Agency Mission
To promote, protect, and improve health and prevent disease and injury in Wyoming.

Top Five Priorities
1. Fostering programmatic excellence
2. Developing efficiencies in program operations
3. Focusing on population-based services versus direct care services
4. Providing cost-effective professional development for staff
5. Promoting value/relevance of public health

Structure and Relationship with Local Health Departments
The state/territorial health agency is under a larger agency—sometimes referred to as a “superagency” or “umbrella agency”—and has a mixed relationship with local health departments.

- Independent local health agencies (led by staff employed by local government)
- State-run local health agencies (led by staff employed by state government)
- Independent regional or district offices (led by non-state employees)
- State-run regional or district offices (led by state employees)

Organizational Structure
The health official does not report directly to the governor. The state does not have a board of health.

Planning and Accreditation
The state/territorial health agency has developed the following within the past five years:
- ++ Health Assessment
- ++ Health Improvement Plan
- ✔ Strategic Plan

The state/territorial agency plans to apply for accreditation, but has not yet registered in e-PHAB.

Agency Finance (FY15*)
Source of Funding

Federal Funding Sources
- CDC 43.0%
- HHS 17.2%
- HRSA 6.7%
- Medicaid 0.0%
- Medicare 0.0%
- USDA 28.3%
- DHS 0.0%
- EPA 0.4%
- Other 4.4%

Agency Workforce
The state/territorial health agency has 1,457 FTEs, including 91 state/territorial workers assigned to local/regional offices.