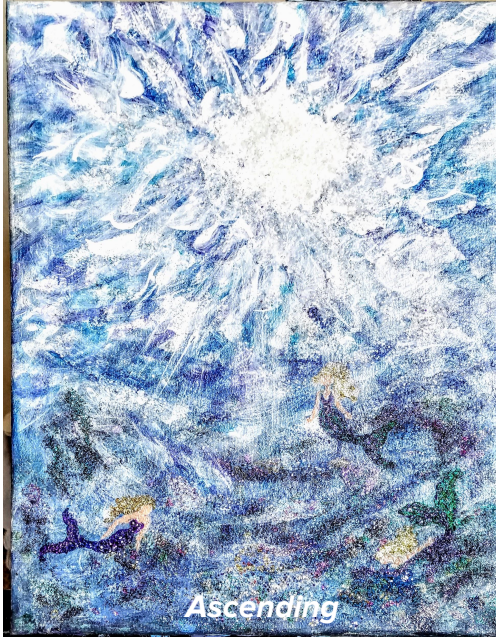Isolating

Ascending

Living

Access to Health Care

2021-2026

📷 **Maxi Yates | Glenrock, WY**
Art Heals

"Recovery was unimaginable, dehumanizing, and isolating."

After a fall at home, Maxi also suffered a stroke. The medical events left her physically, mentally, and emotionally devastated.

With no family to assist in her daily living challenges, she found herself alone in her recovery.

She began to paint. "The canvas was unbiased. It didn't judge my shaky hands, or length of time; day or night, I could create."

Art was her saving grace.

Desired Future

A health care system that produces affordable and available quality health care for all residents, especially those at greatest risk for access-to-care challenges; innovative solutions that make health care services more accessible; conditions in the community that reduce barriers to care; and investments in our existing health care workforce.

Existing Efforts

Residents across the state acknowledge that challenges persist in accessing health care, and there is both demand and support for improving that access.

Health care systems are continually working to meet the needs of Wyoming residents. Many are adopting telehealth practices to expand access. Community paramedicine efforts aim to address gaps in health care. Provider recruitment and retention efforts exist to reduce provider shortages.

Moreover, a statewide broadband enhancement initiative is underway that could further support telehealth as an option for care.

What Else Can be Done

Continue and enhance efforts that address:
- Telehealth adoption
- Community paramedicine
- Provider shortages
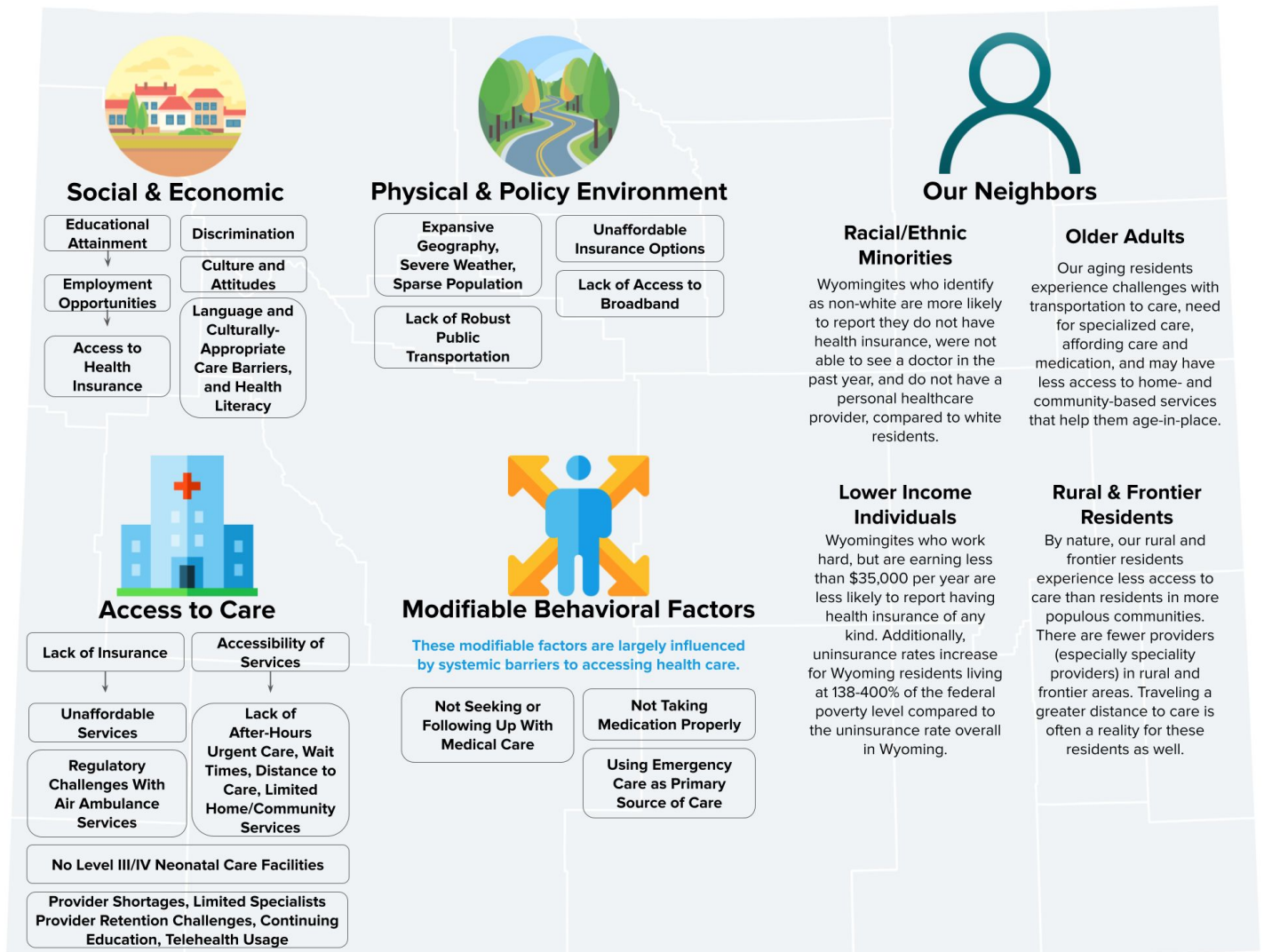- Policy and system changes, such as policies that would ensure affordable insurance options for residents

Innovative solutions to address other barriers, such as transportation or language and literacy barriers, could improve access to and quality of health care for residents as well.

Together, we can work toward a healthier future for all Wyomingites. Using our collective experiences and working together for change will help us get there.

What Influences Access to Health Care in Wyoming?

Access to medical and behavioral health care means having services be both available and affordable. That access allows individuals to enter the health care system, find available and affordable care, and have their health needs met. Health insurance helps people access care, but alone does not ensure access. Uninsured adults have higher rates of mortality and premature death than insured adults. Provider type and availability, cost (even with insurance), and distance to care can also greatly impact access.

The below graphic highlights some of the common factors that influence access-to-care challenges in Wyoming. This view allows us to see the social, economic, environmental, and access-to-care factors that can create barriers to accessing care. Such systemic barriers can influence individuals' health care decisions, as highlighted under modifiable behavioral factors. Some populations experience less access to care. Those are also noted.

Social & Economic

- Educational Attainment
- Employment Opportunities
- Access to Health Insurance
- Discrimination
- Culture and Attitudes
- Language and Culturally-Appropriate Care Barriers, and Health Literacy

Physical & Policy Environment

- Expansive Geography, Severe Weather, Sparse Population
- Lack of Robust Public Transportation
- Unaffordable Insurance Options
- Lack of Access to Broadband

Our Neighbors

Racial/Ethnic Minorities

Wyomingites who identify as non-white are more likely to report they do not have health insurance, were not able to see a doctor in the past year, and do not have a personal healthcare provider, compared to white residents.

Older Adults

Our aging residents experience challenges with transportation to care, need for specialized care, affording care and medication, and may have less access to home- and community-based services that help them age-in-place.

Access to Care

- Lack of Insurance
- Unaffordable Services
- Regulatory Challenges With Air Ambulance Services
- Accessibility of Services
- Lack of After-Hours Urgent Care, Wait Times, Distance to Care, Limited Home/Community Services
- No Level III/IV Neonatal Care Facilities
- Provider Shortages, Limited Specialists Provider Retention Challenges, Continuing Education, Telehealth Usage

Modifiable Behavioral Factors

These modifiable factors are largely influenced by systemic barriers to accessing health care.

- Not Seeking or Following Up With Medical Care
- Not Taking Medication Properly
- Using Emergency Care as Primary Source of Care

Lower Income Individuals

Wyomingites who work hard, but are earning less than $35,000 per year are less likely to report having health insurance of any kind. Additionally, uninsurance rates increase for Wyoming residents living at 138-400% of the federal poverty level compared to the uninsurance rate overall in Wyoming.

Rural & Frontier Residents

By nature, our rural and frontier residents experience less access to care than residents in more populous communities. There are fewer providers (especially speciality providers) in rural and frontier areas. Traveling a greater distance to care is often a reality for these residents as well.

The contributing factors and populations were determined using the best available Wyoming data, scientific literature, and expert opinion.

Priority-Setting Process

To learn more about the priority-setting process and overall priority recommendations, please view the Priority Recommendations document.

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State Health Improvement Steering Committee

Wyoming Department of Health

What Should We Do?

We do better together. Everyone has insight to contribute, experience to share, and knowledge to guide the path toward improving population health in our state. When we work together, we develop better processes, make better decisions, and build partnerships for collective action to improve health.

How can we **improve insurance coverage rates** for Wyomingites? How can we **improve affordability of care**? What can we do to **reduce barriers to existing care**?

In this guide, three possible approaches/options are shared. They could be used in whole or in part, individually or in combination, to produce better health outcomes. Deliberating these approaches/options helps us find common ground on what we should do.

1 Enhance Supporting Infrastructure

The right infrastructure enables greater access to health care services. Enhancing infrastructure in Wyoming can remove barriers to care.

Examples of what could be done	Some challenges or considerations
Promote and enhance public transit options - public transit systems can reduce motor vehicle crashes, air pollution, and support more physical activity, in addition to increasing access to transportation.	Costly mass media may be required to improve the social acceptability of those options, and even with greater promotion and acceptability, public transit still may not be an option for all who experience transportation barriers. In most communities public transit is still rather limited.
Reduce individual and community transportation barriers - improving access to a variety of transportation options can increase access to care, especially when distance to care may cause a person to delay or not seek necessary services.	Addressing individual and community barriers may be costly, and it's not clear how those costs would be financed.
Expand broadband access/coverage - access and affordability of broadband is increasingly necessary to access a number of other social and economic factors that influence health, such as education, job opportunities, health care services, affordable housing, and social connection.	If we don't work to ensure affordability of services and needed devices, equitable access and coverage could be limited and lower-income individuals will be left behind.
Sustain and promote expanded use of telehealth - telehealth services have increased greatly due to the COVID-19 pandemic as another tool to make care accessible, especially to rural patients and those who experience transportation barriers. Patients can interact with their provider using phone and video-based options, reducing patient burden to seek on-site care. It may also increase access to specialists for routine care.	Telehealth services may still be inaccessible or unaffordable to many where broadband or other Internet options are not available or affordable or where devices are not available to individuals. Additionally, some patients may not trust telehealth options for privacy or other reasons.

What Should We Do?

2 **Invest in Current Providers and Services**
We may never fully eliminate provider shortages in Wyoming, for a variety of reasons. But it's possible to invest in the providers and services we do have to ensure high quality care.

Examples of what could be done	Some challenges or considerations
Invest in current provider retention & training, which might include increasing rural training in medical education, training on telehealth reimbursement, implicit bias, and suicide screening and referral, and expanding EMT and paramedic training in behavioral health and telehealth - Wyoming may never fully eliminate provider shortages. However, we can invest in the providers we have to promote high quality care.	Current providers may already be burdened with continuing education requirements. There may be other constraints as well, such as experiencing high need for training but low resources to achieve it.
Improve availability of existing services through initiatives that improve insurance enrollment, promote child psychiatric telehealth services, engage and expand network of community health workers, expand/modify clinical appointment times, and expand availability of home health care services - time and time again, residents express concern about the availability of existing services. Innovation to improve or expand availability will increase access to services that do exist in our communities.	Existing insurance options may not be affordable and might limit options for improved enrollment, existing services might not be able to enroll new patients or expand/modify clinical service hours, and expanding availability of home health services may prove difficult in smaller communities.
Improve health and behavioral health system coordination - people are whole and their care should reflect that. Improving system coordination can increase access to services, improve quality of care, and assure person-centered outcomes.	Without both systems' full commitment to greater coordination, services will remain fragmented. It's not fully known what actions each system needs to take for greater coordination of care, and it would take significant time and resources to overcome this gap.
Expand health care providers' (e.g., physician assistants, nurses, midwives, pharmacists, dental hygienists, paramedics, and EMTs) scope of practice and/or reduce scope of practice restrictions and supervision requirements, particularly for routine care - doing this may improve patient choice, reduce barriers to care, reduce cost, and improve patient safety and outcomes. Allowing providers to practice according to the full extent of their education and training can increase safe and effective care.	This would likely require legislative action or changes to existing rules and regulations governing providers' scope of practice and licensing. Providers impacted may or may not desire the expansion of their scope of practice. Medical professionals may also prefer no overlap of scope relative to the services they provide. Further, physicians and dentists may object due to concerns about quality of care, relative to differences in technical and clinical training.

What Should We Do?

3 **Change Policy and Systems**
This approach prioritizes changes in policies or systems, which can reduce risk factors or enhance protective factors at organizational, community, or societal levels.

Examples of what could be done	Some challenges or considerations
Improve referral systems between and among health care systems and social services providers - social and economic barriers are interconnected with ability to access care and maintain basic needs. Strengthening referral systems and supports can help people meet those needs and provide more holistic care.	This could be time and resource-intensive. Which system or how each system is responsible for improvements requires more investigation, and that could delay our ability to improve the referral systems. If both systems commit to this, it may mean shifting resources away from other critical priorities.
Expand options for affordable insurance - thousands of people in Wyoming, who would otherwise remain uninsured or underinsured, would be able to afford or access insurance for healthcare services.	This could require political will and legislative action. Without constituents advocating for expanded, affordable options with their elected officials, this may be less likely to happen.
Expand community paramedicine or community EMS adoption and use to target known healthcare gaps - community paramedicine/EMS has the potential to cut across all priority areas. This model can fill gaps in rural areas that have limited primary care services or lack them entirely. It expands the reach of primary care and public health services by providing services already in their skillset.	The community paramedicine/EMS model may not be possible in all communities across the state (e.g., where there are not paramedics, or available resources and support). Community paramedicine/EMS programs may also face legal and regulatory challenges related to scope of practice, privacy, and reimbursement, among other issues.
Expand use of medical home models statewide - a medical home model is a patient-centered approach to organizing and delivering health care. It encourages providers and care teams to coordinate all patient care for improved accessibility and quality.	The medical community may need additional financial and non-financial resources or technical assistance to move toward this model. Medical communities could also prefer other models of care.

Questions and Considerations for Deliberation

There is a lot to consider about what we could do to positively affect change. As we deliberate what we should do, let's consider:

1. Which actions seem most relevant or attainable? And are those the same actions that would produce the greatest impact?
   a. On the other hand, is there anything that seems irrelevant that should be removed?

2. Are any of the actions unclear or in need of further development?

3. Are there actions that are missing that should be added?

4. Do the actions adequately address the problem and community concerns?