Harvard Medical School
Curriculum Vitae

Date Prepared: **October 12, 2020**

Name: **Timothy J. Layton**

Office Address: **180 Longwood Avenue, Boston, MA 02115**

Work Phone: **617-432-4465**

Work Email: **layton@hcp.med.harvard.edu**

Education

2014	PhD	Economics	Boston University
2009	BA	Economics, Political Science	Brigham Young University

Postdoctoral Training

2014-2016	NIMH Postdoctoral Research Fellow	Department of Health Care Policy	Harvard Medical School

Faculty Academic Appointments

2020-	30th Anniversary Associate Professor Health Care Policy	Department of Health Care Policy	Harvard Medical School
2016-2020	Assistant Professor Health Care Policy	Department of Health Care Policy	Harvard Medical School

Other Professional Positions

2017-	Faculty Research Fellow	NBER
2012-2014	Research Assistant	Harvard Medical School
2012-2014	Research Assistant	Boston University
2010	Research Assistant	Boston University
2009-2010	Research Assistant	Boston University
2009	Research Assistant	Brigham Young University
2009	Teaching Assistant, Development Economics	Brigham Young University

Committee Service

Local

2017-	Essentials of the Profession Curriculum Development Brd	Harvard Medical School
2017	Junior Faculty Search Committee—Statistics	Harvard Medical School
2019-	Research Computing Faculty Advisory Committee	Harvard Medical School
2019-	Co-Chair Economics Track Health Policy PhD Program	Harvard Graduate School of Arts and Sciences

National

2021	Co-organizer, Summer Institute HC Program Meeting	NBER
2019	Scientific Review Committee, Biennial World Congress	International Health Economics Assoc
2017-	Scientific Review Committee, Biennial Conference	Amer Society of Health Economists
2016	Scientific Review Committee, Annual Research Meeting	AcademyHealth

Professional Societies

2017-	American Society of Health Economists
2017-	Econometric Society
2017-	Risk Adjustment Network
2014-	American Economic Association
2014-	American Society of Health Economists

Grant Review Activities

2017	Ad hoc reviewer	Robert Wood Johnson Foundation
2019	Ad hoc reviewer	National Institute on Aging – Social and Behavioral Grant Application Review Committee

Other Editorial Roles

2020-	Referee	American Economic Journal: Applied Economics
2020-	Referee	AER: Insights
2019-	Referee	Review of Economics and Statistics
2019-	Referee	American Economic Review
2019-	Referee	Journal of Political Economy
2018-	Referee	Quarterly Journal of Economics
2018-	Referee	Journal of Human Resources
2017-	Referee	Robert Wood Johnson Foundation
2017-	Referee	American Journal of Health Economics
2017-	Referee	American Economic Journal: Economic Policy
2017-	Referee	JAMA
2016-	Referee	Journal of Public Economics
2016-	Referee	Health Affairs
2016-	Referee	American Journal of Managed Care
2015-	Referee	Journal of Health Economics

| 2014- | Referee | Health Services Research |
| 2014- | Referee | Inquiry |

Honors and Prizes

2017	Health Economics Interest Group Best Abstract	AcademyHealth
2014, 2017	Mark A. Satterthwaite Award for Outstanding Research in Healthcare Markets	Kellogg School of Management
2013	Special Research Fellowship	Boston University
2011, 2012	Teaching Fellowship	Boston University

Report of Funded and Unfunded Projects

Funding Information

Current

2018 – 2021   The Effect of Behavioral Interventions on Enrollment and Adverse Selection in Health Insurance Marketplaces
No Award Number (Layton), MIT JPAL
$224,551
Role: PI
This project will measure the importance of psychological frictions in limiting take-up of free or low-cost insurance by testing the effects of a simplified streamlined enrollment process on the probability that an eligible individual enrolls in coverage. Determine which groups are most affected by the interventions using machine learning. And assess the effects of marketing on the marketplace risk pool.

2018 – 2023   Quality and Outcomes under Medicaid Managed Care:
Evidence from Random Plan Assignment
K01 HS 25786 – 01, AHRQ
PI, $741,528
Role: PI
This Mentored Research Scientist Research Career Development Award (K01) focuses on the important and understudied area of Medicaid Managed Care (MMC). The applicant seeks training in quality and outcomes measurement and stakeholder relationship development, two critical skills for a Medicaid researcher. The candidate will apply these skills to a research proposal asking 1) whether patients are better off in a public fee for-service Medicaid plan or in a private MMC plan and 2) how should states structure their MMC programs?

2019 – 2022   The Virginia Work Requirements Experiment

No Award Number (Layton), MIT JPAL
$394,266
Role: PI
This project uses a randomized-controlled trial of work requirements in Virginia Medicaid to study impacts of work and premium requirements on employment, earnings, insurance status, and access to care using a mix of administrative and survey-collected data.

2020 – 2023   Work Requirements and Health Care Disparities in Medicaid:
A Randomized Controlled Trial
7R01MD014970-0, NIH
$1,125,097
Role: PI
The goal of this project is to conduct a randomized controlled trial studying the impacts of the work requirements in Medicaid policy on coverage, access to care, employment, and health, with a particular focus on changes in racial/ethnic and geographic disparities in these outcomes.

2020 – 2023   Health Care Markets and Regulation Lab
Grant ID: 20-04402 (Chernew), Laura and John Arnold Foundation
$9,300,000
Role: Co-Investigator
The mission of the Healthcare Markets and Regulations Lab is to provide the critical evidence, analyses and tools necessary to support private and public sector innovations that promote high quality health care at a sustainable cost. This project is focused on a single cross-cutting objective: to reduce the rate of health care spending growth through a set of projects related to the health care process, utilization and broader initiatives that affect spending and efficiency. These monitoring activities focused on compiling data critical for related evaluation and policy work, evaluation activities intended to provide critical evidence related to policy actions, and activities directly related to policy development.

2020 – 2025   Improving Medicare in an Era of Change
P01AG032952 (Landon/McWilliams), NIH/NIA
$10,053,382
Role: Co-Investigator
Successfully integrating the financing and delivery of care remains a primary goal of the Medicare program after years of expanding efforts, including a recent period of unprecedented experimentation. This Program Project proposal is to supply foundational insights for designing payment systems in healthcare. Our research agenda encompasses four key areas: 1) comparative performance of MA and TM and variants of each; 2) strategies employed by MA plans; 3) learning from state Medicaid programs; and 4) experiences of Medicare patients with dementia and their implications for payment system refinements for patients with special needs.

Past

2013   Risk Adjustment and Consumer Sorting in Health Insurance Exchanges
Summer Research Grant/Boston University
PI ($5,000)

To develop a framework for determining the effect of risk adjustment on consumer sorting across health insurance plans and apply that framework to estimate the welfare consequences of risk adjustment in Health Insurance Marketplaces.

2011 – 2016   Mental Health Coverage and Payment in Private Health Plans
R01MH094290 (McGuire), NIH/NIMH
(Co-Investigator) $266,357
This project proposes to conduct fundamental economic research on the patterns of health care use by persons with mental illness in order to establish the evidence base for sound choices about structuring health insurance markets in the Exchanges. We plan to assess the magnitude of the selection problem among likely Exchange participants, and based on this, identify and evaluate options for correcting incentives to health plans to provide efficient and fair coverage for person with mental illness.

2015 – 2020   Medicare in a Restructured Delivery System
P01AG032952 (Newhouse), NIH/NIA
$963,392
Role: Co-Investigator
Successful integration of financing and care in the Medicare program is the single most important objective of health policy, and arguably, with its powerful budgetary implications, of social and fiscal policy in the US today. This Program Project proposal lays out a forward-looking research agenda encompassing three areas: 1) innovative and comprehensive analyses of current initiatives around ACOs, 2) rigorous research on the current form of integration, the MA program which, as our research has shown, has demonstrated improved performance in recent years, and, 3) research on innovative beneficiary as well as provider payment policy.

2016 – 2018   Adverse Selection and Risk Adjustment in the Colorado Health Insurance Marketplace
(Layton), Anthem, Inc.
$146,000
Role: PI
This project is to study the extent of adverse selection in the Colorado Health Insurance Marketplace and how well the HHS-HCC risk adjustment system addresses selection. It will determine incentives for group-level and service-level selection in Marketplace plans under the HHS-HCC risk adjustment system and the extent of adverse selection across issuers in the Marketplace by exploiting differences in plan prices across rating areas.

2016 – 2017   Intended and Unintended Effects of Risk Adjustment Payments for Individuals with Chronic Conditions on Diagnosis and Treatment in Medicare Advantage
NIA, 5P30AG024409 (Bloom)
$50,000
Role: Co-Investigator
The goal of this pilot study is to take first steps toward using previously unavailable data to understand how risk adjustment payments to Medicare Advantage (MA) plans for individuals with selected chronic diseases affect the diagnosis and treatment of those diseases in order to understand the implications of the dramatic expansion of the MA program for quality of care among Medicare beneficiaries.

2017 – 2018   The Effect of Medicaid Managed Care on the Health of Aging Individuals with Disabilities
NIH/NBER, P30AG012810 (Cutler/Baicker)
$18,490
Role: Co-Investigator
In this project, we aim to assess the effects of the shift to managed care on long-term healthcare utilization and health outcomes using data from two large states, New York and Texas.

2017 – 2018   The Effects of Medicaid Policy on the Healthcare Utilization and
Health of SSI Beneficiaries
(Autor/Maestas), Social Security Admin via NBER
$69,593
Role: Co-Investigator
This project aims to assess the effects of MMC on the healthcare utilization and health outcomes of disabled Medicaid beneficiaries using sharp county-level variation in MMC enrollment among individuals eligible for SSI in two large states, New York and Texas.

2017 – 2022?   Machine Learning for Health Outcomes and Quality of Care in Low-Income Populations
NIH, 1DP2OD024082-01 (Rose)
Role: Co-Investigator
$300,000. The goal of this proposal is to examine the role of insurance coverage on health outcomes in low-income populations with rigorous new tools in partially randomized data. Work on these topics is critical as health outcomes and quality of care in low-income populations lag behind other groups, and the impact of health insurance on these disparities among low-income individuals is currently unknown. This will be achieved by developing a novel machine learning framework for the generalizability of experimental and quasi-experimental studies, providing population health scientists with robust methodology to assess the effects of health interventions and exposures.

2017 – 2020   The Effect of Medicaid Plans on Access to and Quality of SUD Treatment
(Alegria), NIH/MGH
(Co-Investigator), $134,103
The goal of this proposal is to examine the role of Medicaid Managed Care plans in providing SUD treatment and affecting health outcomes among individuals with SUDs. The project focuses on Massachusetts and New York and exploits random plan assignment to assess differences across public and private Medicaid plans and across different types of Medicaid plans in access to and quality of SUD treatment as well as outcomes.

2018 – 2020   The Effect of Behavioral Interventions on Enrollment and
Adverse Selection in Health Insurance Marketplaces
No Award Number (Layton), MIT JPAL
$206,010
Role: PI
This project will measure the importance of psychological frictions in limiting take-up of free or low-cost insurance by testing the effects of a simplified streamlined enrollment process on the probability that an eligible individual enrolls in coverage. Determine which groups are most affected by the interventions using machine learning. And assess the effects of marketing on the marketplace risk pool**.**

<u>Report of Local Teaching and Training</u>
Teaching of Students in Courses:

2021-	Economics of Health Care:	Harvard School of Public Health
	Public vs. Market Resolutions (HPM-545)	Half-semester MPH Course
2021-	Empirical Methods II (HKS API-202)	Harvard Kennedy School
		Full Semester-long MPP Course
2018-	Health Economics PhD Readings Course	Harvard Graduate School of Arts and Sciences
		1 lecture over 1 semester
2018-2020	Econometric Methods for	Harvard Kennedy School
	Applied Research II (Economics 2115/HKS API-115)	Full Semester-long PhD Course
2017-	Health Policy Core	Harvard Medical School
	Graduate Students	1 Lecture over 1 semester
2017-	Essentials of the Profession	Harvard Medical School
	First-year medical and dental students	12 2-hour sessions
2012	Introduction to Econometrics	Boston University
	Undergraduate Students	4 3-hour lectures/week for 6 weeks
2011	Economic Statistics	Boston University
	Undergraduate Students	4 3-hour lectures/week for 6 weeks

Formally Supervised Trainees and Faculty:

2016-2021   Daniel Prinz, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Institute for Fiscal Studies)

2016-2021   Amanda Kreider, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Postdoc, Penn LDI)

2016-2021   Alice Ndikumana, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Bates White)

2017-2018   Ellen Montz, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Deputy Director, Virginia Medicaid)

2017-2019   Savannah Bergquist, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Postdoc, UC Berkeley)

2017-2020   Adrienne Sabety, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Notre Dame Economics)

2017-2018   Joran Lokerboll, Commonwealth Fund Harkness Fellow, Co-mentor

2018-2020   Monica Farid, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member (Mathematica)

2019-   Eran Politzer, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member

2019-2021   Caroline Geiger Kelley, Health Care Policy PhD Program in Health Policy (Methods for Policy Research Track), Dissertation Committee Member (Genentech)

2019-   Boris Vabson, Seidman Postdoctoral Fellow, Mentor

2019-   Yunan Ji, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member

2020-   Anna Zink, Health Care Policy PhD Program in Health Policy (Methods for Policy Research Track), Dissertation Committee Member

2020-	Sam Burn, Health Care Policy PhD Program in Health Policy (Economics Track), Dissertation Committee Member
2020-	Grace McCormack, Public Policy PhD Program, Dissertation Committee Member

Report of Regional, National and International Invited Teaching and Presentations

Invited Presentations and Courses

No presentations below were sponsored by outside entities.

Local Invited Presentations

2021	Adverse Selection and Redistribution in Social Insurance Programs Department of Health Care Policy, Harvard Medical School
2019	Adverse Selection and Provider Networks in Medicaid Managed Care: Evidence from a Large Urban Health Care Market Healthcare Policy Leadership Council, Harvard Kennedy School, Cambridge, MA
2018	The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid Healthcare Policy Leadership Council, Harvard Kennedy School, Cambridge, MA
2018	The Future of Medicaid Harvard Health Care Policy 30th Anniversary Celebration, Harvard Medical School, Boston, MA
2018	The U.S. Medicaid Program CDRF Delegation Field Research, Harvard Medical School, Boston, MA
2018	Harvard Law School, "Will Value-based Care Save the Health Care System," Cambridge, MA (Moderator)
2018	The tradeoff between extensive and intensive margin selection in competitive insurance markets Department of Health Care Policy, Harvard Medical School, Boston, MA
2016	Medicaid Managed Care Department of Health Care Policy, Harvard Medical School, Boston, MA
2016	Productivity in Health Care: The Role of Payers Harvard Institute for Learning in Retirement, Cambridge, MA
2016	Screening in Contract Design: Evidence form the ACA Health Insurance Exchange Department of Health Care Policy, Harvard Medical School, Boston, MA
2016	Medicaid Managed Care Harvard Medical School
2015	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment BU/Harvard/MIT Health Economics Seminar, Boston, MA
2015	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment Department of Health Care Policy, Harvard Medical School, Boston, MA

National

2021

2021	University of Chicago Health Economics Workshop, "Adverse Selection and Redistribution in Social Insurance Programs"
2021	Yale Public/Labor Economics Workshop, "Adverse Selection and Redistribution in Social Insurance Programs"
2020	American Economic Association Meetings, "The Liquidity Sensitivity of Healthcare Consumption." Online.
2019	American Economic Association Meetings, "Nudging Take-up of Subsidized Insurance: Evidence from Massachusetts." San Diego, CA
2019	APPAM, "Liquidity and Health Care Consumption: Evidence from Social Security Payments," Denver, CO
2019	Annual Health Economics Conference, "Liquidity and Health Care Consumption: Evidence from Social Security Payments," University of California San Francisco
2019	SSA Retirement and Disability Research Center Annual Meeting, "Grading Medicaid: Fiscal Federalism and Social Insurance in the United States," Washington, DC
2019	American Society of Health Economists Annual Meeting, "Nudging Take-up of Subsidized Insurance: Evidence from Massachusetts." Washington, DC
2019	American Society of Health Economists Annual Meeting, "Grading Medicaid: Fiscal Federalism and Social Insurance in the United States." Washington, DC
2019	American Society of Health Economists Annual Meeting, "Liquidity and Healthcare Consumption: Evidence from Social Security Payments." Washington, DC
2019	Georgetown University, "The Two Margin Problem in Insurance Markets," Washington, DC
2019	Brookings Institution, "The Two Margin Problem in Insurance Markets," Washington, DC
2019	NBER Insurance Working Group, "The Two Margin Problem in Insurance Markets," Stanford University, Palo Alto, CA
2018	American Economic Association Meetings, "The Two Margin Problem in Insurance Markets," Atlanta, GA
2018	NBER Health Care Meeting, "The Two Margin Problem in Insurance Markets," Cambridge, MA
2018	APPAM, 'The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Washington DC
2018	RAND, "The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Los Angeles, CA
2018	Annual Health Economics Conference, "The Tradeoff between extensive and intensive margin selection in competitive insurance markets", Texas A&M, College Station, TX
2018	University of Southern California, "The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Los Angeles, CA (scheduled)
2018	University of Minnesota, "The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Minneapolis, MN
2018	JP Morgan Chase Institute Conference on Economic Research, "Are All Managed Care Plans Created Equal? Evidence from Random Plan Assignment in Medicaid," Washington DC
2018	American Society of Health Economists, "The tradeoff between extensive and intensive margin selection in competitive insurance markets," Atlanta, GA
2018	American Society of Health Economists, "The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Atlanta, GA
2018	NBER Spring Aging Meeting, "The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Cambridge, MA

2018	University of California – Berkeley, "Risk Adjustment and Reinsurance in Health Insurance Marketplaces," Berkeley, CA
2018	University of Pennsylvania, "The Consequences of Privatization of Social Insurance for Adults with Disabilities: Evidence from Medicaid," Philadelphia, PA
2018	American Economic Association Annual Meeting, "Screening in Contract Design: Evidence from the ACA Marketplaces," Philadelphia, PA
2017	Urban Institute, "Stabilizing the Individual Health Insurance Market," Washington Dc
2017	AcademyHealth 2017 Annual Research Meeting, "Unpacking the ACA Marketplace Risk Adjustment Formula," New Orleans, LA
2017	AcademyHealth 2017 Annual Research Meeting, "Are All Managed Care Plans Created Equal? Evidence from Random Plan Assignment in Medicaid," New Orleans, LA
2017	Hunter College, "Are All Managed Care Plans Created Equal? Evidence from Random Plan Assignment in Medicaid," New York City, NY
	University of Texas - Austin, "Are All Managed Care Plans Created Equal? Evidence from Random Plan Assignment in Medicaid"
2017	NBER Insurance Working Group, "Screening in Contract Design: Evidence from the ACA Exchanges"
2017	University of Arizona, "Screening in Contract Design: Evidence from the ACA Exchanges"
2017	American Economic Association Annual Meetings, "Are All Managed Care Plans Created Equal? Evidence from Random Plan Assignment in Medicaid," Chicago, IL
2016	American Society of Health Economist Biennial Meeting, "The Effect of the Medicare Advantage Quality Based Payment Demonstration on Quality in Medicare Advantage" Philadelphia, PA
2016	American Society of Health Economist Biennial Meeting, "Are All Managed Care Plans Created Equal?" Philadelphia, PA
2016	NBER Health Care Meeting "Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment," Cambridge, MA
2016	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment RAND Corporation, Santa Monica, CA
2016	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment Yale School of Public Health, New Haven, CT
2016	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment University of Virginia, Batten School for Leadership and Public Policy, Charlottesville, VA
2015	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment Department of Health and Human Services – Office of the Assistant Secretary for Planning and Evaluation, Washington, DC
2015	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment Department of the Treasury – Office of Tax Analysis, Washington, DC
2015	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment Congressional Budget Office, Washington, DC
2015	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment National Tax Association Annual Meeting, Boston, MA
2014	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment Annual Health Economics Conference, Houston, TX
2014	Imperfect Risk Adjustment, Risk Preferences, and Sorting in Competitive Health Insurance Markets

	American Society of Health Economist Biennial Meeting, Los Angeles, CA
2014	The Effect of Medicare Advantage Quality-Based Payment on Quality of Care in Medicare
	American Society of Health Economists Biennial Meeting, Los Angeles, CA
2014	Imperfect Risk Adjustment, Risk Preferences, and Sorting in Competitive Health Insurance Markets
	Kellogg School of Management Conference on Healthcare Markets, Evanston, IL
2013	Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment
	Southeastern Health Economics Study Group, Baltimore, MD

International

2020	International Online Public Finance Seminar, "The Liquidity Sensitivity of Healthcare Consumption: Evidence from Social Security Payments," Online webinar.
	Junior Health Economist Summit, "The Liquidity Sensitivity of Healthcare Consumption:
2020	Evidence from Social Security Payments," Whistler, Canada
	CEPRA/NBER Workshop on Ageing and Health, "The Two Margin Problem in Insurance
2019	Markets," Lugano, Switzerland
	Risk Adjustment Network Annual Meeting "Screening in Contract Design: Evidence from
2017	the ACA Exchanges," The Hague, Netherlands
	European Econometric Society Meeting, "Screening in Contract Design: Evidence from
2017	the ACA Exchanges," Lisbon, Portugal
	Deriving Risk Adjustment Payment Weights to Maximize Efficiency of Health Insurance
2016	Markets
	Risk Adjustment Network Annual Meeting, Berlin, Germany
	Imperfect Risk Adjustment, Risk Preferences, and Sorting in Competitive Health Insurance Markets
2014	
	Risk Adjustment Network Annual Meeting, Delft, Netherlands
2013	The Power of Reinsurance in Health Insurance Exchanges to Improve the Fit of the Payment System and Reduce Incentives for Adverse Selection
	Risk Adjustment Network Annual Meeting, Tel Aviv, Israel

Report of Education of Patients and Service to the Community

Books, monographs, articles and presentations in other media
1. Jena AB, Barnett M, Layton TJ. "The Link between August Birthdays and ADHD." The New York Times, November 28,2018.
2. Geruso M, Jena AB, **Layton TJ**. "Will personalized medicine mean higher costs for consumers?" Harvard Business Review, March 1, 2018
3. **Layton TJ**, Montz E, McGuire T. "The Downstream Consequences of Per Capita Spending Caps in Medicaid." Health Affairs Blog, June 26, 2017.

Report of Scholarship

Peer reviewed publications in print or other media

Research Investigations (* authorship is alphabetical per custom in economics)
1. Zhu J, **Layton TJ**, Sinaiko AD, McGuire TG. The Power of Reinsurance in Health Insurance Exchanges to Improve the Fit of the Payment System and Reduce Incentives for Adverse Selection. Inquiry. 2013; 50(4): 255-274.
2. **Layton TJ**, Ryan A. The Effect of Medicare Advantage Quality-Based Payment on Quality Care in Medicare. Health Services Research. 2015; 50(6): 1810-1828.*
3. **Layton TJ**, McGuire TG, Sinaiko AD. Risk Corridors and Reinsurance in Health Insurance Exchanges: Insurance for Insurers. American Journal of Health Economics. 2016; 2(1): 66-95.*
4. Montz E, **Layton TJ**, Busch AB, Ellis RP, Rose S, McGuire TG. Risk-Adjustment Simulation: Plans May Have Incentives To Distort Mental Health And Substance Use Coverage. Health Affairs. 2016; 6(35): 1022-8.
5. **Layton TJ**, McGuire TG. Marketplace Plan Payment Options for Dealing with High-Cost Enrollees. American Journal of Health Economics. 2016; 3(2): 140-164.*
6. Ericson K, Kingsdale J , **Layton TJ**, Sacarny A. Using 'Nudges' to Enhance Competition and Save Consumers Money on Health Insurance Exchanges/Marketplaces: Evidence from a Field Experiment. Health Affairs. 2017; 2(36): 311-319.*
7. Rose S, Bergquist S, **Layton TL**. Computational health economics for identification of unprofitable health care enrollees. Biostatistics. 2017; 18(4): 682-694.
8. Geruso M, **Layton TJ**. Selection in Insurance Markets and Its Policy Remedies. Journal of Economic Perspectives. 2017; 31(4): 23-50.*
9. **Layton TJ**. Imperfect Risk Adjustment, Risk Preferences, and Sorting in Competitive Health Insurance Markets. Journal of Health Economics. 2017; 56: 259-280.
10. **Layton TJ**, Ellis RP, McGuire TG, and van Kleef R. Assessing Incentives for Adverse Selection in Health Plan Payment Systems. Journal of Health Economics. 2017; 56: 237-255.
11. Sinaiko AD, **Layton TJ**, Rose S, McGuire TG. Family Risk Pooling in Individual Health Insurance Markets. Health Services and Outcomes Research Methodology. 2017; 17(3-4): 219-236.
12. **Layton TJ**, McGuire TG, van Kleef R. Deriving Risk Adjustment Payment Weights to Maximize Efficiency of Health Insurance Markets. Journal of Health Economics. 2018; 61: 93-110.*
13. **Layton TJ**, Barnett M, Hicks T, Jena A. Widespread over-diagnosis of childhood attention deficit hyperactivity disorder in the US due to classroom context? New England Journal of Medicine. 2018; 379(22): 2122-2130.

14. Bergquist S, **Layton TJ**, McGuire T, Rose S. Sample Selection for Medicare Risk Adjustment Due to Systematically Missing Data. Health Services Research. 2018; 53(6): 4204-4223.*
15. Geruso M, **Layton TJ**, Prinz D. Screening in Contract Design: Evidence form the ACA Health Insurance Exchange. American Economic Journal: Economic Policy. 2019; 11(2): 64-107.*
16. Bergquist S, **Layton TJ**, McGuire T, Rose S. Data Transformations to Improve the Performance of Health Plan Payment Models. Journal of Health Economics. 2019; 66: 195-207.*
17. McGarry B, **Layton TJ**, Grabowski D. The Effects of Plan Payment Rates on the Market for Medicare Advantage Dual-Eligible Special Needs Plans. Health Services Research. 2019; 54(5):1137-1145.
18. Geruso M, **Layton TJ**. Upcoding or Selection? Evidence from Medicare on Squishy Risk Adjustment. Journal of Political Economy. 2020; 128(3).*
19. Geruso M, **Layton TJ**, McCormack G, Shepard M. The Two Margin Problem in Insurance Markets. Forthcoming at *the Review of Economics and Statistics.*

Manuscripts Submitted to Peer Reviewed Journals
20. Gross T, **Layton TJ**, Prinz D. The Liquidity Sensitivity of Healthcare Consumption: Evidence from Social Security Payments. *Conditionally accepted at American Economic Review: Insights.**
21. **Layton TJ**, Maestas N, Prinz D, Vabson B. Public vs. Private Provision of Social Health Insurance: Evidence from Medicaid. *Revisions requested at American Economic Journal: Economic Policy.**
22. Brot-Goldberg Z, **Layton TJ**, Vabson B, Wang Y. Defaults and the Microfoundations of Inertia: Evidence from Medicare Part D. *

Working Papers
23. Geruso M, **Layton TJ**, Wallace J. Are All Managed Care Plans Created Equal? Evidence from Random Plan Assignment in New York Medicaid Managed Care. NBER Working Paper.*

Book Chapters
1. Ellis RP, **Layton TJ**. Risk Adjustment and Risk Selection. Encyclopedia of Health Economics 2014. Elsevier Press.
2. **Layton TJ**, Montz E, Shepard M. "Health Plan Payment in U.S. Marketplaces: Regulated Competition with a Weak Mandate." <u>Risk Adjustment, Risk Sharing, and Premium Regulation in Health Insurance Markets: Theory and Practice.</u> Ed. Thomas G. McGuire and Richard van Kleef. Elsevier Press.
3. **Layton TJ**, Ndikumana A, Shepard M. "Health Plan Payment in Medicaid Managed Care: A Hybrid Model of Regulated Competition." <u>Risk Adjustment, Risk Sharing, and Premium Regulation in Health Insurance Markets: Theory and Practice.</u> Ed. Thomas G. McGuire and Richard van Kleef. Elsevier Press.

Thesis

1. **Layton TJ**. Risk Selection and Risk Adjustment in Competitive Health Insurance Markets. Boston University. Department of Economics. 2014.

Narrative Report

Prior to my current position, I was a National Institute of Mental Health Postdoctoral Research Fellow in the Department of Health Care Policy at Harvard. I completed my PhD in economics at Boston University in 2014. I am currently a Faculty Research Fellow at the National Bureau of Economic Research.

My research focuses on the behavior of consumers and insurers in private regulated health insurance markets such as the Medicare Advantage program, the state and federal Health Insurance Marketplaces created by the Affordable Care Act, and state Medicaid Managed Care markets. Enrollment of individuals in private regulated health insurance markets has increased dramatically over the last decade and continues to follow a positive trend, making it critical that we understand the incentives faced by insurers and consumers in these markets and how these actors respond to those incentives.

In one line of research, I study adverse selection in health insurance markets and how regulations such as risk adjustment and reinsurance can be used to combat selection problems. One important contribution of my research is to estimate the extent to which Medicare Advantage insurers engage in "upcoding," or the practice of making enrollees appear sicker in order to increase their revenues, finding that this type of behavior costs the government over $10 billion each year if uncorrected. In other work related to risk adjustment, I've found that risk adjustment is highly effective at ameliorating adverse selection problems, resulting in potential welfare gains of over $700 per person per year. I've also studied health insurance plan payment systems conceptually, developing new methods for (1) evaluating the performance of different payment system alternatives and (2) finding optimal payment systems that minimize selection-related inefficiencies. Finally, my recent work in this area has established a new framework for considering the effects of policies aimed at combatting selection, incorporating the effects of policies on the extensive (insurance vs. uninsurance) and intensive (high vs. low quality coverage) margins of insurance, two margins that are typically studied in isolation.

Much of my current work focuses on insurer behavior in Medicaid Managed Care markets, with a focus on insurer productivity in general, and the role of provider networks in particular. In this research, we exploit the random assignment of Medicaid beneficiaries to managed care plans to find large productivity differences with the lowest productivity plan spending over 20% more than the highest productivity plan to provide the same Medicaid benefits. We also study the effects of the roll out of managed care to adults with disabilities, finding increases in spending but also in quality of care.

My final line of research focuses on consumer behavior in state Health Insurance Marketplaces. This work has consisted of randomized trials testing the effects of letter-based interventions on consumer plan choice and on take-up of subsidized insurance in Colorado and Massachusetts. This work tries to understand the barriers to take-up and good decision-making in these markets.