable diseases, the oversight of school and childcare immunization requirements, and the operation and modernization of the Wyoming Immunization Registry. This unit also operates the state-funded Wyoming Vaccinates Important People and Adult Hepatitis Vaccine Programs, and the federally funded Vaccines for Children Program.	2025-2026	3,477,460	3,464,293	69,299	7,011,052
			2023-2024	3,476,660	3,465,924	69,108	7,011,692
			2021-2022	4,321,702	2,271,905	69,108	6,662,715
			2019-2020	8,706,501	2,223,891	69,108	10,999,500
			2017-2018	8,969,166	2,332,471	69,108	11,370,745
0500 - Public Health	0523 - Maternal and Child Services	The Maternal and Child Health unit supports multiple programs to improve the health and well-being of Wyoming families and communities by supporting and collaborating on public health activities that benefit the health of mothers, infants, children, youth, and young adults, including those with special health care needs.	2025-2026	2,927,926	3,356,332	1,324,896	7,609,154
			2023-2024	2,913,279	3,179,184	1,311,485	7,403,948
			2021-2022	2,957,027	3,178,870	1,296,911	7,432,808
			2019-2020	3,171,488	3,142,357	1,281,529	7,595,374
			2017-2018	2,992,195	3,080,875	1,280,301	7,353,371
0500 - Public Health	0524 - Nurse Home Visitation	The Hand in Hand Home Visitation Program is a voluntary home visitation program provided by Public Health Nursing staff in all 23 Wyoming counties and in coordination with the Maternal and Child Services unit. The program provides prenatal, postnatal, and infant home visitation services to improve pregnancy outcomes and foster healthy beginnings for infants and toddlers through age 2.	2025-2026	0	0	3,525,193	3,525,193
			2023-2024	0	0	3,515,500	3,515,500
			2021-2022	0	0	3,515,500	3,515,500
			2019-2020	0	0	3,515,500	3,515,500
			2017-2018	0	0	3,515,500	3,515,500
0500 - Public Health	0525 - Women, Infants and Children	The Special Supplemental Nutrition Program for Women, Infants, and Children is a short-term intervention program for low-income women who are pregnant, breastfeeding, or just had a baby, and families with children under the age of 5.	2025-2026	1,634,837	18,303,206	4,973,675	24,911,718
			2023-2024	1,616,947	17,858,542	4,960,000	24,435,489
			2021-2022	1,791,204	17,850,560	4,960,000	24,601,764
			2019-2020	1,518,988	17,867,907	4,960,000	24,346,895
			2017-2018	1,554,875	17,706,275	4,960,000	24,221,150
0500 - Public Health	0526 - Public Health Nursing	The Public Health Nursing unit ensures statewide public health nursing infrastructure, and local Public Health Nursing offices provide essential services to Wyoming residents. PHN offices across the state offer maternal and child health services, including home-visiting; communicable disease prevention, testing, and treatment; immunizations; Ryan White Case Management; chronic disease prevention, including education regarding diabetes, blood pressure, cholesterol, and general healthy living; assessments for Medicaid long-term care services; public health emergency preparedness; and various educational presentations throughout the communities. Services vary by county.	2025-2026	14,514,026	0	5,367,059	19,881,085
			2023-2024	12,653,540	0	4,968,749	17,622,289
			2021-2022	12,685,907	0	5,556,804	18,242,711
			2019-2020	12,455,073	0	5,376,870	17,831,943
			2017-2018	12,477,983	0	5,203,039	17,681,022

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0500 - Public Health	0531 - Cancer Screening	The Cancer Services Program reimburses participating providers for cancer screening and diagnostic services (i.e., mammograms, Pap tests, evidenced-stool tests, colonoscopies, biopsies) for eligible Wyoming residents. Eligibility is based on age, income, risk factors, and insurance status. The Cancer Services Program also conducts cancer surveillance activities, public outreach and education, patient navigation, radon activities, and outreach projects on the Wind River Indian Reservation.	2025-2026	660,621	2,725,609	2,375,493	5,761,723
			2023-2024	614,889	2,588,514	2,317,275	5,520,678
			2021-2022	740,861	2,651,146	2,322,526	5,714,533
			2019-2020	922,777	2,521,326	2,300,401	5,744,504
			2017-2018	919,179	2,229,198	2,294,731	5,443,108
0500 - Public Health	0532 - Public Health Laboratory	The Public Health Laboratory provides public health-related disease testing, drug and alcohol toxicology, and bioterrorism preparedness. The lab has three diagnostic sections: microbiology, preparedness, and chemical testing.	2025-2026	5,374,468	688,818	1,467,139	7,530,425
			2023-2024	4,134,575	620,992	1,448,155	6,203,722
			2021-2022	4,089,503	574,535	1,447,264	6,111,302
			2019-2020	4,017,442	543,213	1,439,592	6,000,247
			2017-2018	4,043,968	544,180	1,440,074	6,028,222
0500 - Public Health	0534 - Communicable Disease	The Communicable Disease unit is divided into three programs: prevention, surveillance, and treatment to address communicable diseases including: HIV, hepatitis B and C, tuberculosis, chlamydia, gonorrhea and syphilis. The Communicable Disease unit provides early screening, intervention, and treatment for individuals at risk for or diagnosed with a communicable disease and provides a safety net of healthcare services for diagnosed individuals.	2025-2026	495,867	4,565,296	1,153,215	6,214,378
			2023-2024	495,867	4,223,915	1,150,044	5,869,826
			2021-2022	595,350	4,219,608	1,150,044	5,965,002
			2019-2020	694,834	4,112,067	1,150,044	5,956,945
			2017-2018	796,436	4,067,355	1,150,044	6,013,835
0500 - Public Health	0538 - Chronic Disease Epidemiology & Surveillance	The purpose of the Wyoming Behavioral Risk Factor Surveillance System is to monitor the behaviors that contribute to the occurrence or prevention of chronic diseases, injuries, and other causes of premature mortality and morbidity in the adult population of Wyoming. The WDH collects data by telephone survey and aggregate results are disseminated to WDH programs and partners for their use in assessing health and healthcare trends, establishing program priorities, developing policy, and targeting relevant groups.	2025-2026	332,319	0	129,784	462,103
			2023-2024	301,095	0	130,425	431,520
			2021-2022	301,204	0	130,370	431,574
			2019-2020	290,948	0	130,221	421,169
			2017-2018	284,382	0	132,487	416,869
0500 - Public Health	0539 - Injury & Chronic Disease Prevention	The Wyoming Injury and Violence Prevention Program promotes evidence-based strategies to prevent unintentional (falls, traumatic brain injury) and intentional (suicide, violence) injury. The Chronic Disease Prevention Program coordinates and implements evidence-based policies, practices, and programs addressing the growing burden of chronic disease.	2025-2026	1,032,543	3,229,590	587,808	4,849,941
			2023-2024	929,475	3,051,269	550,754	4,531,498
			2021-2022	931,321	2,993,406	550,385	4,475,112
			2019-2020	523,809	2,835,102	548,889	3,907,800
			2017-2018	530,308	2,785,823	349,824	3,665,955

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
0500 - Public Health	0540 - Infectious Disease Epidemiology	The Infectious Disease Epidemiology unit is responsible for investigations of infectious diseases statewide. Staff in this unit work to address infectious disease threats, support activities that enhance the ability to identify and monitor the occurrence of infectious diseases, characterize the causes of diseases, identify and respond to outbreaks, use public health data for priority setting and policy development, and assess the effectiveness of these activities.	2025-2026	1,109,526	2,979,041	80,166	4,168,733
			2023-2024	1,059,162	1,672,460	79,946	2,811,568
			2021-2022	1,032,426	1,661,132	79,946	2,773,504
			2019-2020	1,008,941	1,603,395	79,946	2,692,282
			2017-2018	1,045,561	1,449,431	79,946	2,574,938
0500 - Public Health	0550 - Substance Abuse & Tobacco Prevention	The Wyoming Substance Use Prevention Program implements community and statewide approaches to prevent the abuse of alcohol, opioids, and other drugs (e.g., alcohol retailer education, compliance checks, etc.). The Wyoming Tobacco Prevention and Control Program implements evidence-based interventions to reduce exposure to secondhand smoke, reduce youth initiation, and promote tobacco cessation.	2025-2026	2,239,748	2,732,587	7,638,448	12,610,783
			2023-2024	2,239,926	2,682,053	7,581,814	12,503,793
			2021-2022	2,239,844	2,688,255	7,570,552	12,498,651
			2019-2020	1,793,767	2,698,756	8,194,443	12,686,966
			2017-2018	2,466,354	2,722,713	8,388,729	13,577,796
0500 - Public Health	0585 - WIC ARP	These federal funds are dedicated to technology and modernization updates for the Wyoming Women, Infants and Children unit. Funding is expected to be available through September 30, 2027.	2025-2026	0	722,237	0	722,237
			2023-2024		743,140		743,140
			2021-2022				
			2019-2020				
			2017-2018				
2500 - Behavioral Health	2501 - Behavioral Health Administration	This administrative unit oversees and supports the Behavioral Health Division and its community-based programs, including developmental preschools, community mental health and substance abuse centers, and two state-operated facilities.	2025-2026	4,834,430	853,138	1,003,891	6,691,459
			2023-2024	9,820,121	67,561	929,602	10,817,284
			2021-2022	1,624,927	67,561	929,602	2,622,090
			2019-2020	1,962,393	67,561	929,602	2,959,556
			2017-2018	1,968,112	6,942	929,602	2,904,656
2500 - Behavioral Health	2502 - Recovery Supports	The WDH uses funds in this unit to support contracts for treatment activities to improve and enhance the recovery of individuals with mental illness or substance use disorders. Services and programs include the Projects for Assistance in Transition from Homelessness, the Mental Health Ombudsman program, Guardianship services, and Quality of Life Supports for clients of community behavioral health centers.	2025-2026	982,807	4,854,735	102,873	5,940,415
			2023-2024	982,807	4,840,986	102,590	5,926,383
			2021-2022	4,025,781	4,832,343	102,590	8,960,714
			2019-2020	4,662,516	4,762,675	102,590	9,527,781
			2017-2018	5,120,303	3,061,396	102,590	8,284,289
2500 - Behavioral Health	2503 - Court Supervised Treatment	In accordance with 2023 Session Laws, Chapter 1, on July 1, 2024, the WDH transferred the Court Supervised Treatment program to the Supreme Court.	2025-2026	0	0	0	0
			2023-2024	2,928,374	153,356	3,798,072	6,879,802
			2021-2022	2,928,334	155,343	3,495,572	6,579,249

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
2500 - Behavioral Health	2505 - Wyoming State Hospital	The Wyoming State Hospital in Evanston is a licensed psychiatric hospital providing treatment, rehabilitation, and recovery to individuals admitted to the facility. The State Hospital has a capacity of 104 inpatient beds: 72 for acute psychiatric civil commitments under Title 25 and 32 for forensic services under Title 7.	2019-2020	3,722,596	153,376	3,495,572	7,371,544
			2017-2018	4,718,903	154,763	2,495,572	7,369,238
			2025-2026	85,857,748	171,364	4,786,565	90,815,677
			2023-2024	215,896	0	75,395,379	75,611,275
			2021-2022	79,645,794	0	3,364,266	83,010,060
			2019-2020	69,268,620	0	3,459,420	72,728,040
			2017-2018	67,028,452	0	3,407,823	70,436,275
			2025-2026	40,501,531	0	0	40,501,531
			2023-2024	38,768,566	0	0	38,768,566
			2021-2022	35,144,024	0	0	35,144,024
2500 - Behavioral Health	2506 - Outpatient - Mental Health	The WDH uses these funds for contracts with community behavioral health centers to provide outpatient treatment for Wyoming residents working toward recovery from mental illness, including adults with Serious Mental Illness and children with Serious Emotional Disturbance who are at risk for of psychiatric hospitalization. Services include individual, group, and family therapy, medication management, case management and skills training.	2019-2020	38,768,568	0	0	38,768,568
			2017-2018	38,768,568	0	0	38,768,568
			2025-2026	7,033,363	5,336,894	9,572,983	21,943,240
			2023-2024	7,033,363	1,333,218	9,572,983	17,939,564
			2021-2022	6,377,456	1,333,218	9,572,983	17,283,657
			2019-2020	7,033,365	1,333,218	9,572,983	17,939,566
			2017-2018	7,033,365	1,331,516	9,572,983	17,937,864
			2025-2026	14,286,913	0	0	14,286,913
			2023-2024	14,286,913	0	0	14,286,913
			2021-2022	12,954,563	0	0	12,954,563
2500 - Behavioral Health	2507 - Outpatient - Substance Abuse	The WDH uses these funds for contracts with community behavioral health centers to provide outpatient treatment for substance use disorders, including alcohol or drug dependency, to Wyoming residents. Services include clinical screening and assessment, intensive outpatient treatment, individual and family therapies, and case management.	2019-2020	14,286,914	0	0	14,286,914
			2017-2018	14,286,914	0	0	14,286,914
			2025-2026	21,273,877	2,751,539	1,610,518	25,635,934
			2023-2024	21,273,877	2,743,974	1,610,518	25,628,369
			2021-2022	19,289,945	2,743,974	1,610,518	23,644,437
			2019-2020	21,273,878	2,743,974	1,610,518	25,628,370
			2017-2018	21,273,878	2,743,974	1,610,518	25,628,370
			2025-2026	21,273,877	2,751,539	1,610,518	25,635,934
			2023-2024	21,273,877	2,743,974	1,610,518	25,628,369
			2021-2022	19,289,945	2,743,974	1,610,518	23,644,437
2500 - Behavioral Health	2508 - Residential - Mental Health	The WDH uses these funds for contracts with community behavioral health centers to provide crisis stabilization and community housing for individuals with Serious Mental Illness, helping them improve personal functioning and live as independently as possible. Crisis stabilization serves as a diversion from more intensive interventions, such as hospitalization, while community housing, such as group homes and supported housing, offer a step-down option for individuals in recovery or transitioning from crisis stabilization.	2019-2020	14,286,914	0	0	14,286,914
			2017-2018	14,286,914	0	0	14,286,914
			2025-2026	21,273,877	2,751,539	1,610,518	25,635,934
			2023-2024	21,273,877	2,743,974	1,610,518	25,628,369
			2021-2022	19,289,945	2,743,974	1,610,518	23,644,437
			2019-2020	21,273,878	2,743,974	1,610,518	25,628,370
			2017-2018	21,273,878	2,743,974	1,610,518	25,628,370
			2025-2026	21,273,877	2,751,539	1,610,518	25,635,934
			2023-2024	21,273,877	2,743,974	1,610,518	25,628,369
			2021-2022	19,289,945	2,743,974	1,610,518	23,644,437
2500 - Behavioral Health	2509 - Residential - Substance Abuse	The WDH uses these funds for contracts with community behavioral health centers to provide 24-hour intensive services for substance use disorders, including alcohol or drug dependency, to Wyoming residents. Services include residential treatment, transitional support, and social detoxification.	2019-2020	21,273,878	2,743,974	1,610,518	25,628,370
			2017-2018	21,273,878	2,743,974	1,610,518	25,628,370
			2025-2026	21,273,877	2,751,539	1,610,518	25,635,934
			2023-2024	21,273,877	2,743,974	1,610,518	25,628,369
			2021-2022	19,289,945	2,743,974	1,610,518	23,644,437
			2019-2020	21,273,878	2,743,974	1,610,518	25,628,370
			2017-2018	21,273,878	2,743,974	1,610,518	25,628,370
			2025-2026	21,273,877	2,751,539	1,610,518	25,635,934
			2023-2024	21,273,877	2,743,974	1,610,518	25,628,369
			2021-2022	19,289,945	2,743,974	1,610,518	23,644,437

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
2500 - Behavioral Health	2510 - Preschool Services	The Early Intervention & Education Program provides early intervention, special education, and services related to children birth through age five (5) years with developmental delays or disabilities. Eligible children ages birth through 2 years are funded under Part C of the Individuals with Disabilities Education Act (IDEA) to receive early intervention, while eligible children ages 3 through 5 years are funded under Part B/619 of IDEA. The Behavioral Health Division contracts with 14 regional Child Development Centers to provide early childhood services.	2025-2026	75,714,096	7,349,836	9,674,961	92,738,893
			2023-2024	63,406,172	7,307,552	9,568,827	80,282,551
			2021-2022	59,184,213	2,312,024	7,391,624	68,887,861
			2019-2020	68,016,157	122,593	5,137,739	73,276,489
			2017-2018	65,877,528	122,593	5,191,980	71,192,101
2500 - Behavioral Health	2512 - Wyoming Life Resource Center	The WLRC in Lander is a 24/7 residential care facility certified as an Intermediate Care Facility for Individuals with Intellectual Disabilities. The facility has 20 dedicated behavioral beds for intermediate care for individuals with intellectual disabilities along with 80 additional beds that can be licensed for intermediate care or skilled nursing high medical and behavioral care. WLRC currently has an average census of approximately 50.	2025-2026	17,216,797	403	48,477,516	65,694,716
			2023-2024	15,966,057	0	43,943,258	59,909,315
			2021-2022	15,640,482	216,109	43,804,187	59,660,778
			2019-2020	15,586,391	216,109	41,625,196	57,427,696
			2017-2018	15,192,326	270,000	41,676,027	57,138,353
5000 - Aging	5001 - Administration	This administrative unit oversees and supports the Aging Division and its network of services providing care, ensuring safety, and promoting independent choices for Wyoming's older adults.	2025-2026	1,205,576	1,632,857	108,412	2,946,845
			2023-2024	1,129,212	1,562,977	108,114	2,800,303
			2021-2022	1,135,670	1,261,315	108,114	2,505,099
			2019-2020	1,224,539	1,206,103	108,114	2,538,756
			2017-2018	1,204,271	1,216,894	108,114	2,529,279
5000 - Aging	5002 - Senior Care	The WDH uses funds in this unit to provide statewide, community-based supportive services focused on helping seniors remain in their homes. Services include Title III-B (i.e., support services such as legal services, in-home support, and socialization), Title III-D (i.e., evidence-based health promotion and disease prevention), and Title III-E (i.e., support for family and informal caregivers). Funds are also used to support Wyoming Home Services, which provides assistance to individuals 18 years and over to foster self-sufficiency, prevent abuse, neglect or exploitation, maintain individuals in the least restrictive and safe environment, and prevent inappropriate or premature institutionalization.	2025-2026	6,011,480	5,420,126	0	11,431,606
			2023-2024	6,490,134	12,416,651	0	18,906,785
			2021-2022	2,086,639	4,805,831	1,374,947	8,267,417
			2019-2020	6,286,479	4,805,831	0	11,092,310
			2017-2018	5,786,479	4,805,831	0	10,592,310
5000 - Aging	5003 - Nutritional Services	The Nutrition Program provides hot nutritious meals meeting the one-third Recommended Dietary Allowance. These meals are available at	2025-2026	462,499	8,727,003	0	9,189,502
			2023-2024	462,499	8,707,783	0	9,170,282

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
		community focal points or they are delivered to an individual's home if they are unable to attend a congregate meal site.	2021-2022	462,499	6,971,250	0	7,433,749
			2019-2020	462,499	6,971,250	0	7,433,749
			2017-2018	462,499	6,971,250	0	7,433,749
5000 - Aging	5004 - Title VII-Elder Rights	The purpose of the Wyoming Long Term Care Ombudsman Program is to investigate, advocate, mediate, and resolve issues for individuals receiving long term care services and there is an opportunity for the individual to exercise their rights.	2025-2026	197,028	230,732	0	427,760
			2023-2024	197,028	230,179	0	427,207
			2021-2022	197,028	200,516	0	397,544
			2019-2020	197,028	200,516	0	397,544
			2017-2018	197,028	200,516	0	397,544
			2025-2026	250,000	0	0	250,000
			2023-2024	250,000	0	0	250,000
5000 - Aging	5005 - Senior Volunteer Service Program	The Senior Companion Program assists seniors with special needs. The Foster Grandparent Program matches low-income senior citizens aged 60 years and older with at-risk and special needs youth.	2021-2022	250,000	0	0	250,000
			2019-2020	250,000	0	0	250,000
			2017-2018	250,000	0	0	250,000
			2025-2026	10,706,048	0	0	10,706,048
			2023-2024	10,506,048	0	0	10,506,048
5000 - Aging	5007 - Wyoming Senior Services Board	The Wyoming Senior Services Board provides funding to eligible Wyoming Senior Centers to provide services to older adults that are also clients of Title III-B and Title III-C programs. The Wyoming Senior Services Board is authorized to oversee, in consultation with the WDH, the award and distribution of specially appropriated state funds to benefit Wyoming's older adults.	2021-2022	10,508,477	0	0	10,508,477
			2019-2020	10,533,907	0	0	10,533,907
			2017-2018	10,783,907	0	0	10,783,907
			2025-2026	1,302,094	4,577,869	0	5,879,963
			2023-2024	1,175,727	4,242,098	0	5,417,825
5000 - Aging	5010 - Healthcare Licensing & Surveys	The Healthcare Licensing and Surveys serves as the regulatory agency for licensure of healthcare facilities operating in Wyoming and has jurisdictional authority over fire safety and building codes for all construction and remodeling, except electrical installation, of any state-licensed healthcare facility. The unit also serves as the State Survey Agency for certification of healthcare facilities operating in Wyoming. Health Licensing and Surveys unit acts on behalf of the U.S. Secretary of Health and Human Services enforcing federal standards.	2021-2022	1,283,394	4,308,641	0	5,592,035
			2019-2020	1,977,915	4,137,749	0	6,115,664
			2017-2018	1,444,471	4,208,009	0	5,652,480
			2025-2026	5,263,640	0	77,627	5,341,267
			2023-2024	0	0	4,715,423	4,715,423
5000 - Aging	5040 - Pioneer Home	The Wyoming Pioneer Home (WPH) in Thermopolis is an assisted living facility licensed for 61 beds. The WPH provides a secure, dignified, and independent lifestyle for Wyoming's income limited senior and disabled residents who voluntarily seek admission into the facility. Admission is determined by the resident's current independent status and ambulation.	2021-2022	4,757,928	0	37,696	4,795,624
			2019-2020	4,536,671	0	33,047	4,569,718
			2017-2018	4,625,892	0	33,234	4,659,126
			2025-2026	5,263,640	0	77,627	5,341,267

Division	Unit	Unit Description	Biennium	GF	FF	OF	Total
5000 - Aging	5050 - Veteran's Home	The Veterans’ Home of Wyoming in Sheridan provides assisted living care to honorably discharged veterans. In addition, a 36-bed skilled nursing facility was recently constructed for those veterans in need of a higher level of care. Admission is determined by Veteran status, age, resident census and physical condition of applicant.	2025-2026	12,858,464	0	1,070,455	13,928,919
			2023-2024	5,148,724	0	7,818,160	12,966,884
			2021-2022	7,184,150	0	992,775	8,176,925
			2019-2020	7,344,205	0	992,316	8,336,521
			2017-2018	7,115,189	0	995,540	8,110,729
5000 - Aging	5060 - Retirement Center	The Wyoming Retirement Center (WRC) is a 90 bed facility in Basin that provides skilled nursing care to residents with mental health, dementia, and medical needs beyond what the private sector may be able or willing to provide. Among multiple other referral sources, the Wyoming Retirement Center also works with the Wyoming State Hospital and Wyoming Life Resource Center to provide long-term care to residents transitioning out of those facilities who have comorbid mental health and/or behavioral needs.	2025-2026	284,052	104,791	13,385,263	13,774,106
			2023-2024	284,052	104,503	12,167,365	12,555,920
			2021-2022	284,052	104,503	12,447,989	12,836,544
			2019-2020	284,052	104,503	11,805,900	12,194,455
			2017-2018	284,052	104,503	12,025,626	12,414,181
			Total Biennium	GF	FF	OF	Total
			2025-2026	1,004,925,205	1,025,974,727	214,734,719	2,245,634,651
			2023-2024	813,927,513	970,120,886	294,354,831	2,078,403,230
			2021-2022	878,038,062	820,105,334	176,125,263	1,874,268,659
			2019-2020 ^{3, 4}	951,345,293	828,355,777	158,344,655	1,919,441,854
			2017-2018 ^{3, 5}	880,047,343	796,526,318	142,644,981	1,801,852,446

Source: LSO staff review of budget requests, legislation, and the WDH website.

Notes

- 1. This unit includes appropriations for the Assisted Living Facility waiver services that were active during the 2017-2018 and 2019-2020 biennium.
- 2. This unit includes appropriations for the Acquired Brain Injury waiver services that were active during the 2017-2018 and 2019-2020 biennium.
- 3. The 2017-2018 biennium total and 2019-2020 biennium total does not include \$144,000 GF for respite care as these were specific purpose appropriations in a standalone unit that is no longer active.
- 4. The 2019-2020 biennium total includes \$21,370,000 GF for 2018 Session Laws, Chapter 134, Section 326 - 2017-2018 Department of Health Shortfall, effective immediately.
- 5. The 2017-2018 biennium total does not include \$50,646,733 FF for the Medicaid Management Information System replacement as this appropriation was in a standalone unit that is no longer active.

WDH Budget Reduction Update: Joint Appropriations Committee

December 13, 2016

Purpose

This document is intended to provide an update on budget reductions implemented by the Wyoming Department of Health (WDH) for the 2017-2018 biennium, totaling \$90,000,000 in state general funds. Some reductions are still in the process of being implemented and many impacts of the WDH's funding reductions are unknown at this time. The document will provide updates for each unit that was reduced, provide brief descriptions of each reduction as well as any available impacts of each reduction, for each WDH operating Division:

- Division of Healthcare Financing (Medicaid);
- Behavioral Health Division;
- Public Health Division; and,
- Aging Division.

Medicaid

The Medicaid program is the source for basic health care for approximately 88,000 categorically eligible Wyoming citizens every year. Clients include low-income adults with dependent children up to 56 percent of the Federal Poverty Level (FPL); pregnant women and children ages 0 – 5 up to 154 percent of FPL, and children ages 6 – 18 up to 133 percent of FPL; also eligible are aged, blind and disabled Supplemental Security Income recipients, recipients of adoption assistance and foster care, certain low-income Medicare beneficiaries, low income individuals who are institutionalized or who receive services under an approved Home and Community-Based Services Waiver, and other categorically eligible groups as defined in the Medicaid State Plan.

The Division of Healthcare Financing, (Medicaid and Kid Care CHIP) must reduce its 2017-2018 operating budget by \$54,175,549 General Fund in order to meet the WDH's requested budget reduction. The table below shows proposed budget reductions to Wyoming Medicaid by budgetary unit. Following the table we include a brief description of each reduction/initiative, identify impacted parties (where applicable), and outline the projected reduction achieved with a successful implementation.

Please note that many of the reductions in Medicaid affect multiple budgetary units, so it is difficult to tie each reduction (e.g., "Across-the-Board" Miscellaneous Provider Rate Cuts") and its impact to one specific unit (as in the other WDH Divisions).

Wyoming Medicaid Proposed Budget Reductions, 2017-2018

(Items in red are 'negative cuts' to the GF, i.e., FF increases)

Unit	Description	GF Reduction	FF Reduction	Positions (RIF)
Multiple	Provider Rate Reductions	\$8,801,787	\$9,472,931	0
0401	Administration Cost Reductions (5%)	\$1,535,331	\$2,962,378	
			(\$6,857,578)	
0420	Kid Care CHIP 88% Match Rate Savings	\$6,857,578	(FF increase)	0
0460	Enroll the End-Stage Renal Dialysis Facility as a 638 Facility (Tribally Owned)	\$87,500	(\$87,500)	
			(FF increase)	0
Multiple	100% FMAP for IHS/638 Tribal referred services	\$4,000,000	(\$4,000,000)	
			(FF increase)	0
0461	Magellan/CME Rates	\$2,160,000	\$2,160,000	

Unit	Description	GF Reduction	FF Reduction	Positions (RIF)
0483	Nursing Home Diversions through New Community Waiver Options ⁴	\$2,700,000	\$2,700,000	0
0484	Community First Choice Waiver Transition (6% FMAP Increase) - LTC/ALF Waiver	\$0	(\$2,700,000) (FF increase)	0
0483	LT-101 Performed Annually for LTC Waiver	\$227,000	\$227,000	0
0483 & 0484	Financial Management Services	\$282,000	\$282,000	0
Multiple	Behavioral Health Service Cap Limits and Prior Authorization	\$4,681,250	\$4,681,250	0
Multiple	Therapy Cap Limit Enforcement and Prior Authorization	\$525,000	\$525,000	0
Multiple	Home Health Services	\$656,250	\$656,250	0
0401	Hold Advisory Group Meetings as Webinars	\$30,000	\$30,000	0
Multiple	Federal Share on PI Recoveries	\$100,000	\$0	0
Multiple	Third Party Liability -Pharmacy	\$87,500	\$87,500	0
Multiple	Third Party Liability Process Improvement	\$921,489	\$921,489	0
0463	Nursing Facility Reserve/Hold Days	\$612,500	\$612,500	0
Multiple	J-Code Rebate on Existing Services	\$488,375	\$488,375	0
Multiple	J-Code Rebate on New Services (Crossover Claims)	\$75,000	\$75,000	0
Multiple	J-Code Pricing Standardization	\$380,000	\$380,000	0
0463	Patient Contribution to Swing Bed and ECC Clients	\$87,500	\$87,500	0
Multiple	Editing Lines on Encounter Priced Claims (FQHC, RHC)	\$87,500	\$87,500	0
Multiple	ASC Dental Code	\$1,025,621	\$1,025,621	0
Multiple	Anesthesia Codes- Reset Rates	\$166,250	\$166,250	0
Multiple	Lab/ Radiology Codes- Reset Rates	\$262,500	\$262,500	0
Multiple	Dental Codes Rates	\$525,350	\$525,350	0
0433	Medicare Crossover Claims pricing method	\$10,530,000	\$10,530,000	0
External	Title 25 - Medicaid coverage of non-IMD services	\$0	(\$706,875) (FF increase)	0
Multiple	Adult Dental Coverage (Eliminate)	\$1,750,000	\$1,750,000	0
Multiple	Adult Vision Coverage (Eliminate)	\$260,750	\$260,750	0
0430	PDAP (Eliminate)	\$750,000	\$0	0
0463	State Licensed Shelter Care	\$200,000	\$0	0
0460	End EID Program over 100% FPL	\$1,005,345	\$1,005,345	0
0460	End Breast and Cervical Cancer Coverage over 100% FPL	\$493,976	\$493,976	0
0486	DD Supports and Comprehensive Waivers ⁵	\$1,822,197 ⁶	\$1,822,197	0
Total		\$54,175,549	\$29,926,707	0

Descriptions and Impacts of Medicaid Reductions

Miscellaneous Across-the-board Provider Rate Cuts | Multiple Units

- Across-the-board rate cuts (excluding ID/DD waivers), implemented through RBRVS, OPPS, ASC rates, anesthesia, and eliminating 'percentage of billed' and realigning other rates.
- Implementation Date/Status: July 1, 2016, began phased implementation of reductions. Final reductions were implemented for claim dates of service beginning Nov. 1, 2016.
- Projected GF Reduction Amount per Biennium ~\$8,801,787 accompanied by a FMAP Reduction of ~\$9,472,931.

Admin Cost Reductions | Unit 0401

- This expenditure organization includes staff that provides administrative services for the entire Medicaid and Kid Care CHIP programs, including but not limited to, budget analysis and preparation, federal financial reporting, responsibility for compliance with policies, procedures and reporting related to fiscal management. Further, administration encompasses the design of Wyoming benefits, policies, reimbursement analysis and methodologies, and management of actuarial contracts, information system contracts, peer review contracts,

and coordination with federal partners. This staff also administers the Developmental Disability budget, the Eligibility and Benefit components of the program to include all staff and technical management systems.

- This is a 5% reduction in administration costs in all budget series (100, 200, 300, 600 –client transportation, 900 contracts, etc.
- This task includes multiple sub-tasks focused at reducing the amount of state general fund used for the Medicaid and Kid Care CHIP program administration. This will include efforts to reduce overall spending, as well as maximization of increased federal funding for various functions according to assigned tasks/projects and roles.
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$1,535,331 accompanied by a reduction in FMAP of \$2,962,378

Kid Care Children's Health Insurance Program (CHIP) 88% Match | Unit 0420

- Kid Care CHIP is Wyoming's Children's Health Insurance Program (CHIP). Kid Care CHIP provides health insurance to uninsured children in families with income between 155% to 200% of the Federal Poverty Level (FPL) for children birth through five years of age, and 134% to 200% FPL for children six through eighteen years of age. As of December 1, 2016 there were 3,289 children enrolled in Kid Care CHIP. Children enrolled in the program receive benefits from Blue Cross Blue Shield and Delta Dental of Wyoming, including inpatient and outpatient hospital benefits, physician services, lab & x-ray, wellness/preventive care, mental health, age appropriate immunizations, prescription drugs, vision & dental. Families share in the cost of their child's insurance through co-payments for particular services used. Blue Cross Blue Shield (BCBS) of Wyoming, through a competitive bid process, was awarded the current contract which extends through June 30, 2017. The contract, for which BCBS was the sole bidder, represents an average premium of \$228.02 per child per month. The match rate for CHIP increased to 88% on October 1, 2015.
- Description: This change in match will result in a savings in GF with no impact to the program.
- Implementation Date/Status: October 1, 2015, implemented
- Projected GF Reduction Amount per Biennium: \$6,857,578 accompanied by a FMAP increase of \$6,857,578
- Impacted Stakeholders: None

End Stage Renal Facility | Unit 0460

- Description: This reduction will result from a change to the provider classification and federal reporting processes to recognize the Eastern Shoshone End Stage Renal Disease (ESRD) clinic as a Tribal Health 638 clinic, and allow Medicaid to claim 100% federal match on qualifying expenditures.
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$87,500 accompanied by a FMAP increase of \$87,500
- Impacted Stakeholders: None

100% FMAP for IHS/638 Tribal Services | Multiple Units

- Description: This reduction will maximize the opportunity under a recent CMS policy change to receive more federal funding for services provided to Native American clients by off-reservation providers. New federal policy allows for 100% FMAP for services received through IHS/638 facilities as long as a care management relationship is in place.
- Implementation Date/Status: March 1, 2017, pending CMS approval
- Projected GF Reduction Amount per Biennium: \$4,000,000, accompanied by an increase in FMAP of \$4,000,000
- Impacted Stakeholders: None

Magellan/Care Management Entity (CME) Rates | Unit 0461

- Description: This reduction results from maintaining operational compliance with federal regulations regarding the payment rate development and certification process. As a result of recently updated federal guidelines for payment of managed care-like services, the per member per month rate paid to Magellan for administration of the Care Management Entity (1915 b/c waiver) must be developed and certified by an actuary annually and be developed based on updated utilization data provided in year one of the program, the calculated rate decreased, lending to an inherent savings over the upcoming program cycle.
- Implementation Date/Status: July 1, 2016, pending CMS approval on the calculated rate – per the contractual agreement with Magellan. Upon CMS approval of the rate certification, all claims will be adjusted back to July 1, 2016
- Projected GF Reduction Amount per Biennium: \$2,160,000, accompanied by a FMAP reduction of \$2,160,000
- Impacted Stakeholders: Magellan Healthcare, current CME administrator

Nursing Home and Assisted Living Facility Diversions through new Community Waiver Option

- Through a Community First Choice waiver option, Home and Community Based services (HCBS) carry an increased 6% federal match. With more HCBS services being available, it is likely that Medicaid clients could be diverted from nursing homes and assisted living facilities and served in the community through this waiver option. Therefore, the Medicaid budget for nursing home services and assisted living services could be reduced.
- Projected GF Reduction Amount per Biennium \$2,700,000, accompanied by a FMAP reduction of 2,700,000

Community First Choice Waiver – Long Term Care Waiver and Assisted Living Waiver | Unit 0483 and 0484

- Description: This implementation will maximize opportunities for enhanced federal match for specific services based on an administrative redesign of program operation (moving waiver services to State Plan Services), thereby reducing the GF portion. 1915(k) waiver authority to transition current LTC waiver authority as a Community First Choice waiver results in additional 6% federal match for services, (corresponding 6% reduction in GF).
- Implementation Date/Status: 2017, pending application and approval.
- Projected FMAP Increase \$2,700,000
- Impacted Stakeholders: None

LT-101 Performed Annually for LTC Waiver | Unit 0483

- The LT-101 is an evaluation to determine appropriateness for nursing facility level of care. It has historically been required on a more frequent basis however data analysis shows little change to client's ability or medical condition. LT-101 evaluations will be conducted annually unless otherwise indicated.
- Description: This implementation will revise current Medicaid policy, and reduce the frequency in which LT-101 assessments are required for maintenance of program eligibility.
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$227,000, accompanied by a FMAP reduction of \$227,000
- Impacted Stakeholders: Reduction in income to some PHN offices, concurrent with reduction in overhead.

Financial Management Services Vendor Changed | Unit 0483 and 0484

- This reduction maximizes opportunities internal to the procurement process to reduce the budget for required services. Based on the selected contractor, overall reimbursement under the new contract is less.
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$282,000, accompanied by FMAP reduction of \$282,000
- Impacted Stakeholders: None

Behavioral Health Service Cap Limits and Prior Authorization - Multiple Units

- This task will implement a service authorization process for behavioral health services provided to adults. Once a client reaches their twentieth (20th) date of service, the clinician will be required to complete a request (similar to a prior authorization request) for continued service delivery. If services are compliant with current regulations (state and federal) and medically necessary, services will be approved.
- Implementation Date/Status: January 1, 2017
- Projected GF Reduction Amount per Biennium: \$4,681,250, accompanied by a FMAP reduction of \$4,681,250
- Impacted Stakeholders: Behavioral health service providers (required to complete a request after the first 20 days of service). Service cap limits and prior authorization (similar to other Medicaid services) will result in savings.

Occupational Therapy, Speech Therapy and Physical Therapy Service Cap Limits

- Description: This task will remove the current soft cap approval criteria to appropriately separate HCBS waiver services from Medicaid state plan services.
- Implementation Date/Status: January 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$525,000, accompanied by a reduction in FMAP of \$525,000
- Impacted Stakeholders: Therapy providers (required to complete a request after the first 20 days of service).

Home Health Services

- This reduction is based upon implementation of a prior authorization process for home health services delivered under the Medicaid State Plan.
- Implementation Date/Status: March 1, 2017,
- Projected GF Reduction Amount per Biennium: \$656,250, accompanied by a FMAP reduction of \$656,250
- Impacted Stakeholders: Home health providers (if providing inappropriate services)

Conduct Advisory Group Meetings as Webinars

- Description: This task will restructure the scheduling and format of the advisory group meetings in order to reduce overall administrative costs. This includes the elimination of purchased lunches for attendees at the Medical Advisory Group and the Long Term Care Advisory Group.
- Implementation Date/Status: October 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$30,000, accompanied by a FMAP reduction of \$30,000
- Impacted Stakeholders: Various advisory group members

Federal Share on PI Recoveries

- Description: This reduction is based on implementation of technical enhancements to the current fraud, waste and abuse and third party liability processes to leverage new software and interfaces and services with national insurance databases as well as increase the data mining capabilities of state staff. This will be facilitated through upcoming procurements under the Medicaid WINGS project.
- Implementation Date/Status: Spring 2017
- Estimated GF Offset in Fraud, Waste and Abuse Recoveries per Biennium: \$100,000
- Impacted Stakeholders: None

Third Party Liability (TPL) – Pharmacy

- Description: This task encompasses administrative enhancements to the current pharmacy third party liability process to leverage new interfaces, data matches and services with national payer databases. The Pharmacy Benefit Manager is performing TPL activities and reviewing three years of past claims.
- Date/Status: January 1, 2016, implemented
- Projected Increase in Recoveries per Biennium : \$87,500, accompanied by a FMAP reduction of \$87,500
- Impacted Stakeholders: None

Third Party Liability – Process Improvement

- Description: This task will implement administrative enhancements to the current fraud, waste and abuse and third party liability processes to leverage new interfaces and services with national insurance databases as well as increase the data mining capabilities of state staff. This will be facilitated through upcoming procurements under the Medicaid WINGS project.
- Implementation Date/Status: TBD, pending
- Projected GF Offset in TPL Recoveries per Biennium: \$921,489, accompanied by a FMAP reduction of \$921,489
- Impacted Stakeholders: Other payers/insurance

Nursing Facility (NF) Reserve Bed Days

- Non-Payment for NF Reserve Bed Days
- Description: This task will eliminate Medicaid reimbursement for reserve bed days (days that clients are not present in the nursing facility or swing bed).
- Implementation Date/Status: October 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$612,500, accompanied by FMAP reduction of \$612,000
- Impacted Stakeholders: Nursing facilities operating at 90% or higher occupancy, Swing bed providers operating at 90% or higher occupancy, Medicaid clients

J-Code Rebate on Existing Services

- Description: This task will enhance MMIS functionality and establish denial edits to confirm the validity of submitted drug NDC codes. This will increase the number of eligible claims for which drug manufacturers are responsible for payment of calculated rebate dollars.
- Implementation Date/Status: July 1, 2016, implemented
- Projected Offset in GF expenditure per Biennium: \$488,375, accompanied by FMAP reduction of \$488,375
- Impacted stakeholders: None

J-Code Rebate on New Services (Crossover Claims)

- Description: This task will enhance the rebate system to increase drug manufacturer rebate dollars refunded to the Medicaid program for outpatient Medicare crossover claims.
- Implementation Date/Status: July 1, 2016, implemented
- Projected Offset in GF expenditure per Biennium: \$ 75,000, accompanied by a FMAP reduction of %75,000
- Impacted Stakeholders: None

J-Code Pricing Standardization

- Description: This task will implement a policy and reimbursement change to align Medicaid reimbursement for physician administered drugs with Medicare's current policy (and rates).
- Implementation Date/Status: March 1, 2017,
- Projected GF Offset per Biennium: \$380,000, accompanied by a FMAP reduction of \$380,000
- Impacted Stakeholders: All providers billing for physician administered drugs (physician offices, oncology clinics, etc.)

Patient Contribution to Swing Bed and Extraordinary Care Clients (ECC)

- Description: This task will enhance Medicaid system functionality to automatically deduct the calculated patient contribution for extraordinary care clients (nursing facility) as an alternative to monitoring manual corrections submitted by the providers.
- Implementation Date/ Status: September 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$87,500 , accompanied by a FMAP reduction of \$87,500
- Impacted Stakeholders: Clients in Swing Beds and ECC Clients

Editing Lines on Encounter Priced Claims (FQHC, RHC)

- Description: This task will enhance Medicaid system functionality to edit covered and non-covered line level detail submitted on FQHC dental claims.
- Implementation Date/ Status: February 1, 2017
- Projected GF Reduction Amount per Biennium: \$87,500, accompanied by FMAP reduction of \$87,500
- Impacted Stakeholders: None

Realignment of the ASC Dental Code

- This task will update the calculated reimbursement for CPT code 41899 paid to ambulatory surgery centers to align with the global facility reimbursement methodology.
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$1,025,621, accompanied by a FMAP reduction of \$1,025,621
- Impacted Stakeholders: Medicaid enrolled Ambulatory Surgery Centers

Anesthesia Codes – Reset Rates

- Realignment of Anesthesia Base Units
- This task will update Medicaid's current reimbursement policy to change the number of base units used for calculating reimbursement. This policy change will align Wyoming Medicaid with national association standards and other payers (governmental and private.)
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$166,250, accompanied by a FMAP reduction of \$166,250
- Impacted Stakeholders: Providers billing for anesthesia services

Lab/Radiology Codes – Reset Rates

- Clinical Laboratory/ Radiology
- This task will update rates established for some CPT codes in order to maintain compliance with upper payment limit regulations by setting them at 90% of Medicare rates.
- Implementation Date/Status: July 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$262,500, accompanied by a FMAP reduction of \$262,500
- Impacted Stakeholders: Clinical laboratories, radiologists

Dental Codes – Rate Reductions

- Rate Reduction: Dental Codes
- Description: This task will implement a rate reduction for all services provided under the Medicaid dental benefit, for both adults and children, to move in line with surrounding states.
- Implementation Date/Status: TBD
- Projected GF Reduction Amount per Biennium: \$525,350, accompanied by a FMAP reduction of \$525,350
- Impacted Stakeholders: Dental providers

Medicare Crossover Claims Pricing Method | Unit 0433

- Wyoming is required by federal law to process Medicare co-payments and co-insurance for individuals dually enrolled in Medicare and Wyoming Medicaid. Medicare pays the primary medical claim through Part A or Part B and Wyoming Medicaid pays the remaining deductibles and co-insurance for the individuals. Medicaid refers to these payments as “Medicare Crossover” payments. Wyoming Medicaid currently designates that it will pay the full Medicare determined amount of the Medicare co-payment and co-insurance in the Wyoming State Plan. As Medicare expenditures have increased, these deductibles and co-insurance payments have also increased and crossover payments have become a major item in the Wyoming Medicaid budget. Changes to the method for pricing and paying Medicare Crossover Claims to a method more common in other states. Generally, if Medicare already paid more than what Medicaid would have paid for the claim, then the Medicaid co-payment would be reduced.
- This task will update Medicaid reimbursement of Medicare crossover claims for dually eligible clients. Final CMS approval on the state plan amendment is pending, but when approved will implement a “lessor of” logic that will reduce additional reimbursement from Medicaid to \$0 as Medicare has already paid the provider the same or more money than the allowable reimbursement under Medicaid’s methodology.
- Implementation Date/Status: January 1, 2017, pending
- Projected GF Reduction Amount per Biennium: \$10,530,000, accompanied by a FMAP reduction of \$10,530,000
- Impacted Stakeholders: All providers billing for services provided to dual Medicare/Medicaid clients

Title 25 – Medicaid Coverage of non-IMD Services (external savings)

- Capture and pay for Title 25 stays at non-IMD facilities for enrolled Medicaid clients under the psychiatric hospital benefit.
- Reduction of Title 25 Expenditures through Medicaid FMAP, UM and TPL enforcement
- Description: This task will maximize federal match available for services provided to Medicaid clients under a Title 25 involuntary hospitalization order.
- Implementation Date/ Status: March 1, 2017
- Projected FMAP increase of \$706,875
- Impacted Stakeholders: Service providers will be required to obtain a prior authorization for inpatient services
- **Note: This task will increase Medicaid expenditures, but will offset may WDH/WSH general fund expenditures with federal match*

Adult Dental Services Coverage Reduction | Unit 0470

- Description: This task will reduce the dental benefits available for Medicaid adults. Dental benefits are optional for adults
- Implementation Date/ Status: November 14, 2016, implemented/ongoing
- Projected GF Reduction Amount per Biennium: \$1,750,000, accompanied by a FMAP reduction of \$1,750,000
- Impacted Stakeholders: Adult Medicaid clients, dental providers

Adult Vision Services Coverage Reduction | Unit 0470

- This task will covered vision benefits for Medicaid adults. Vision services are optional for adults.
- Implementation Date/ Status: Implemented, ongoing
- Projected GF Reduction Amount per Biennium: \$260,750, accompanied by a FMAP reduction of \$260,7500
- Impacted Stakeholders: Adult Medicaid clients, vision providers

Prescription Drug Assistance Program | Unit 0430

- The Prescription Drug Assistance Program (PDAP) was created during the 2002 Legislative Session as a means to provide prescription drug assistance to individuals at or below 100% of federal poverty level and not eligible for Medicaid. PDAP provides a limited prescription benefit of up to three prescriptions per month and is 100% GF. Current data indicates this population has a higher concentration of chronic disease requiring multiple and more costly medications, including mental health related pharmaceuticals such as psychotropics. In FY 2014, due to funding reductions a number of limitations were placed on the program to control costs.
- The enabling statute 42-4-118 (e) states, “If the funds available to the program are insufficient to meet the projected costs of the program, the department shall take action to prevent the program from incurring costs beyond available funds, including taking any of the following actions: (i) Imposing a moratorium on new enrollments in the program; (ii) Reducing the gross family income eligibility level; (iii) Imposing higher prescription drug copayments not to exceed twenty-five dollars (\$25.00) per prescription; (iv) Eliminating specified drugs from eligibility under the program
- Implementation Date/Status: August 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$750,000
- Impacted Stakeholders: PDAP clients, pharmacy providers

State Licensed Shelter Care Coverage Elimination | Unit 0463

- State License Shelter Care pays for nursing home coverage for individuals awaiting Medicaid eligibility determinations, or those with income thresholds slightly above Medicaid eligibility levels. This cut would end the program, and will impact an estimated five recipients per month.
- This task will eliminate coverage and reimbursement for state-licensed shelter care.
- Implementation Date/Status: August 1, 2016, implemented
- Projected GF Reduction Amount per Biennium: \$200,000,
- Impacted Stakeholders: Providers may have a delay in payment

End Employed Individuals with Disabilities Program | Unit 0460

- This is an optional Medicaid program
- This task will eliminate eligibility for clients in the Employed Individuals with Disabilities (EID) program who have an income over 100% of the federal poverty level and will refer them to the marketplace/exchange for coverage.
- Implementation Date/Status: July 1, 2017
- Projected GF Reduction Amount per Biennium: \$1,005,345, accompanied by a FMAP reduction of \$1,005,345
- Impacted Stakeholders: Current program clients

End Breast and/or Cervical Cancer (BCC) Coverage over 100% FPL | Unit 0460

- This task will eliminate eligibility for clients in the Breast and Cervical Cancer program who have an income over 100% of the federal poverty level. Individuals with incomes over 100% FPL will be referred to the Marketplace/Exchange for coverage.
- Implementation Date/ Status: July 1, 2017
- Projected GF Reduction Amount per Biennium: \$493,976, accompanied by a FMAP reduction of \$493,976
- Impacted Stakeholders: Current program clients (300)

Behavioral Health Division

The Behavioral Health Division must reduce its 2017-2018 operating General Fund budget by \$22,376,028 in order to meet the WDH's requested budget reduction. Table 5, below, shows proposed budget reductions to the BHD by budgetary unit.

Vacant position savings will be through 20 vacant positions at the Wyoming Life Resource Center and 2 vacant positions in the Recovery Supports area (unit 2502), not through RIFs.

Behavioral Health Division Proposed Budget Reductions, 2017-2018

Unit	Description	% Cut*	Total Budget	GF Reduction	FF Reduction	Positions (RIF)
2512	Wyoming Life Resource Center					
	-100 series vacant positions					
	-200 series various reductions					
	-600 series CES contract eliminated	6.49%	\$62,644,126	\$2,002,000	\$2,062,299	0
2505	Wyoming State Hospital					
	-100 series vacant positions					
	-200 series travel/registration fees	.37%	\$71,748,660	\$265,752	\$0	0
2502	Recovery Supports (incl. portion of 2501)	47.20%	\$16,804,621	\$3,442,070	\$4,490,305	0
2503	Court Supervised Treatment	14.00%	\$8,569,238	\$1,200,000	\$0	0
2506	Outpatient Mental Health Treatment	8.55%	\$41,298,762	\$3,530,194	\$0	0
2507	Outpatient Substance Abuse Treatment	7.22%	\$19,332,922	\$1,395,058	\$0	0
2508	Residential Mental Health Treatment	-3.48%	\$13,806,232	(\$480,682)	\$0	0
2509	Residential Substance Abuse Treatment	14.43%	\$29,950,006	\$4,321,636	\$0	0
2510	Early Intervention/Education Program	15.47%	\$81,438,438	\$6,700,000	\$5,900,000	0
Total		10.08%	\$345,593,005	\$22,376,028	\$12,452,604	0

*This percentage is the percent of the total budget represented by the proposed cut (GF + FF)

Note that the "% Cut" column contains some overlap between units.

Descriptions and Impacts of Behavioral Health Division Reductions

Wyoming Life Resource Center | Unit 2512 | Page 176 in budget document

- \$2,002,000 GF Reduction (\$2,062,299 FF reduction).
 - Eliminate 20 vacant positions and reduce miscellaneous cost categories.
 - Reduced CES Contract which served Intermediate Care Facility (ICF) and Acquired Brain Injury (ABI) clients at an off-site day programming location. Clients now receive all day programming at the WLRC facility, saving ~\$802,000 over the biennium.

Wyoming State Hospital | Unit 2505 | Page 154 in budget document

- \$265,752 GF Reduction.
 - Out of state travel has been reduced to absolutely necessary travel (i.e. patient discharging to an out of state address and the WSH provides and escort for such).
 - Registrations is limited to what is absolutely necessary to further the mission of the WSH.
 - The reduction of travel and registration fees has had minimal impact on the daily operations of the facility.

- Reduced Title 25 per diem rates to Designated Hospitals by 14%. The payment rate to designated hospitals was reduced to \$677 per day from \$787 per day effective Augusts 1, 2016.

Recovery Supports | Unit 2502 | Pages 147 in budget document

- \$3,442,070 GF Reduction (\$4,490,305 FF reduction).
 - Eliminate two vacant positions, reduce in/out of state travel, and eliminate peer specialist, veterans' advocacy, and Seattle Children's contracts.
 - Restructuring of staffing within Behavioral Health Division.

Court Supervised Treatment (Drug Courts) | Unit 2503 | Page 151 in budget document

- \$1,200,000 GF Reduction.
 - 14% reduction of contracts.
 - Courts are working to be more efficient; the expected impact is a reduced amount of individuals served. At this time, no drug court program has closed.

Outpatient Mental Health Treatment | Unit 2506 | Page 161 in budget document

- \$3,530,194 GF Reduction.
 - 8.55% reductions in treatment contracts with community mental health/substance abuse centers.

Outpatient Substance Abuse Treatment | Unit 2507 | Page 163 in budget document

- \$1,395,058 GF Reduction.
 - 7.22% reductions in treatment contracts with community mental health/substance abuse centers.

Residential Mental Health Treatment | Unit 2508 | Page 165 in budget document

- \$480,682 GF Increase.
 - 3.48% increase in treatment contracts with community mental health/substance abuse centers.

Residential Substance Abuse Treatment | Unit 2509 | Page 167 in budget document

- \$4,321,636 GF Reduction.
 - 14.43% reductions in treatment contracts with community mental health/substance abuse centers.

Overall Impacts of Reductions to the above Units for Mental Health/Substance Abuse (2506 – 09)

- With the reductions, the Division has allowed centers to be flexible with how money is expended within individual programs.
- Expected impacts included longer wait lists for substance abuse beds, serving fewer individuals, and reduction in staffing levels.
- Until further data is collected for the current fiscal year, the Division will not be able to specifically provide the impacts to each Center.

Early Intervention/Education Program (DD Preschools) | Unit 2510 | Page 169 in budget document

- \$6,700,000 GF Reduction (\$5,900,000 FF reduction).
 - Moderate impact to date. The Child Development Centers are still required to serve all identified eligible children with lower funding. This creates lower staff, reduced pay, and creates challenges in the ability to provide the level of quality expected from the Centers.
 - Expected federal MOE impact, which could result in a loss of federal funding, but at what level is yet to be determined.

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Public Health Division

The Public Health Division must reduce its 2017-2018 operating General Fund budget by \$6,553,442 in order to meet the WDH's requested budget reduction. Table 6, below, shows proposed budget reductions to the PHD by budgetary unit.

The Public Health Division would eliminate funding for three positions but retain the positions. **Please note:** Of the three positions, one of position will result in a RIF as the Oral Health program will be eliminated however, the department will retain this position. Retaining three positions will enable the division to utilize alternate sources of funding to pay for those positions.

Vacant position savings will be through 4 AWEC positions within the Oral Health Division.

Public Health Division Proposed Budget Reductions, 2017-2018

Unit	Description	% Cut	Total Budget	GF Reduction	FF Reduction	Positions (RIF)
0501	State Health Officer	7.03%	\$2,134,227	\$150,000	\$0	0
0510	Rural and Frontier Health	11.41%	\$13,841,184	\$1,571,323	~\$8,000	0
0521	Oral Health	100.0%	\$2,374,997	\$689,681	\$1,685,316	0
0523	Maternal and Child Health	8.56%	\$8,321,168	\$712,071	\$0	0
0525	Women, Infant and Children	0.62%	\$24,396,515	\$151,120	\$0	0
0526	Public Health Nursing	1.77%	\$18,414,989	\$326,415	\$0	0
0531	Cancer Screenings (support	0.89%	\$5,496,682	\$49,000	\$0	0
0532	Public Health Lab	7.93%	\$6,634,793	\$526,374	\$0	1
0539	Chronic Disease	5.87%	\$3,905,534	\$229,431	\$0	0
0550	Substance Abuse and Suicide Prevention	16.29%	\$18,093,421	\$2,148,027	~\$800,000	0
Total		8.73%	\$103,613,510	\$6,553,442	~\$2,493,3	1

Descriptions and Impacts of Public Health Division Reductions

State Health Officer Administration | Unit 501 | Page 79 in budget document

- \$150,000 GF Reduction in professional fees.
- 7.03% reduction.

Rural and Frontier Health | Unit 510 | Pages 88 – 89 in budget document

- \$1,571,323 GF Reduction:
- Includes elimination of the End Stage Renal Disease (ESRD) program, and reductions in the Office of Rural Health, Office of Multicultural Health, Primary Care Support Grant, and Community Assessments.
 - Elimination of the ESRD program results in approximately 92 dialysis clients and 26 transplant clients not having a second payer to cover excess costs for medical co-pays, Medicare Part B and Part D premiums, prescriptions and supplies, and some travel costs.

Oral Health | Unit 521 | Page 92 in budget document

- \$689,681 GF Reduction (\$1,685,316 FF Reduction)
- This reduction will eliminate the Public Health Oral Health Program.
 - The Oral Health Program conducted screenings, provided oral education, and applied fluoride varnish at elementary schools, child development centers, and Head Start locations. The program administered two cleft palate clinics and reimbursed dental treatment costs for low-income children.
 - Program elimination resulted in the elimination of 4 AWEC positions, 1 program manager, and 1 dentist. In SFY 2016, 23,020 participants were served by Community Oral Health Coordinators. 5,716 children received fluoride varnish. 57 children received consultation at cleft palate clinics. 218 educational sessions were conducted.

Maternal and Child Health | Unit 523 | Page 101 in budget document

- \$712,071 GF Reduction.
- Reductions in support services (200 series).
 - Maternal and Child Health contracts with county public health agencies were reduced by 8%. Following Wyoming budget reductions, federal TANF funding (FF to DFS and WDH) going to the same county agencies was reduced by 33%.
 - GF available for direct client services (e.g., client/recipient benefits) was reduced by 44%. Impact should be limited due to enhanced coverage in the ACA for children with special healthcare needs. Financial assistance for maternal and newborn services were also reduced.
 - Reduced: Office equipment; communication; dues/licenses; out-of-state travel; external maintenance contracts; professional services.

Women, Infant and Children | Unit 525 | Page 105 in budget document

- \$151,120 GF Reduction.
 - Reductions in travel expenditures and professional fees.
 - Removal of Converse County housing allowance.
 - Funding reduced for the MIS maintenance and enhancement contract (applying for federal grant to supplant reduced GF with FF).

Public Health Nursing | Unit 526 | Page 111 in budget document

- \$326,415 GF Reduction.
- Elimination of funding for one (1) vacant position, reductions in support services.

Cancer Screening Program(s) | Unit 531 | Page 116 in budget document

- \$49,000 GF Reduction.
 - Reductions in support services.

Public Health Lab | Unit 532 | Page 122 in budget document

- \$526,374 GF Reduction.

- Elimination of the funding for the part-time State Dentist position and some reductions in lab support services and consumables. The lab does not believe it will have to reduce testing services.

Chronic Disease | Unit 539 | Page 131 in budget document

- \$229,431 GF Reduction.
 - Eliminates contributions towards for a tobacco cessation conference and supplemental funding for cancer screenings.
 - Reduced support services (communication, dues/licenses, advertising, travel, etc.)

Substance Abuse and Suicide Prevention | Unit 550 | Page 140 in budget document

- \$2,148,027 GF Reduction (~\$800,000 FF reduction).
 - Reduction in the community prevention services contract by 14%.
 - Will result in reduction in MOE for the Substance Abuse Prevention/Treatment (SAPT) federal block grant (allocated to both Public Health and Behavioral Health divisions).
 - Elimination of funding for support of Task Force on Prescription Drug Abuse.

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Aging Division

The Aging Division must reduce its 2017-2018 operating General Fund budget by \$6,894,981 in order to meet the WDH's requested budget reduction. Table 7, below, shows proposed budget reductions to the Aging Division by budgetary unit.

The Aging Division would have one vacant full time position eliminated.

Aging Division Proposed Budget Reductions, 2017-2018

Unit	Description	% Cut	Total Budget	GF Reduction	FF Reduction	Positions (RIF)
5001	CLS Administration	3.81%	\$2,626,659	\$100,000	\$0	0
5002	Senior Care/(WyHS)			\$250,000	\$0	0
5002	Senior Care/(WyHS)	11.38%	\$11,695,834	\$681,433	\$0	0
5002	Senior Care/(ADRC)			\$400,000	\$0	0
5004	Elder Rights	19.57%	\$494,259	\$96,715	\$0	0
5005	Senior Volunteer	46.81%	\$470,000	\$220,000	\$0	0
5007	Wyoming Senior Services Board	9.03%	\$11,853,830	\$1,069,923	\$0	0
5010	Healthcare Licensing	0.59%	\$5,711,969	\$33,626	\$0	0
5060	Wyoming Retirement Center	0.68%	\$12,688,581	\$4,043,284*	(\$3,956,715)*	0
Total		6.45%	\$45,541,132	\$6,894,981	(\$3,956,715)	0

* Due to increased Medicaid nursing facility rates in 15-16, there is a reduction in GF and an increase in OF.

Descriptions and Impacts of Aging Division Reductions

Community Living Section Administration | Unit 5001 | Page 189 in budget document

- \$100,000 GF Reduction.
 - Reduced administration expenditures for the Community Living Section.

Senior Care | Unit 5002 | Page 193 in budget document

- \$1,331,433 GF Reduction.
 - 11% reduction to the Wyoming Home Services (WyHS) contract; elimination of the Aging Disability Resource Center (ADRC).
 - No identified issues to date resulting from elimination of ADRC.
 - WyHS waiting list has grown from 89 to 131 since the reductions were implemented.

Elder Rights | Unit 5004 | Page 195 in budget document

- \$96,715 GF Reduction.
 - Reduction in support services. This expenditure will be absorbed by other funds in the administration unit.

Senior Volunteer Program | Unit 5005 | Page 197 in budget document

- \$220,000 GF Reduction.

- This unit includes the Foster Grandparent Program and the Senior Companion Program which are contracted to three nonprofit providers; both programs are not mandated by State or Federal law.
- This reduction had no impact on 2 providers; for the 3rd provider, they may be serving less people.

Wyoming Senior Services Board (WSSB) | Unit 5007 | Page 199 in budget document

- \$1,069,923 GF Reduction.
 - 9% reduction.
 - May impact staffing (60% of WSSB funding goes to staffing senior centers) and the Nutrition program.

Healthcare Licensing and Surveys (OHLS) | Unit 5010 | Page 203 in budget document

- \$33,626 GF Reduction.
 - Reduction in support services (e.g., travel).

Wyoming Retirement Center | Unit 5060 | Page 215

- \$4,043,284 GF Reduction (\$3,956,715 OF Increase)
 - Elimination of position in this unit that was used for the State Long Term Care Ombudsman, as well as “Other” funding source increase:
 - Due to Skilled Nursing Facility rate increases in Medicaid, the Wyoming Retirement Center now collects enhanced revenue for Medicaid clients receiving care in the facility.
- ~\$4,000,000 moved from revenue account 419 to cover Title 25 expenses (Wyoming State Hospital)

BIENNIUM 2021-2022 BUDGET REDUCTION PLAN



Wyoming Department of Health
December 2020

Background

Due to significantly reduced state revenues, the Wyoming Department of Health (WDH) has implemented a 9.0% State General Fund budget reduction, and proposes a further 4.7% reduction from the standard General Fund budget.

Implemented Cuts - “Step Two”

This document identifies approximately \$89 million in general fund budget reductions, including standard budget reductions, as well as alternative reductions included in the standard budget but intended mostly as one-time savings for the 2021-2022 biennium. The implemented budget reduction has an accompanying \$48.9 million loss of federal and other funds, for a total cut of ~\$138 million. However, by leveraging one-time savings and other revenues, the department will be able to take advantage of temporary increases in federal and other funds of approximately \$21.5 million for the 2021-2022 biennium, making the realized total cut approximately \$116.5 million during the same period.

Proposed Cuts - “Step Three”

In addition to these implemented cuts, the department is proposing a further General Fund cut of \$46.6 million. With an accompanying loss of \$17.8 million in federal and other funds, the total proposed additional cut totals \$64.4 million.

Overall Budget Impact

Combined with the cuts already implemented, total reductions to the standard budget (not including one-time savings and revenue increases) would therefore amount to \$180.9 million. Including one-time savings and revenue increases, they add up to **\$202.4 million**. This represents approximately 13.7% of the total general fund budget.

Guiding Principles

The department used the following guiding principles to develop its budget reduction proposals:

- Avoid across-the-board reductions;
- Minimize impacts on vulnerable populations;
- Minimize impacts on the behavioral health continuum, including the department’s two safety-net facilities – the Wyoming State Hospital and the Wyoming Life Resource Center; and,
- Explore alternative options for cost savings in the 2021-2022 biennium.

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State General Fund Reductions

The following tables break down the **implemented “Step Two”** and **proposed “Step Three”** General Fund budget cuts by division and category. The final table shows the combined effect of both Step Two and Step Three cuts.

Table 1: Implemented “Step Two” General Fund Budget Reductions, by Division, by Category

Category	Division					Total
	AGD	BHD	DO	HCF	PHD	
Administrative	-\$430,107	-\$551,851	-\$433,048	-\$4,517,734	-\$281,850	-\$6,214,590
Contracted service					-\$338,773	-\$338,773
Program elimination	-\$2,749,893	-\$144,000		-\$2,633,789		-\$5,527,682
Program reduction		-\$10,270,593		-\$39,399,273	-\$3,662,424	-\$53,332,290
Total SGF Budget	\$32,989,241	\$256,128,703	\$11,110,939	\$647,294,799	\$42,313,511	\$989,837,193
Std. budget cut	-\$3,180,000	-\$10,966,444	-\$433,048	-\$46,550,796	-\$4,283,047	-\$65,413,335
One-time savings and revenue		-\$1,171,009	-\$1,500,000	-\$21,001,003		-\$23,672,012
Total Step Two cut	-\$3,180,000	-\$12,137,453	-\$1,933,048	-\$67,551,799	-\$4,283,047	-\$89,085,347
Percent Step Two cut	-9.6%	-4.7%	-17.4%	-10.4%	-10.1%	-9.0%

AGD = Aging | BHD = Behavioral Health | DO = Director's Office | HCF = Healthcare Financing | PHD = Public Health

Table 2: Proposed “Step Three” General Fund Budget Reductions*

Category	Division					Total
	AGD	BHD	DO	HCF	PHD	
Administrative					-\$252,053	-\$252,053
Program elimination	-\$2,749,893			-\$5,894,316	-\$380,000	-\$9,024,209
Program reduction	-\$568,913	-\$15,193,470		-\$18,370,783	-\$3,216,078	-\$37,349,244
Total Step Three cut	-\$3,318,806	-\$15,193,470		-\$24,265,099	-\$3,848,131	-\$46,625,506
Percent Step Three cut	-10.1%	-5.9%		-3.7%	-9.1%	-4.7%

Table 3: Combined “Step Two” and “Step Three” General Fund reductions

Category	Division					Grand Total
	AGD	BHD	DO	HCF	PHD	
Administrative	-\$430,107	-\$551,851	-\$433,048	-\$4,517,734	-\$533,903	-\$6,466,643
Contracted service	\$0	\$0	\$0	\$0	-\$338,773	-\$338,773
Program elimination	-\$5,499,786	-\$144,000	\$0	-\$8,528,105	-\$380,000	-\$14,551,891
Program reduction	-\$568,913	-\$25,464,063	\$0	-\$57,770,056	-\$6,878,502	-\$90,681,534
One-time savings and revenue	\$0	-\$1,171,009	-\$1,500,000	-\$21,001,003	\$0	-\$23,672,012
Step Two + Step Three	-\$6,498,806	-\$27,330,923	-\$1,933,048	-\$91,816,898	-\$8,131,178	-\$135,710,853
Total percent reduction	-19.7%	-10.7%	-17.4%	-14.2%	-19.2%	-13.7%

**Note that, per the Governor’s budget message, Step 3 reductions for the 2021-2022 biennium are recommended to total 50% (one half) of the total proposed reduction package. Full reductions would be in the standard budget for 2023-2024.*

Federal Fund and Other Fund Impacts

These general fund cuts are accompanied by an estimated **\$66.7 million federal fund and other fund reductions**, with \$48.9 million in Step Two, and \$17.8 million in Step Three. This is because much of the department's funding comes with federal matching dollars. For example, if Medicaid reimbursement rates are reduced by \$1 of State General Fund, the effective reduction is \$2, because Wyoming's federal Medicaid match is generally 50 percent.

One-time Savings and Revenue Increases

In addition to cuts to the standard budget, WDH identified \$23.7 million in one-time savings and other revenue increases for the 2021-2022 biennium. While these cuts are initially included in the standard budget, most are not intended to continue past the 2021-2022 biennium. Table 4, below, summarizes these one-time savings, by division.

Note that these savings are mostly possible due to a one-time increase in federal and other funds (\$21.5 million), as shown below.

Table 4: Additional One-Time Savings, 2021-2022 Biennium Only, in Millions

Division	Category	Description	GF	FF/OT	Impacts
HCF	One-time savings	Capture 6.2% FMAP increase from FFCRA.	-\$16.00	\$16.00	No impact.
HCF	One-time savings	Leverage additional federal funds through supplemental payment programs (IGT, UPL, etc.) and enhanced 6.2% FMAP.	-\$4.50	\$4.50	No impact.
DO	Revenue increase	Charge additional \$5 for vital records requests (e.g., birth certificates).	-\$0.50	\$0.50	Increased charges on WY residents.
HCF	One-time savings	Leverage enhanced 6.2% FMAP for Medicare "clawback" expenditures.	-\$0.50	\$0.50	No impacts.
BHD	Program reduction	10% reduction to the Title 25 per diem reimbursement rate.	-\$0.75	\$0.00	Reduced rates to certain hospitals.
DO	Program elimination	Eliminate funding for SF150 Health Innovation Studies	-\$1.00	\$0.00	No impacts.
BHD	Contracted services	Reduce WLRC contracts for services	-\$0.42	\$0.98*	Contracts are a mix of labor (e.g. nurse practitioners) and other expenses.
Total			-\$23.67	\$21.5	

**These federal funds may or may not be reduced at the WLRC.*

WDH Budget Summary

In both the Step Two and Step Three cuts, WDH has proposed reductions of approximately \$135.7 million in State General Funds from its overall general fund budget of \$989,837,193. This overall budget is reflected in Table 5, below, which shows the department's 2021-2022 standard budget in descending order according to the percent of the general fund budget each program represents. It is important to note that five WDH program areas account for ~91 percent of the total general fund budget. Table 5 is illustrative and not intended to tie directly to all units within the 2021-2022 budget book.

Table 5: WDH Program Budgets, Ordered by Program Percent of General Fund Budget

% of GF	Program Area	2021-2022 Total Budget	General Fund Budget	Federal Funds	Other Funds
91%	Medicaid + Waivers	\$1,449,352,795	\$647,294,799	\$754,223,867	\$47,834,129
	Mental Health/Sub. Abuse	\$109,254,639	\$88,061,850	\$8,977,096	\$12,215,693
	Developmental Preschools	\$73,335,627	\$68,010,840	\$122,593	\$5,202,194
	State Hospital	\$83,913,496	\$80,549,230	\$0	\$3,364,266
	Life Resource Center	\$59,660,778	\$15,640,482	\$216,109	\$43,804,187
8%	Public Health Nursing	\$18,780,468	\$13,193,928	\$0	\$5,586,540
	Senior Services Board	\$11,171,288	\$11,171,288	\$0	\$0
	Support Svcs/Director's Office	\$11,322,504	\$9,905,121	\$1,387,220	\$30,163
	Immunization	\$11,391,946	\$9,040,707	\$2,281,761	\$69,478
	Veterans' Home	\$8,771,750	\$7,771,012	\$0	\$1,000,738
	Senior Care	\$11,625,009	\$6,449,560	\$5,175,448	\$0
	S.A / Tobacco Prevention	\$12,193,890	\$2,533,556	\$2,699,917	\$6,960,417
	Court Supervised Treatment	\$7,373,216	\$3,722,301	\$155,343	\$3,495,572
	Pioneer Home	\$4,978,294	\$4,940,296	\$0	\$37,998
	Public Health Lab	\$6,300,344	\$4,268,308	\$577,027	\$1,455,009
	Retirement Center	\$12,955,317	\$294,940	\$112,540	\$12,547,837
	Maternal and Child Health	\$7,811,910	\$3,315,399	\$3,192,660	\$1,303,851
	Rural Health	\$11,408,268	\$1,954,316	\$9,444,401	\$9,551
1%	EMS	\$4,606,700	\$2,005,735	\$2,581,380	\$19,585
	WIC	\$24,883,159	\$1,968,619	\$17,927,998	\$4,986,542
	Healthcare Licensing	\$6,067,591	\$1,417,757	\$4,649,834	\$0
	Vital Statistics	\$2,042,878	\$1,205,818	\$591,889	\$245,171
	Infectious Disease Epi	\$2,839,484	\$1,090,772	\$1,668,338	\$80,374
	Cancer Programs	\$5,934,082	\$936,482	\$2,662,647	\$2,334,953
	Communicable Disease	\$6,115,633	\$721,522	\$4,237,913	\$1,156,198
	Injury and Chronic Disease	\$4,531,116	\$971,394	\$3,006,392	\$553,330
	Senior Volunteer Service	\$259,582	\$259,582	\$0	\$0
	Nutrition Services	\$7,987,637	\$480,226	\$7,507,411	\$0
	Elder Rights	\$420,518	\$204,580	\$215,938	\$0
	BRFSS Survey	\$443,841	\$312,773	\$0	\$131,068
	Respite Care	\$144,000	\$144,000	\$0	\$0
	Public Health Preparedness	\$11,395,494	\$0	\$11,395,494	\$0
	Nurse Family Partnership	\$3,534,312	\$0	\$0	\$3,534,312
100%	Total	\$1,992,807,566	\$989,837,193	\$845,011,216	\$157,959,157

General Fund Reductions by Program

Table 6, below, summarizes the same list of programs and includes Step Two and Step Three State General Fund reductions.

Table 6: State General Fund Proposed Reductions

% of GF	Program Area	SGF Budget	Step Two	Step Three	Step Two + Three
91%	Medicaid + Waivers	\$647,294,799	-\$46,550,796	-\$24,265,099	-\$70,815,895
	Mental Health/Sub. Abuse	\$88,061,850	-\$650,000	-\$15,193,470	-\$15,843,470
	Developmental Preschools	\$68,010,840	-\$8,826,627		-\$8,826,627
	State Hospital	\$80,549,230	-\$153,435		-\$153,435
	Life Resource Center	\$15,640,482			
8%	Public Health Nursing	\$13,193,928			
	Senior Services Board	\$11,171,288	-\$48,000	-\$404,859	-\$452,859
	Support Svcs/Director's Office	\$9,905,121	-\$1,148,929	-\$5,557	-\$1,154,486
	Immunization	\$9,040,707	-\$3,500,000	-\$1,758,021	-\$5,258,021
	Veterans' Home	\$7,771,012	-\$300,000		-\$300,000
	Senior Care	\$6,449,560	-\$2,749,893	-\$2,749,893	-\$5,499,786
	S.A / Tobacco Prevention	\$2,533,556			
	Court Supervised Treatment	\$3,722,301	-\$793,966		-\$793,966
	Pioneer Home	\$4,940,296			
	Public Health Lab	\$4,268,308			
	Retirement Center	\$294,940			
	Maternal and Child Health	\$3,315,399		-\$451,032	-\$451,032
	Rural Health	\$1,954,316	-\$282,424	-\$667,992	-\$950,416
1%	EMS	\$2,005,735	-\$49,436	-\$456,458	-\$505,894
	WIC	\$1,968,619	-\$70,000		-\$70,000
	Health Care Licensing	\$1,417,757		-\$164,054	-\$164,054
	Vital Statistics	\$1,205,818	-\$145,829		-\$145,829
	Infectious Disease Epi	\$1,090,772			
	Cancer Programs	\$936,482		-\$310,104	-\$310,104
	Communicable Disease	\$721,522		-\$198,967	-\$198,967
	Injury and Chronic Disease	\$971,394			
	Senior Volunteer Service	\$259,582			
	Nutrition Services	\$480,226			
	Elder Rights	\$204,580			
	BRFSS Survey	\$312,773			
	Respite Care	\$144,000	-\$144,000		-\$144,000
	Public Health Preparedness	\$0			
	Nurse Family Partnership	\$0			
100%	Total	\$989,837,193	-\$65,413,335	-\$46,625,506	-\$112,038,841

Note that these totals include neither the one-time savings shown on in Table 4, nor the loss of Federal and Other funds. Total cuts, including all of these sources, total \$138.0 million for Step Two, \$64.4 million for Step Three, and thus \$202.4 million combined.

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