## **Problem and Solution Matrix**

	Funding	Coverage
LIP <sup>1</sup>	<ul> <li>\$2.1 billion total funding</li> <li>\$1.5 billion in net payments to hospitals</li> <li>Targeted support for critical facilities and services</li> <li>Statewide benefit from local partnerships</li> </ul>	<ul> <li>Supports access for Medicaid enrollees by compensating for reimbursement shortfalls</li> <li>Supports specialized services such at trauma care, rural hospitals, hospital-based primary care systems</li> <li>Supports services provided to uninsured patients, i.e. uncompensated care</li> </ul>
Expansion <sup>2</sup>	<ul> <li>100% federal funding through CY 2016</li> <li>Estimated \$3 billion federal funding in FY 2015-16</li> <li>Savings available from phase out of Medically Needy (estimated \$400 m)</li> </ul>	<ul> <li>951,826 estimated eligible</li> <li>834,674 estimated enrollees</li> </ul>

<sup>1</sup> Navigant, <u>Study of Hospital Funding and Payment Methodologies for Florida Medicaid (January 2015)</u>, p.26: "We do not believe that a decision to expand Medicaid in Florida would be sufficient as a full replacement of the LIP program." <sup>2</sup>*Ibid.*, *p. 201:* "However, expansion would not replace the portion of the LIP program funding the difference between Medicaid payments and hospitals' costs to treat Medicaid recipients."