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Note the order in which these items are listed. Always double space them.

Note: MLA does not use apostrophes to form the plurals of abbreviations like these. Also note the lack of periods.

Always give your paper a title, even if it's only Paper One.

HMOs: The Best Medicine?

The title is centered; no boldface type.

1.5" margins at the start of every paragraph

In an 1981 essay titled "Rich Doctors, Poor Nurses," David Osborne argues that the huge salary discrepancy between MDs and RNs is caused, at least in part, by gender bias. Nursing has traditionally been considered women's work and is therefore undervalued, even when we take into account the doctors' additional training, work hours and professional responsibilities.

To form the possessive of an irregular plural noun, add an 's.

To form the possessive of a plural noun that ends in s, add only an apostrophe.

As a cure for rising medical costs in general, Osborne prescribes Health Maintenance Organizations. These HMOs, he says, will keep patient costs down while still letting the enterprising doctor provide quality care and make a profit (124-28).

Use quotation marks around a work that is part of a larger work.

Parenthetical citation with author's name in the Tag. There's more than one page number here because we're at the end of a summary of the whole source.

HMOs were not a new thing in 1981. Historically, the HMO was developed as early as 1929 by the Ross-Loos Medical Group in California as a means of providing medical care to workers and their families, but it wasn't until the 1970s that the government began to promote HMOs and encourage the public to use them. Included in the promotion, Washington State's own Group Health Cooperative of Puget Sound was Founded in 1947. This non-profit, consumer owned corporation serves approximately 250,000 enrollees in Seattle and operates a 301 bed hospital (Brown 44)

No apostrophes are needed with dates like this.

Parenthetical citation without author's name in the Tag.

Another HMO founded in 1947, the Health Insurance Plan of Greater New York (HIP), came about largely as a result of Mayor Fiorello H. La Guardia's determination to build a prepaid plan for New York City's employees. Now the second largest PGP in the country, HIP serves 750,000 subscribers and their dependents (Miller 46).

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To form the possessive of proper nouns (names), add an 's.

And finally, helping pioneer the industry and now the largest of the HMOs, Kaiser-Permanente Medical Care Program has over 3.5 million enrollees throughout six regions. Like the Ross-Loos Medical Group, it too was formed to provide medical care for workers in Kaiser Industry's construction and shipyards, but after World War II the organization was opened to the general public (Luft 10).

You need not write out big numbers like this.

When you introduce a direct quote, put a comma before the quotation marks at the beginning.

Generally, though, over the last ten years, Osborne's view of HMOs has prevailed.

As Marion Asnes puts it, "Like certain amusement parks, these [HMO] programs pledge to satisfy all our needs at one low price" (58). According to Lawrence Brown, enrollees

Use square brackets inside quotes to show where you've changed or added things.

Put the period outside of the parentheses at the end.

pay a monthly or yearly pre-negotiated fee to the organization and are, in turn, assured comprehensive health care services, ambulatory care and inpatient hospital services

independent of the use of services. Furthermore, the HMO assumes part of the risks or gains in the provision of services (22). Yet, at the same time, the HMO has the right to

This comma is here because the quote is parenthetical (it just adds extra information).

decide what specialized care will be covered in order to keep the costs to a minimum.

Gate-keeping, "where family practitioners and internists control patients' access to

This is how you put a parenthetical citation in the middle of a sentence

services," (Asnes 60) helps keep costs down. Whenever a patient needs specialized care-

-from an X-ray to a consultation with a psychiatrist-- the primary care physician must give approval (Asnes 61).

Two major types of HMOs have emerged. Prepaid Group Practices, or PGPs, organize doctors into group practices. They then receive a salary or, under a system

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called capitation, they get "a single, fixed monthly fee for each patient they treat--

Please note: it always takes TWO hyphens to make a dash.

sometimes as little as \$12 per patient--and that money covers all the patient's

treatment" (Asnes 60). In Individual Practice Associations, or IPAs, physicians in

private practice are paid on a fee-for-service basis by the HMOs or a number of

insurance companies. Patients are offered the same one-to-one care they have always

gotten from their family practitioner, but with co-payments of only a few dollars per visit. The HMOs subsequently reimburse the physicians from the prepaid fees of subscribers (Asnes 61).

Yet for all their promise, HMOs remain controversial. Advocates formulate a variety of reasons why they are beneficial and effective, or at least better than anything else. *The New England Journal of Medicine* says:

Italicize the titles of complete works: books, magazines, journals, newspapers, or other such sources.

2" margins for inset quotes

Of the various health care systems currently available to the American people, Health Maintenance Organizations (HMOs) most nearly meet the objective of providing access to high quality comprehensive medical and health care services at the most reasonable cost possible. (qtd. in Luft 20)

Second, it is said that HMOs deter people from postponing medical care by providing an inexpensive and most importantly and accessible means of obtaining medical services. Lawrence Brown, author of *Politics and Health Care Organizations*, writes:

What to do if the original source is not available to you.

Note the use of ellipses to show where words have been left out of a quote.

Note also that the three dots have spaces between them.

[ . . . ] prepayment and prepayment alone effectively eliminates the main financial deterrent to a timely resort to care, the fear of a hefty fee for service. Prepayment [ . . . ] not only insures that enrollees may resort to care without fear of inability to pay for it; it also positively induces them to use access to this timely care in a timely way, thereby encouraging early detection and treatment of symptoms. (158)

When you use an inset quote, do NOT use quotation marks. Also note that the parentheses go OUTSIDE the period.

Note that this side of the inset quote does not have to be indented.

Finally, HMOs are said to eliminate the incentives for physicians to order unnecessary medical treatment. Chairman of the Health Policy Program at the University of California states, "Not only do they reduce utilization of expensive services,

but that reduction comes in categories that are known to be medically unnecessary” (Luft 114).

Although the supporters of HMOs are confident that this system is the answer to America's health care problems, opponents of the organizations list several reasons the HMO system is not as good as it seems. Dr. Robert Berensen, who is employed by an HMO, argues that many times the physicians come out the losers because some patients require more care than they are paying for (11). Furthermore, many opponents argue that physicians are limited, not only in the amount of care they are allowed to offer, but also in the quality of care (Berenson 12, Asnes 58, Miller 10). Some studies have found that HMO doctors are less likely to diagnose heart disease and depression than fee-for-service doctors (Asnes 60).

How to document  
“many  
opponents” as a  
source.

Lastly, the financial conflict arising between doctors and HMOs greatly concerns the opponents of these organizations. Princeton University Professor Uwe Rheinhardt refers to this relationship as a “joint venture between doctors and HMOs” (qtd. in Berenson 12). The relationship is basically that “doctors are financially rewarded for doing the least service. Quite simply, the more the HMO spends to treat each patient, the lower its profits” (Asnes 60). Equally important, patients suffer because of the HMO's financial concerns, and “critics say that this penchant for under-diagnosing an under-prescribing is a built in fault with [the] system” (60).

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Clearly, Osborne was onto something. HMOs were developed for all the right reasons: providing affordable, accessible and quality health care. However, as they have grown in size and strength, they have created an equal amount of conflict. It is certain that many people have benefitted from the services made available by HMOs, and according to Chief of Hospital Services for Group Health, Darrell Halverson MD, “The

system finds the true emergencies and sorts out the irrational" (qtd. in Asnes 60). Yet, people must be aware that if they enroll in an HMO and expect to receive medical care as usual, they may wake up surprised. Although organizations like the National Committee for Quality Assurance are attempting to further evaluate HMO performance, assess quality, and justify cost cutting measures, these timely assessments leave the health care consumer vulnerable. Ultimately, the public needs to stay alert to potential problems by taking a few simple measures: learn how the administration of your own HMO works; choose your primary care physician carefully, and never hesitate to assert your medical needs.

You can use a colon or a dash to introduce things in a series. . .

But use a semicolon if those "things" are expressed in complete sentences.

Here, a comma and the coordinating conjunction "and" can do the same job as a semicolon.

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Smith 6

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Works Cited

A magazine that comes out monthly.

A magazine that comes out weekly

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Asnes, Marion. "Comprising Physicians." *Health* Jan. 1991: 58-61. Print.

Berenson, Robert A. "In a Doctor's Wallet" *The New Republic* 18 May 1987: 11-12.

Print.

Brown, Lawrence D. *Politics and Health Care Organization: HMOs as Federal Policy*.

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Washington D.C.: Brookings Institute, 1983. 22-160. Print.

Even when you cite whole books, in a paper this size you should include page numbers. We know you didn't USE the whole book.

Luft, Harold. *Health Maintenance Organizations: Dimensions of Performance*. New

Note that all sources appear in alphabetical order.

York: Wiley, 1981. 10-15, 129-145. Print.

Here's what to do when you used material from different parts of the same book.

They are NOT numbered.

Miller, Irwin. *The Health Care Survival Curve: Competition and Cooperation in the*

*Marketplace*. Homewood, IL: Dow Jones-Irwin, 1984. 5-46. Print.

When using numbers 1-99, always give the whole numbers.

This is how you cite a work in an anthology like our textbook.

Osborne, David. "Rich Doctors, Poor Nurses." 1982. *English 102: Writing With*

*Sources*. Ed. Patricia Garrison. Ellensburg: The University Store, 1991. 124-28.

Print.

The proper way to abbreviate the word "Editor." For more abbreviations, please see the MLA Handbook.

The date the work was originally published. You probably want to include this if your source is more than a few years old.

With numbers over 100, it is usually best to give the whole numbers, but you may do it this way as long as it doesn't confuse the reader.