

## The Budget Bill Is Bad for Wyoming

The “One Big Beautiful Bill Act” will terminate health coverage, drive up costs and cut care across the country — eliminating health coverage for nearly 16 million people<sup>1</sup> and resulting in over 51,000 preventable deaths nationwide.<sup>2</sup> **If Congress charges ahead with either the Senate or House version of the bill, at least 12,000 Wyomingites will lose health coverage,<sup>3</sup> and Wyoming’s uninsured rate will increase by 20%.<sup>4</sup>**

### The budget bill threatens the health and financial security of Wyomingites in every community:

- **Makes the largest cut to Medicaid in history**, gutting a whopping **\$859 billion** from Medicaid<sup>5</sup> and the low-income families, workers, veterans and people with disabilities who rely on it for their care, including 62,000 children and adults in Wyoming.<sup>6</sup>
- **Drains \$349 billion from Marketplace coverage,<sup>7</sup>** jeopardizing small businesses and entrepreneurs in Wyoming.
- **Forces another \$500 billion in mandatory cuts to Medicare** by triggering federal spending laws — on top of the Medicaid cuts that will already impact seniors and people with disabilities who are also covered by Medicare (dual-eligibles).

### The budget bill will wreak havoc on Wyoming’s health system and economy

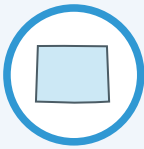
Wyoming will be forced to offset budget holes caused by this bill by terminating coverage for families, eliminating essential health services, and cutting provider rates so drastically that doctors and hospitals will be forced to close their doors — particularly in rural communities. **Hospitals like Summit Medical Center in Casper and Platte County Hospital in Wheatland will be at greater financial risk of closing due to Medicaid cuts in the bill.<sup>8</sup>**

*Congress should reject these harmful cuts and instead take steps to protect health coverage programs that serve as lifelines for Wyomingites.*

## The budget bill will roll back the last decade of improvements to Wyoming health coverage and care

Wyoming Medicaid will face major cuts, forcing the state to make tough decisions about rolling back the services it provides — including dental care, prescription drugs and mental health care. The bill would also raise costs for Wyoming’s low-income seniors and people with disabilities who have Medicare coverage but also rely on Medicaid to help pay for out-of-pockets costs and access services not covered by Medicare. These cuts undermine the core financial backbone of Wyoming’s health care system, as Medicaid pays for a significant portion of care and services at local clinics and hospitals and serves as a critical engine for the state’s economy.

### Wyoming Medicaid covers 62,000 children and adults:<sup>9</sup>



**1 in 9 Wyoming residents.**<sup>10</sup>



**42,000 children** — 33% of all children in Wyoming.<sup>11</sup>



**18,000 seniors** and **people with disabilities** in Wyoming.<sup>12</sup>

The Marketplace will be undermined in its mission to provide access to health care for Wyomingites who do not qualify for Medicaid and do not have affordable coverage through their employers. The bill would make it harder for Wyomingites to buy their own health coverage through the Marketplace without preexisting condition exclusions. Marketplace coverage provides comprehensive health benefits, including cancer screenings and treatment for diabetes and high blood pressure. The bill was also written with the assumption that Congress will allow enhanced premium tax credits to expire, which will make coverage even more unaffordable for Wyomingites.

### The Marketplace provides:



Coverage for **46,000 Wyoming residents.**<sup>13</sup>



Coverage for **3,200 small-business owners** in Wyoming and **5,900 self-employed** Wyoming residents.<sup>14</sup>



Premium tax credits to help **96% of Wyoming enrollees** pay their premiums.<sup>15</sup>

## The budget bill will harm North Carolina families, workers and small businesses by wrapping health coverage and care in red tape, undermining critical consumer protections, and making health care unaffordable

### ✓ **Making public and private coverage more expensive, harder to get and keep**

The bill will impose higher out-of-pocket costs and cumbersome verification procedures for both Medicaid and the Marketplace. It will also eliminate automatic enrollment and shorten the annual open enrollment period for the Marketplace, threatening coverage for the **11,000 people in Wyoming who will no longer be able to automatically reenroll** in their Marketplace plans from year to year.<sup>16</sup> Around 11,000 additional Wyomingites will become uninsured if Congress fails to renew enhanced premium tax credits that help them afford plans offered through the Marketplace.<sup>17</sup>

### ✓ **Keeping working people and children off coverage by creating bureaucratic barriers**

Under current law, Medicaid offers a critical safeguard for new Medicaid enrollees by covering medical expenses up to three months prior to the official application date. This ensures vulnerable populations — such as children and older individuals who experience a sudden health decline or newly pregnant women who need care immediately — do not go into insurmountable medical debt while waiting for their paperwork to be processed.

**Restrictions on retroactive coverage will increase people's risk of medical debt as they wait for Medicaid and Children's Health Insurance Program (CHIP) enrollment.** The act would restrict retroactive coverage to one month (House-passed version) or two months (Senate-proposed version) prior to enrollment, putting Medicaid-eligible populations at a significantly higher risk of medical debt, particularly as the bill would create long backlogs of paperwork approvals. These policies would make the medical debt crisis much worse for families. **In fact, 13% of residents in Campbell and Natrona counties already have medical debt in collections.**<sup>18</sup>

### ✓ **Rolling back consumer protections for children**

For children enrolled in CHIP, the act will eliminate current bans on annual and lifetime caps, enrollment waiting periods, and lockout periods for families who miss a premium payment because they cannot keep up with the cost of coverage.

### ✓ **Raising costs for the poorest and most vulnerable Wyomingites covered by Medicare**

Medicaid helps about 7,000 seniors and people with disabilities afford their Medicare expenses,<sup>19</sup> including premiums and out-of-pocket costs when they see a doctor or need a hospital stay. The act will eliminate commonsense approaches like automatic data verification and streamlining applications, which will make it harder for these Wyomingites to get the help they need to pay for their health care.



WYOMING'S HEALTH CARE SYSTEM WILL LOSE AN ESTIMATED

**\$14 MILLION**

PER YEAR IN FEDERAL FUNDING

### The bill will create a crisis for Wyoming's health system and state budget

With at least 12,000 Wyomingites set to lose access to their Medicaid and Marketplace coverage, **Wyoming's health care system will lose an estimated \$14 million per year in federal funding**, making it nearly impossible for the state to maintain current levels of coverage, benefits and payments to providers.<sup>20</sup> Wyoming taxpayers will have to spend at least that much each year to cover additional uncompensated care costs at hospitals and clinics that provide health care services to newly uninsured residents who lack the ability to pay. **The loss of federal funding will cause at least 800 total job losses (including jobs outside the health care sector) and \$103 million in reduced economic output in the state.**<sup>21</sup>

The act will eliminate Wyoming's flexibility to fund Wyoming Medicaid in a way that works best for the state by freezing taxes on health care providers at current rates. This will leave Wyoming with few options to address budget shortfalls and meet future demands resulting from hardships caused by storms, public health emergencies and economic downturns.

- Under both the House and Senate version of the bill, if Wyoming has a future Medicaid budget shortfall and needs to raise revenue, it would not have the option to turn to new provider taxes as a funding source and would have to consider income, sales and other taxes.
- Wyoming currently taxes hospitals at lower rates than many other states. Under the House version of the bill, Wyoming would be at a disadvantage compared with those states that would have their provider taxes frozen at higher rates.<sup>22</sup>

#### Cuts will make it much harder for Wyoming to fund:

- Nearly 1 in 3 births for Wyoming mothers.<sup>23</sup>
- 3 in 5 Wyoming nursing home residents.<sup>24</sup>
- Hospital services at 25 Wyoming hospitals.<sup>25</sup> For example, Medicaid pays for 18% of all hospital services at SageWest Health Care in Riverton and almost 10% of all hospital services at Cheyenne Regional Medical Center.<sup>26</sup>

## The Senate should reject this ill-conceived proposal and instead vote to protect access to Medicaid, the Marketplace and Medicare so that:

### CHILDREN IN WYOMING

Have access to newborn care, checkups, care for diabetes and asthma, and more.

Stay healthy and ready to learn, miss fewer school days, are more likely to graduate, and earn more as adults.<sup>27</sup>



### FAMILIES IN WYOMING

Have access to cancer screenings, mental health and substance use disorder treatment, and diabetes and blood pressure medications.

Have less risk of medical debt and eviction and can better afford to buy groceries or pay rent.<sup>28</sup>



### SENIORS IN WYOMING

Have access to nursing home care, transportation to medical appointments, and home health services.

Stay healthy and receive needed care in their homes and communities.



The bill's proposed cuts to Medicaid, the Marketplace and Medicare are direct attacks on the health and financial security of Wyoming residents and run counter to the will of the vast majority of voters from across political parties.<sup>29</sup>

- 88% of Wyoming voters want a “strong, sustainable Medicaid program.”<sup>30</sup>
- 71% of Wyoming voters oppose cutting funding for Medicaid.<sup>31</sup>
- 82% of adults nationwide — including 67% of Republicans — want Congress to maintain or increase Medicaid spending.<sup>32</sup>

**Congress has the responsibility to stand with families in Wyoming and across the country by rejecting these cuts.**

## Endnotes

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<sup>2</sup> Letter from Rachel M. Werner et al., University of Pennsylvania, Leonard Davis Institute of Health Economics, and Yale University, School of Public Health, Center for Infectious Disease Modeling and Analysis, to U.S. Sens. Ron Wyden and Bernie Sanders, June 3, 2025, <https://files-profile.medicine.yale.edu/documents/9726518b-c99b-4cd8-93c0-6962ed6db2b9.3> Burns et al., “2025 Reconciliation Bill.”

<sup>4</sup> Families USA analysis of Burns et al., “2025 Reconciliation Bill,” and U.S. Census Bureau, U.S. Department of Commerce, “Selected Characteristics of Health Insurance Coverage in the United States,” American Community Survey, 2023: ACS 1-Year Estimates Subject Tables, Table S2701, filtered for Wyoming, accessed February 10, 2025, <https://data.census.gov/table?q=S2701&g=040XX00US56>.

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<sup>6</sup> “January 2025 Medicaid & CHIP Enrollment Data Highlights,” Medicaid.gov, U.S. Centers for Medicare & Medicaid Services, n.d., <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights>.

<sup>7</sup> Families USA, “Harmful Impacts.”

<sup>8</sup> Letter from Mark Holmes, George H. Pink, and Tyler L. Malone, University of North Carolina, Gillings School of Global Public Health, Cecil G. Sheps Center for Health Services Research, to U.S. Sen. Edward Markey et al., June 10, 2025, [https://www.markey.senate.gov/imo/media/doc/sheps\\_response.pdf](https://www.markey.senate.gov/imo/media/doc/sheps_response.pdf); Letter from U.S. Sen. Edward J. Markey et al. to President Donald Trump, Sen. John Thune, and Rep. Mike Johnson, June 12, 2025, [https://www.markey.senate.gov/imo/media/doc/letter\\_on\\_rural\\_hospitals.pdf](https://www.markey.senate.gov/imo/media/doc/letter_on_rural_hospitals.pdf).

<sup>9</sup> U.S. Centers for Medicare & Medicaid Services, “January 2025 Medicaid & CHIP.”

<sup>10</sup> Families USA analysis of U.S. Centers for Medicare & Medicaid Services, “January 2025 Medicaid & CHIP,” and U.S. Census Bureau, U.S. Department of Commerce, “Age and Sex,” American Community Survey, 2023: ACS 1-Year Estimates Subject Tables, Table S0101, filtered for Wyoming, accessed May 28, 2025, <https://data.census.gov/table?q=S0101&g=040XX00US56>.

<sup>11</sup> Families USA analysis of U.S. Centers for Medicare & Medicaid Services, “January 2025 Medicaid & CHIP,” and U.S. Census Bureau, “Age and Sex.”

<sup>12</sup> Rhiannon Euhus, Alice Burns, and Robin Rudowitz, “Congressional District Interactive Map: Medicaid Enrollment by Eligibility Group,” KFF, March 11, 2025, <https://www.kff.org/medicaid/issue-brief/congressional-district-interactive-map-medicaid-enrollment-by-eligibility-group/>.

<sup>13</sup> “Health Insurance Exchanges 2025 Open Enrollment Report,” U.S. Centers for Medicare & Medicaid Services, n.d., <https://www.cms.gov/files/document/health-insurance-exchanges-2025-open-enrollment-reportpdf508-compliant.pdf>.

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<sup>15</sup> “Health Care in Wyoming,” KFF, n.d., <https://www.kff.org/statedata/election-state-fact-sheets/wyoming/>.

<sup>16</sup> “Marketplace Plan Selections by Enrollment Type,” KFF, n.d., <https://www.kff.org/affordable-care-act/state-indicator/marketplace-plan-selections-by-enrollment-type-2/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

<sup>17</sup> “Who Would Lose Coverage If Enhanced Premium Tax Credits Expire?” Urban Institute, November 14, 2024, <https://www.urban.org/data-tools/health-insurance-premium-tax-credit>.

<sup>18</sup> “Debt in America: An Interactive Map,” Urban Institute, last updated September 2024, <https://apps.urban.org/>

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<sup>19</sup> “Distribution of Medicare Beneficiaries Enrolled in the Medicare Savings Programs, by Program,” KFF, n.d., <https://www.kff.org/other/state-indicator/distribution-of-medicare-beneficiaries-enrolled-in-the-medicare-savings-programs-by-program/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>.

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<sup>21</sup> Leighton Ku et al., “How Potential Federal Cuts to Medicaid and SNAP Could Trigger the Loss of a Million-Plus Jobs, Reduced Economic Activity, and Less State Revenue,” Commonwealth Fund, March 25, 2025, <https://www.commonwealthfund.org/publications/issue-briefs/2025/mar/how-cuts-medicaid-snap-could-trigger-job-loss-state-revenue>.

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<sup>23</sup> “Medicaid in Wyoming,” KFF, May 2025, <https://files.kff.org/attachment/fact-sheet-medicaid-state-WY>.

<sup>24</sup> KFF, “Medicaid in Wyoming.”

<sup>25</sup> Families USA analysis of “Hospital Cost Tool,” National Academy for State Health Policy, last updated February 7, 2025, <https://tool.nashp.org/>.

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<sup>27</sup> “How Medicaid Supports Student Success,” Georgetown University, McCourt School of Public Policy, Center for Children and Families, n.d., accessed March 11, 2025, <https://ccf.georgetown.edu/2025/01/09/how-medicaid-supports-student-success/>.

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<sup>29</sup> Grace Sparks, Robin Rudowitz, and Ashley Kirzinger, “Public Opinion on the Future of Medicaid: Results From the KFF Medicaid Unwinding Survey and KFF Health Tracking Poll,” KFF, June 4, 2024, <https://www.kff.org/medicaid/poll-finding/public-opinion-on-the-future-of-medicaid-kff-medicaid-unwinding-kff-health-tracking-poll/>.

<sup>30</sup> “Medicaid Matters to America,” Modern Medicaid Alliance, n.d., <https://data.modernmedicaid.org/MMA/>.

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