Department of Economics
Brigham Walker
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October 7th, 2019

Re: NBER Health Economics Research Boot Camp for Graduate Students

Dear Ben, Katherine, and Jonathan,

Please find attached the following items in support of my application for the NBER Health Economics Research Boot Camp for Graduate Students:

- **This Cover Letter** (Page 1), which includes my contact information (above) and my letter of recommendation writer's contact information:

  Mary K. Olson
  Associate Professor of Economics
  Director of Health Policy Program
  306 Tilton Hall
  New Orleans, LA 70118
  Molson3@tulane.edu
  504-862-8342

- **My Curriculum Vitae** (Pages 2-4), which includes a list of all completed Ph.D. courses and abstracts for current projects

- **A Two-Page Essay** (Pages 5-6), which explains my motivation for attending the boot camp

If you have any questions, please do not hesitate to contact me. Thank you for your time and consideration.

Regards,



Brigham Walker

bwalker6@tulane.edu | 301.893.4004 **Brigham Walker** 1104 Adams St, New Orleans, LA 70118

EDUCATION

Ph.D.	Economics	*Tulane University*	*Candidate 2021*
Masters	Economic Analysis and Policy	*Tulane University*	*Class of 2017*
Masters	Finance	*University of London*	*Class of 2015*
Masters	Management	*Harvard University*	*Class of 2010*
Bachelors	Molecular Biology	*Princeton University*	*Class of 2007*

Dissertation Title: Essays in Health Economics
Research Areas: Health, Labor, Experimental, and Applied Economics; Discrimination and Equity
Ph.D. Committee: Mary K. Olson (Chair), James Alm, Patrick Button, and Kevin Callison

Ph.D. COURSES COMPLETED

ECON 7180	Mathematical Economics I
ECON 7160	Econometrics I
ECON 7170	Econometrics II
ECON 7175	Econometrics III
ECON 7510	Advanced Price Theory I
ECON 7520	Advanced Price Theory II
ECON 7130	Advanced Microeconomics
ECON 7530	Adv. Income & Employment Theory I
ECON 7982	Globalization & Income Inequality
ECON 7980	Health Economics
ECON 7981	Economics of Disease
ECON 7140	Public Expenditures
ECON 7680	Public Finance II
GHSD 8350	Policy Analysis: Natural Experiments
ECON 7990	Independent Study (RCTs)
ECON 7980	Research Methods I
ECON 7981	Research Methods II

MANUSCRIPTS UNDER REVIEW

When Is the Next Available? A Field Experiment Measuring Race and Ethnicity Discrimination in Booking Medical Appointments.
w/ J. Wisniewski

ASSOCIATED PRESENTATIONS

- *APPAM (Nov 2019)*
- *ASHEcon (Jun 2019)*
- *AEA Annual Meeting (Jan 2019)*
- *Southern Soc. Society (Apr 2018)*

Short Abstract: We conducted a randomized phone audit field experiment to measure discrimination faced by Black and Hispanic versus White women when scheduling appointments. Based on 804 answered calls, Black and Hispanic callers were offered appointments more often. However, this was due to being asked more about their insurance status, which highly correlates with appointment offers. Among callers for whom insurance status was asked and revealed, Black and Hispanic callers were offered later appointment times despite having the same insurance status. These results suggest that minorities face barriers to timely access to healthcare.

Employment Discrimination against Indigenous Peoples in the United States: Evidence from a Field Experiment
Employment Discrimination and Indigenous Applicants
w/ P. Button; NBER working paper link: www.nber.org/papers/w25849

- *Southern Soc. Society (Apr 2018)*
- *AEA Annual Meeting (Jan 2018)*
- *Tulane Murphy Institute (Apr 2016)*

Revise and Resubmit, Labour Economics

Short Abstract: We conducted a resume correspondence experiment to measure discrimination in hiring faced by Indigenous Peoples in the United States. We sent employers 13,516 realistic resumes for common jobs in 11 cities and compared callback rates. We signaled Indigenous status in one of four different ways and we almost never find any differences in callback rates, regardless of the context. These findings hold after numerous robustness checks, although our checks and discussions raise multiple concerns that are relevant to audit studies generally.

OTHER PROFESSIONAL EXPERIENCE

Director, Business Development (real world evidence)	*McKesson Life Sciences*	*2019 – present*
Director, Business Development (data and clinical education)	*McKesson Life Sciences*	*2013 – 2019*
Senior Manager, Strategic Consulting (market research)	*McKesson Specialty*	*2011 – 2015*
Senior Associate Consultant (market research)	*Boston Healthcare*	*2009 – 2011*
Associate Consultant (pricing, market research, strategy)	*Boston Healthcare*	*2007 – 2009*
Intramural Researcher and Special Researcher (policy)	*Nat. Institutes of Health*	*2005 summer*

WORKING PAPERS	ASSOCIATED PRESENTATIONS
The Direct Provider Effects of a Medicare Payment Reform *w/ J. Frytak, J. Hayes, M. Neubauer, N. Robert, & L. Wilfong*	▪ *CMMI Policy Group (Nov 2018)* ▪ *Tulane Murphy Institute (Oct 2018)* ▪ *CMMI Policy Group (Aug 2018)*

Short Abstract: We evaluate the effects of the Oncology Care Model which included a shared savings-like component. Using a differences-in-differences approach to compare participating with non-participating practices, we find that the first year of the program reduced the number of provider visits in breast and colon cancer. Providers also reduced their use of office-administered drugs while also reducing the total costs of those drugs in prostate cancer. Overall, costs incurred directly by the doctors were decreased across all tumor types, but these effects were offset by the costs of the program. This paper suggests that these models can change behavior, but modestly.

Can Proactive Targeted Informational Interventions Change Health Behaviors and Reduce Healthcare Costs?	▪ *APPAM (Nov 2019)* ▪ *ASHEcon (Jun 2019)* ▪ *Tulane Murphy Institute (Apr 2019)* ▪ *Benefits Summit (Oct 2018)*

Short Abstract: This study leverages a natural experiment to evaluate the effects of a tool that used targeted analytics to nudge high-risk employees towards active health management. Use of an event study and differences-in-differences design suggest that the program significantly increased some basic ambulatory services for lower back pain and other care. However, these campaigns do not appear to have reduced the short-run occurrences of downstream acute care.

WORKS IN PROGRESS	ASSOCIATED PRESENTATIONS
The Spillover Effects of a Medicare Payment Reform	▪ *AEA Annual Meeting Poster (Jan 2020)* ▪ *APPAM Fall Meeting (Nov 2018)* ▪ *ASHEcon (Jun 2018)*

Short Abstract: By altering the incentives faced by providers, Medicare may indirectly affect care for the privately insured. Using a recent Medicare payment shock where some providers (but not all) moved from a traditional payment model to a model that rewarded patient management and cost containment. Using a unique dataset of medical claims from a large provider network, I estimate the spillover effects to the privately insured of the Oncology Care Model (OCM) program. Preliminary results suggest that the Medicare policy change affected the utilization and cost outcomes for the privately insured population under age 65.

The Designs of Student Assignment Mechanisms and Their Implications for Equity: Evidence from New Orleans *w/ J. Valant*	▪ *APPAM Fall Meeting (Nov 2018)* ▪ *Ed. Research Alliance (Nov 2018)* ▪ *EEA Annual Meeting (Mar 2018)*

Short Abstract: School choice algorithms often give priority to certain students at certain schools (e.g., those who live nearby or come from a failing school). In deciding which groups of students should have priority and how the priorities are operationalized, policymakers shape which students attend which schools—decisions with important equity implications. This study uses several years of data from the country's most comprehensive unified enrollment system to examine how the use of priority groups affects which students are assigned to which schools.

How a Private Payer Shared Savings Model Impacted Cost and Quality Outcomes	▪ *AEA Annual Meeting Poster (Jan 2020)* ▪ *ASHEcon Poster (Jun 2019)* ▪ *BCBS of Louisiana (Oct 2017)* ▪ *Tulane Murphy Institute (Apr 2017)*

Short Abstract: This paper assesses the cost effects of a large private payer-based model. The launch was staggered and virtually all non-participating practices eventually participated the program. Using differences-in-differences and event study designs with several years of privately held healthcare claims data, I assess the effects of the program by comparing participating practices against non-participating practices. Preliminary results suggest that the program changed utilization and cost patterns among the treatment practices.

WORKS IN PROGRESS (continued) ASSOCIATED PRESENTATIONS

The Equity Effects of High Deductible Health Plans

Short Abstract: I assess how individual income constraints mediate different responses (health care utilization and spending as well as sick days and labor performance) to mandated switches from a traditional health insurance plan to a high-deductible health plan.

TEACHING EXPERIENCE

Instructor	*Bachelor's*	Urban Economics (rated 4.4/5.0)	*Tulane University*	*2018 fall*
Teaching Assistant	*Doctoral*	Econometrics III (4.5/5.0)	*Tulane University*	*2018 spring*
		Econometrics I (4.6/5.0)	*Tulane University*	*2017 fall*
	Master's	Econometrics (4.9/5.0)	*Tulane University*	*2017 fall*
		Healthcare Strategy (unrated)	*Harvard (Ext. School)*	*2009 fall*
	Bachelor's	Global Food Economy (unrated)	*Tulane University*	*2019 spring*
		Microeconomics I (unrated)	*Tulane University*	*2019 spring*
		Experimental Econ (4.9/5.0)	*Tulane University*	*2017 spring*
		Urban Economics (4.3/5.0)	*Tulane University*	*2016, 2018*
		Labor Economics (4.7/5.0)	*Tulane University*	*2016 fall*
Guest Lecturer	Urban Economics, Labor Economics		*Tulane University*	*2017, 2018*
	Courses in public policy, race, and history		*Princeton, UMd, UPenn*	*2013, 2014, 2015*
	International Finance – Masters		*Clark University*	*2009 spring*

OTHER RESEARCH EXPERIENCE

Researcher	BCBS-LA & Tulane Health Partnership	*BCBS-LA, Tulane*	*2017– present*
Research Assistant	Field: Labor Economics	*NBER, Tulane*	*2016 – 2017*
	Field: Health Economics	*Tulane*	*2016 summer*
	Fields: Health Policy, Stakeholder Theory	*Harvard (Public Health)*	*2009 fall*
	Focuses: Implicit Bias, School Truancy	*Harvard (Law School)*	*2009 – 2010*

GRANTS, SCHOLARSHIPS, & FELLOWSHIPS

NIH R01 (co-Investigator w/ LaVeist, Wisniewski, & Button)	*$825,000 (not awarded)*	*2019*
NIH R01 (co-Investigator w/ Wisniewski & Button)	*$827,750 (not awarded)*	*2018*
Tulane Doctoral Fellowship & **Tuition Scholarship**	*$22,063 & $49,030/ year*	*2015 – present*
Center for Public Service Grant (w/ Demosthenidy & Callison)	*$3,000*	*2018 – 2019*
Carol Lavin Bernick Grant (w/ Wisniewski & Button)	*$9,800*	*2018 – 2019*
Stanford's Hoover Institution Workshop Honorarium	*$1,500*	*2018*
Tulane Committee on Research Fellowship (w/ Button)	*$7,973*	*2017 – 2018*
J.E. Land Fund for Graduate Student Travel	*$700, $1,000*	*2017, 2018*
Graduate Student Studies Association Travel Award	*$400, $400*	*2017, 2018*
Blue Cross Blue Shield of Louisiana (via Tulane Partnership)	*$3,000*	*2017*
Tulane Economics Department Grant	*$1,500*	*2015*

OTHER CREDENTIALS & SKILLS

Quantitative	Stata, SAS, EViews, SPSS, QGIS	*Various Sources*	*Continuous*
Healthcare	Certified Professional Coder (CPC®)	*AAPC & US Oncology*	*Current 2012-15*
Business	Certificate (McKesson LEAP)	*Georgia Tech B-School*	*Completed 2012*
Operational	Lean 6σ Certificate (Green Belt)	*McKesson & BMGi*	*Completed 2013*
Oratorical	Advanced Communicator Silver (ACS)	*Toastmasters*	*Completed 2013*
Language	Japanese (Intermediate), Spanish (Basic)	*Princeton, GLN*	*Continuous*

HONORS and AWARDS

- NBER Summer Institute Participant – Health Care (2019)
- Harvard Research Award (3x)
- Princeton Lane '34 Svc Award
- Hank Towns h'82 Svc Award
- Min Yasui Orator Winner-East
- All-Ivy Linebacker, Ivy Champ
- USA Football World Champ
- Listed on *Princeton Football's Best of the Ivy League Era*
- NCAA Sportsmanship Nominee
- Spirit of Princeton Award
- McKesson Sales Excellence
- McKesson Rising Star
- McKesson LEAP Selectee

Essay: Why I Want to Participate in the NBER Health Economics Research Boot Camp

Motivation Summary

I am an aspiring health economist and am excited about the possibility of participating in the NBER Health Economics Research Boot Camp for Graduate Students. My research generally focuses on how providers, payers, and patients behave in response to new information or incentives. I am ultimately seeking a faculty position where I can advance research in these areas. I believe that this boot camp will help me further develop how I approach these issues, both from an identification perspective as well as from a framing and motivation perspective.

My Background

I have been interested in health care research since college. At the time, I thought I'd pursue that interest as a bench scientist where I would help to generate insights into disease mechanisms to support the development of new therapies. I majored in molecular biology and, while I gained a strong appreciation for the molecular and cellular underpinnings of disease, I also developed an appreciation for how the allocation of existing innovations and resources impact health as well.

My first job out of college was in market research and consulting and focused on working with medical technology companies to navigate the reimbursement systems for their products and services. Through work with dozens of manufacturers and after hundreds of interviews with payers and providers, I developed a qualitative sense of how novel technologies become valued (or not) by insurers and become integrated (or not) into care delivery. However, I wanted better empirical and theoretical tools to understand these mechanisms, which led to me pursuing a Ph.D. in economics.

Current Research

My research focuses on how health care stakeholders behave in response to new information and incentives. I'm primarily focused on how these behaviors play out between pairs of stakeholders (e.g., providers responding to new payer incentives, patients responding to new payer information or incentives, and providers responding to patient signals).

On the provider response side, I have a few projects concerning how providers respond to shared savings models. In these models, providers contract with payers to continue to be paid on a fee-for-service basis. However, they also agree to share savings generated when actual costs fall below a pre-agreed expected cost for the managed population. Two of my projects focus on a Medicare shared savings program called the Oncology Care Model, which pertains to chemotherapy-treated cancer care. Using differences-in-differences and event study analysis to compare participating practices with non-participating practices (and handling selection as best I can), I find relative reductions in utilization and costs, but these effects are offset by the costs of the program. I am also assessing a similar model for Blue Cross Blue Shield of Louisiana for their under age 65 population and preliminarily find similar modest reductions.

Another study focuses on how providers respond to a patient's race or ethnicity. My co-author and I conducted a randomized phone audit field experiment where black, white, and Hispanic callers sought primary care appointments. We found that black and Hispanic callers were asked

about insurance more than white callers. Upon revealing the same insurance status, black and Hispanic callers were offered later appointments on average.

On the patient response side, I have two projects underway. The first focuses on a targeted informational push from a self-insured employer to its employees. Employees were individually targeted based on their claims records with information on how to manage their care, but due to an unexpected organizational change some employees were not included. Using event study and differences-in-differences design, I find that the program significantly increased some basic ambulatory services for lower back pain and other types of care. However, these campaigns do not appear to have reduced the short-run occurrences of downstream acute care. I have also just started another project on patient responses to high deductible health plans with a focus on how individual income and occupation variation affect care utilization and workforce productivity measures. I expect to have preliminary results by November.

My Work and the Boot Camp

My general desire to participate in the program is to have more exposure on how research is best motivated, conceived, executed, and discussed. While I've presented at several conferences including ASHEcon, APPAM, and AEA, I've found that I learn a lot when seeing more senior researchers present their work. The program's focus on topics that intersect with industrial organization, public economics, and behavioral economics is particularly compelling. Ben Handel and Jonathan Kolstad's paper *What does a deductible do?* directly relates to my high deductible project. Ben's work on nudges, plan designs, and accountable care organizations also directly link to my above projects, as does Jonathan's work on surgeon report cards which ties into my informational push paper, and Katherine's work on networks and incentives, which cuts across several of my topics. I'm also interested in gaining more direct exposure to structural modelling methods that come with industrial organization training as my department primarily focuses on reduced form methods. Based on last year's list of speakers, I think that the majority of presenters will cover something relevant to my research interests.

Overall

This program looks to be a fantastic resource for graduate students. I see several areas in which I would benefit were I to participate. Thank you for your consideration.

Tulane University

October 9, 2019

Dear Colleagues,

I am delighted to recommend Brig Walker for the NBER Health Economic Research Boot Camp for graduate students. I have known Brig since we recruited him into our doctoral program in Economics at Tulane University in 2015. I am currently serving as the chair of his dissertation committee.

Brig is a 5th year PhD student who is currently writing his dissertation in the field of health economics. His research seeks to understand how information and incentives shape health care provider behavior and patient decisions. He has two papers that evaluate the effects of payment reforms on the provision of cancer care. Brig is investigating how Medicare's shared savings program called the Oncology Care Model, affects health care utilization and costs of care. He has shown great initiative in terms of seeking out two proprietary databases for conducting these analyses. One database spans several states while the other database consists of data from a large Louisiana insurer. He uses a difference in difference approach to examine how use of health care services and costs varies among the participants in this program compared to non-participants. His findings using the multistate data show that the program causes reductions in both utilization of some services and costs, but that these effects are offset by the costs of the program. His project that focuses on practices in Louisiana is still in progress, but he hopes to draw on more detailed practice and patient level data to examine the effects. Brig has decided to spend an additional year at Tulane largely for the purpose of continuing and completing this project. His third chapter departs from the issue of payment reform and focuses on racial and ethnic discrimination in the scheduling of medical appointments. This project grew out of Brig's joint labor market research with Patrick Button that focused on racial discrimination among indigenous peoples in the United States. [Button and Brig currently have a paper on the topic that received a revise and resubmit at *Labour Economics*.] In Brig's thesis chapter, he (in collaboration with Janna Wisniewski from the School of Public Health) collected their own data from a field experiment to analyze the extent to which perceptions of race or ethnicity influence the scheduling of medical appointments. Brig secured some grant funding from an internal Tulane grant to conduct this research. Their findings suggest that minorities were asked about insurance status more frequently than whites. For those who indicated that they had insurance, minorities were offered later appointment times than whites with similar insurance status. Brig is continuing to develop this project and participating in efforts to secure grant funding to expand the project. Beyond his dissertation research, Brig has other research that investigates the effects of targeted informational interventions by employers to change employee behavior and reduce costs. For

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this project, he also secured a proprietary dataset. The project will evaluate the effects of a patient education campaign targeted to high-risk employees to encourage preventive care and discourage unnecessary acute care. Brig will present this paper as well as his discrimination paper at the APPAM conference in November.

Overall, I am impressed with Brig. He is smart, hardworking, and productive and is always searching for ways to grow as a researcher. He is also quite knowledgeable of health care institutions and policies having spent a few years in health care consulting prior to enrolling in our program. I am happy that he wants to participate in this Boot Camp for graduate students to broaden his knowledge of the health economics research at the intersection of Industrial Organization, Public Economics, and Behavioral Economics. He is quite motivated and interested to learn about new methods of analysis as well as new ways to think about and approach research. I think Brig is an ideal candidate for this Boot Camp and I strongly recommend him. If selected, I am confident that Brig will bring great energy and enthusiasm to the Boot Camp. He simply loves research and he loves learning!

Sincerely,

Mary Olson

Mary K. Olson, Ph.D.
Associate Professor of Economics

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