

Under a block grant, states would receive a pre-determined amount of federal funding for Medicaid

Overview of differences between current flexible spending Medicaid program, block grants for Medicaid and per capita caps for Medicaid

	Current Medicaid Program	Block grant	Per capita cap
Coverage	<ul style="list-style-type: none"> Guaranteed coverage for all people who are eligible, no waiting list or benefit caps 	<ul style="list-style-type: none"> No coverage guarantee for eligible beneficiaries, may make use of wait lists or caps 	<ul style="list-style-type: none"> May be guaranteed for certain groups
Federal funding	<ul style="list-style-type: none"> Guaranteed, no funding cap Amount fluctuates according to program needs (e.g. enrollment numbers and health care costs) 	<ul style="list-style-type: none"> Amount capped Not based on program needs Fixed with pre-set growth year-on-year 	<ul style="list-style-type: none"> Capped per enrollee Not based on program needs Fixed with pre-set growth per enrollee
State matching payments	<ul style="list-style-type: none"> Federal spending contingent on state spending 	<ul style="list-style-type: none"> Federal spending not tied to state spending beyond cap 	<ul style="list-style-type: none"> Federal spending not tied to state spending beyond per enrollee cap
Core federal standards	<ul style="list-style-type: none"> Set in law with state flexibility to expand 	<ul style="list-style-type: none"> Uncertain what the requirements would be to obtain federal funds 	

Sources: Robin Rudowitz, "5 Key Questions: Medicaid Block Grants & Per Capita Caps," Kaiser Family Foundation, January 31, 2017.