

# Teaching Statement

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## 1 Relevant experience

I taught undergraduate Health Economics for Spring 2021 and Spring 2022 at Boston University. I designed the course entirely from scratch, and focused on the industrial organization of healthcare markets. About a third of the syllabus was based on the textbook by Bhattacharya, Hyde and Tu; the rest was based on journal articles and policy papers to introduce students to research in IO and health economics. The course also emphasized important IO concepts like vertical integration and contracting, employer-insurer-provider bargaining, and antitrust issues regarding healthcare providers. An additional emphasis was placed on learning about healthcare systems outside US to better understand different policy trade-offs.

I was also the TA for PhD Applied Econometrics for four semesters (Fall 2019-2022). My work involved holding discussion sections every week and grading. In my discussions I reviewed the week's materials, summarized key literature review papers, and went over extensions. The first half of the course focused on reduced-form methods. The second half of the course has varied from year to year, and has switched between structural methods, nonparametric estimation, machine learning, and macroeconometrics.<sup>1</sup>

## 2 Teaching philosophy

Two key components of my teaching philosophy are:

1. **Combining theory with policy details:** My main motivation for structuring a course is - the course should teach students to use theoretical models to understand

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<sup>1</sup>My website contains my teaching materials and course evaluations:

<https://sites.google.com/view/rubaiyat-alam/teaching/health-economics>

<https://sites.google.com/view/rubaiyat-alam/teaching/applied-econometrics-phd>

the key economic trade-offs, and then combine this with empirics and institutional details to understand the world. The first part of my course is giving students the theoretical toolkits they will need, and the second half is all about using these tools to understand how healthcare markets work in reality. Some examples are:

- Study moral hazard, then use this concept to think about how ACA marketplaces work.
- Go over trade-offs between single payer vs private insurer setting, then explore healthcare systems around the world to understand how these are mitigated with different regulations.
- Review a simple theoretical framework of R&D, then understand price control measures for pharmaceuticals.

2. **Emphasis on structure and participation:** An important part of my teaching experience was figuring out how to maintain clarity without sacrificing intensity and coverage.

An important way to promote clarity of concept and thought is to structure the course properly. This includes everything from the logical progression over a semester to how concepts are introduced over the course of a single lecture. Throughout teaching, I constantly emphasize the big picture ideas and why we care about the particular topic we are covering. My belief is that a person's long-run retention of a concept is almost entirely the overarching intuition, and so repeatedly pointing back to the intuition and big picture ideas helps a student recall the topic for the rest of her life.

Another critical component to improving clarity is class participation. My belief is that retention and understanding are vastly improved if students are asked to think critically and publicly during the class. I accomplish this by asking questions and getting a variety of students to speak up. This can be done by inviting students to figure out a difficult step of a derivation process, find flaws in a hypothetical story, argue pros and cons of various systems, and so on. I also reserve 2-4 classes as a "policy discussion" class. These classes work as follows. I give students several policy papers on a topic, say rising concentration and vertical integration in US healthcare system. I also give them a list of questions, some of which are open-ended, which can be answered by reading the policy papers. After going through these papers and questions by themselves for a week, the students arrive in class and I pick random students to answer each question on the list. I use their answers both to figure out the correct answer to these questions, as well as use them as a starting point for tangential

discussions on relevant topics. For instance, in the policy discussion class regarding concentration of healthcare providers, I used a student's answer to shed some light on how the DOJ and FTC go through the process of challenging a merger.

### **3 Going forward**

I am excited to teach a variety of courses at the undergraduate and graduate level. At all levels, I am eager to teach industrial organization. An undergraduate IO course by me could focus on antitrust cases, vertical contracting/integration, two-sided markets, and regulation. I am also quite capable of teaching undergraduate health economics due to my experience teaching two semesters as a graduate student. Finally, I am happy to teach Statistics and Econometrics at the undergraduate and Masters level.