

Wyoming

I. Government Funded Indigent Care

A. General Assistance

Wyoming law contains scant provisions for treatment of the poor. Wyoming repealed generally assistance provisions that formerly provided a small measure of medical assistance to indigent adults.¹ Only Medicaid beneficiaries receive a full range of state funded medical care. State law affords very few medical services to indigent patients who are not eligible for Medicaid.

B. County Hospitals

Wyoming law requires county hospitals to “furnish free to residents of the county having no means to pay the same all necessary facilities and maintenance during the time such persons are required to remain there for proper treatment.”² Wyoming courts have construed this mandate very narrowly. In *Gonzales v. Personal Collection Service*,³ the Wyoming Supreme Court affirmed a judgment against a patient for services rendered at a county hospital. In reaching this decision, the court rejected defendants’ claim that as an indigent person, she was entitled to free care at county expense. The court noted that while defendant had shown that her income was low and that she was supporting her son, defendant had not shown that she was without any resources.⁴ In addition, defendant had paid the hospital five dollars each month towards the balance of her bill. The court concluded, “This is having the means to pay, in our view.”⁵ In addition, many of Wyoming’s county hospitals have now privatized or shut down, leaving indigent residents without access to publicly funded hospital care.

C. Public Health

State and local departments of health also administer public health programs that provide treatment for communicable diseases.⁶ Health officers may require individuals suspected of having a sexually transmitted disease to submit to treatment at public expense.⁷ In addition, public health programs provide free treatment for tuberculosis, streptococcal infections and sexually transmitted

¹Former Wyo. Stats. § 42-1-102 et seq.

²Wyo. Stats. § 18-8-806.

³494 P.2d 201 (Wyo. 1972).

⁴*Id.* at 207.

⁵*Id.*

⁶Wyo. Stats. § 35-4-101 et seq.

⁷Wyo. Stats. § 35-4-133(a)(iii).

diseases. State public health statutes provide that all children born within the state must undergo screening for metabolic disease within the first few days following birth.⁸ Finally, counties are liable for the payment of services rendered by physicians to indigents “who are a public charge” for treatment of contagious diseases.⁹ However, the term “public charge” is not defined by state statute.

D. Mental Hospitals

The state is required to pay the cost of involuntary treatment at state mental hospitals for patients who lack the means to pay for their own care.¹⁰ Counties are required to pay the medical costs of other patients who undergo involuntary mental hospitalization within their borders.¹¹ State and local authorities were formerly empowered to transfer non-resident mental patients to their state of residence if no charge could be made for the costs of their care.¹² Under the Interstate Compact on Mental Health, adopted by the state in 1986, local and state authorities may no longer transfer patients to other states, unless the transfer serves the best interests of the patient.¹³

E. Other Services

State and local authorities provide a handful of other medical services to needy individuals. Under the state’s Community Human Services programs, the state funds programs that provide treatment and social services to individuals affected by mental illness, substance abuse, and developmental disabilities, and shelter and crisis services for victims of family violence and abuse.¹⁴ Clients are charged fees for these services.¹⁵ However, the Department of Health is charged with responsibility for ensuring that no person is denied these services on the basis of inability to pay.¹⁶

The Department of Health also administers a program of community based respite care to families with members under 21 years of age who suffer from developmental disabilities and are ineligible for Medicaid home and community based waiver services.¹⁷ Although eligibility for these services is based

⁸Wyo. Stats. § 35-4-801.

⁹Wyo. Stats. § 35-4-102.

¹⁰Wyo. Stats. § 25-11-107.

¹¹Wyo. Stats. § 25-10-112(a).

¹² Former Wyo. Stats. § 25-3-128(a).

¹³ Wyo. Stats. § 25-10-301, Article III, § (a).

¹⁴Wyo. Stats. § 35-1-611 et seq.

¹⁵Wyo. Stats. § 351-619(a)(iv).

¹⁶Wyo. Stats. § 35-1-620(b)(vii).

¹⁷Wyo. Statutes § 35-1-628.

upon need, the state requires reasonable payment for the cost of these services.

II. State Efforts to Extend Private Coverage or Care for the Uninsured

A. High Risk Pools

To reduce the number of uninsured, Wyoming has established a state sponsored health insurance pool for individuals who have been refused health insurance for health reasons or who have been denied coverage for preexisting conditions.¹⁸ Like similar programs across the country, this program requires payment of high monthly premiums, effectively limiting coverage to a small group of relatively affluent, uninsurable individuals. State law requires participants in the health insurance pool to pay premiums at least 150% of the rate charged by the five largest insurers in the state.¹⁹

III. State Mandates for Private Treatment of the Indigent

A. Emergency Treatment

Under state law, private hospitals that have emergency facilities are required to provide emergency care for any condition in which a patient “is in danger of loss of life, or serious illness or injury.”²⁰ Patients remain liable for the cost of this care.

¹⁸Wyo. Stats. § 26-43-103.

¹⁹Wyo. Stats. § 26-43-107(c).

²⁰Wyo. Stats. § 35-2-115