

Sample Outline Format (MLA)

Introduction:

Attention-getter:

How many of us believe that healthcare is a basic right? That everyone, no matter one's status, should have basic access to treatment?

Reason-to-listen:

Unfortunately, not many people who qualify for Medicaid, a state and federal program in the United States to provide healthcare for the indigent, have that quintessential right, despite the changes made by the Affordable Care Act in 2010 (Snyder & Rudowitz).

Thesis:

Under the Affordable Care Act, also known as the ACA, the laws and mandates instituted dramatically altered the output of healthcare services throughout the nation.

Preview statement:

Today I will be discussing the financial changes to Medicaid under the Affordable Care Act and the economic and social impacts they have had on the country.

Transition:

So, what was the ACA expansion of Medicaid?

Body: (1 bullet point per main idea referenced in the preview statement)

Main Point 1: With the growth of Medicaid, some aspects of the financing of the program remained the same, while others changed. Although the Medicaid program is partially funded by the states and partially funded by the federal government, the Medicaid program is financed by the national government through two mediums: the Federal Medical Assistance Match Rates (FMAP) and Disproportionate Share Hospital (DSH) payments (Snyder & Rudowitz).

Helpful Tips

Every statement made should be tied back to the thesis statement.

Start by using one-word transitions between ideas, such as first, second, next, however, therefore, etc.

Use complete sentences.

Cite anything that is not your own idea using verbal and in-text citations.

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1. The Federal Medical Assistance Match Rates, through the ACA, were expanded to aid the states.
 1. In addition to the existing higher compensation for services such as family planning services, the ACA implemented a 100% match rate for the new enrollees of the Medicaid program from 2014 to 2016, which will drop to 90% by 2020.
 - a. With greater compensation through the match rates, the general fund spending "increased slightly" over the past few years (Snyder & Rudowitz).
 - b. As a result, American citizens who qualified for Medicaid were able to gain greater access to services previously restricted to them. By increasing the match rate, states were able to enroll more individuals into the program to increase their access to care.
 2. In addition to the enhanced rates, the expansion of Medicaid sparked modernization within the system
 - a. Under the ACA, "states were required to simplify and modernize their enrollment processes, coordinating eligibility and enrollment systems across Medicaid, the Children's Health Insurance Program (CHIP), and the Marketplace, to facilitate enrollment and promote continuity of coverage" (Snyder & Rudowitz).
 - b. Because of the greater need for more personnel to manage the program, the Medicaid expansion, again, was able to grow its presence in the states, thereby increasing access and resources for essential healthcare needs.
2. On the other hand, the Disproportionate Share Hospital payments were drastically reduced due to the expansion.
 1. These payments are designated for "hospitals that serve many Medicaid and low-income uninsured patients" which act as "safety net" hospitals (Snyder & Rudowitz).
 2. The federal allotments were reduced by \$1 billion each year, such that the total cut in funding for 2018 was \$2 billion, while in 2019, it would be \$3 billion, and so on till 2025 (Snyder & Rudowitz).
 3. By diverting funds from hospitals, the expansion has created a greater focus on outpatient services while attempting to minimize the extra costs that come from hospital visits. This has led to a societal shift to begin focusing on preventative primary care rather than expensive emergency care.

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Transition:

Now that we have discussed the financial changes to Medicare, let's consider the implications of these modifications.

Conclusion:

Restatement of preview statement: As the funding for the enhanced match rates increased and the allocations for DSH payments decreased to compensate for the high enrollment, many states were able to spread access to healthcare through Medicaid over the nation, improving state economies, increasing national spending, and garnering a greater social consciousness.

Bridge statement related to audience/attention-getter: Though healthcare in the United States is a broken system, advances made by the Medicaid expansion by the ACA have been paramount to the expanding access to medical services across the nation.

Memorable conclusion/call-to-action: While the ACA has made significant strides to provide the American people their basic right to healthcare, there are many unknowns in the system before we can achieve this goal soon.

Works Cited:

Snyder, Laura, and Rudowitz, Robin. "Medicaid Financing: How Does It Work and What Are the Implications?" The Henry J. Kaiser Family Foundation, Kaiser Family Foundation, 21 Dec. 2016. www.kff.org/medicaid/issue-brief/medicaid-financing-how-does-it-work-and-what-are-the-implications/.