Virtual Meeting: September 23, 2025

What is Working Well?

- Telehealth coverage around the State.
 - Community telehealth kiosks at libraries and senior centers are going well at early sites and could be expanded.
- Primary care is good in bigger cities.
- Provider staff are dedicated, competent.
- Public health nurses
- Some existing care coordination programs
 - Family resource centers / 211;
 - Plans of safe care:
 - o Recover WY
 - Some grant programs re: suicide prevention and AWARE are effective;
- Awareness and use of out-of-hospital births (birth centers or home) and use of midwives.
- Accountable Care Organization model in Star Valley Health (Afton), including population health nurses in each of our clinics. Chronic conditions follow-up. Serve Uinta and Lincoln counties and offer outreach clinics in multiple small communities. This helps create more demand for specialists in the central hospital site, versus these outlying communities going out of state for care. Augments the hospital by keeping surgeries and specialty care at the local hospital.
- Mike Hunsacker: "Grow healthcare in Wyoming, keep healthcare in Wyoming."
- Nursing education at community colleges uses the same curriculum. Better collaboration among community college nursing programs.
- Community EMS model (Urban, Cheyenne) has started up and is trying to determine the best model.

What is Not Working Well?

- Healthcare workforce recruitment and retention
 - Nursing
 - Behavioral health practitioners
 - Primary care shortages
 - Rural hospitals
- Sustainability of rural hospitals
- Bureaucracy, administrative load on smaller hospitals
- Fragmented behavioral health
 - Difficulty accessing addiction / SA support, particularly for Tribes
 - Waitlists at Community Behavioral Health Centers
 - Title 25 gaps; waitlist at State Hospital
- Palliative/supportive care is missing
- Child/adolescent psychiatry
- Health care costs

- No Medicaid Expansion
- Marketplace premiums will increase significantly, and many may lose coverage
- Transportation
- High suicide rates
- Chronic disease and complex care management
- Limited telehealth OB consults available. Need more OBs willing to do telehealth consults and awareness of who would be willing to partner.
- Travel time for OB. Having to cross state lines for both high and low-risk deliveries. Basic
 prenatal care is being missed and resulting in lifeflights and complications. Focus on the
 preventive side of pregnancy.
- Social Determinants of Health (SDOH)
 - Food deserts, medications, housing, unhomed individuals, and students with unstable housing.
- Nursing education. Low number of applicants and the preparedness of students. Need a
 better pipeline and support for individuals pursuing nursing degrees due to the rigor of
 programs (childcare, rent, wraparound assistance, tuition). Faculty pay for medical
 professionals at community colleges was also noted as an issue, not competitive with
 what those licensed individuals could make practicing versus teaching.
- Collaboration between hospitals and Behavioral Health Centers (BHCs) -Ivinson Memorial

What Does the Community Need?

- Montana: MT Moms program training ED docs
- Long-term financial sustainability, not short-term grants
- Workforce recruitment and retention
 - Loan repayment
 - Relocation, temporary housing
 - Pipeline from High school into community colleges and UW for health science career track
- Chronic disease management
 - o Poor blood pressure, blood sugar
- Social determinants of health
 - Food access
 - Housing assistance
 - o Blue-collar workers underserved
- Care coordination and transitions of care
- Mobile crisis units
- Mobile clinics
- Integrated BH and primary care
- Remote monitoring, digital navigation to find care

- Community and connection opportunities with other medical providers to avoid isolation and professional stagnation in rural areas when the individual is the sole or one of the few providers.
- Good workforce of midwives, but needs better pathways for billing and practice.
 Reimbursement for birth centers by Medicaid and private pay needs to be added or improved.