## SAMANTHA L. BURN

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**Appointments** 

**Harvard Medical School** 

Postdoctoral Fellow, Department of Health Care Policy, 2022-present

**Education** 

**Harvard University** 

Ph.D. Health Policy, Economics Track, 2022

Dissertation: "Essays on Resource Allocation in Public Health Care"

Oxford University, UK

MPhil. Economics, distinction, 2010

BA Philosophy, Politics and Economics, first class honors, 2008

**Fields** 

Primary: Health economics

Secondary: Public economics, Industrial organization

Teaching fields: Health Economics; Health Policy; Microeconomics; Public economics

References

Professor Timothy Layton Professor David Cutler
Department of Health Care Policy Department of Economics
Harvard Medical School Harvard University
layton@hcp.med.harvard.edu dcutler@harvard.edu

Professor Mark Shepard Professor Carol Propper

Harvard Kennedy School Department of Economics and Public Policy

mark shepard@hks.harvard.edu Imperial College Business School

c.propper@imperial.ac.uk

Fellowships & Awards

Harvard University, Merit/Term-Time Research Fellowship, 2019-2020

Kennedy Memorial Trust, Research Scholarship, 2018-2019 Harvard University, Summer Predissertation Fellowship, 2016 Economic and Social Research Council, UK, 2008-2012

Nuffield College Scholarship, 2008-2010 New College Scholarship, 2005-2008

**Teaching** 

Harvard Kennedy School, Microeconomics (Ph.D.-Level Course), Teaching Fellow for Professor

Christopher Avery, 2018-2019

Harvard Kennedy School, "The Economics of Health Care Policy" (Master's-level course for MPP, MPA, MBA and MPH students), Teaching Fellow for Professor Joseph Newhouse, 2018

Research

Imperial College Business School, Visiting Research Fellow, 2018-present

Institute for Fiscal Studies, London, UK, Research 2016-2017

Harvard Chan School of Public Health, Research Assistant to Professor Jessica Cohen and

Professor Margaret McConnell, 2016-2017

University of Birmingham, UK, Research Fellow, 2012-2014

University of Oxford, UK, Research Assistant to Professor Ian Goldin, 2008-2010

Other Employment World Bank, Washington D.C., US, Short-term consultant, 2013-2016 Bates White LLC, Washington D.C., US, Consultant, 2014-2015

National Bureau of Statistics, Republic of South Sudan, Economist, 2010-2012 Department for Work and Pensions, London, UK, Assistant Economist, 2009-2010

## Job Market Paper

# "Mixed Public-Private Provision in Healthcare: Evidence from the English National Health Service"

Public health systems are often under strain, with patients facing crowding and long waits in public hospitals. To increase competition and ease supply constraints in public health care systems, governments often contract with private providers alongside public incumbents. This paper studies a policy reform in England that enabled patients to receive treatment at private hospitals using government funds. Using variation in exposure to this reform generated by pre-reform locations of private hospitals and market-level difference-in-differences, I find that this reform increased annual volume of admissions and reduced market-level waits. Around a third of the volume increase was due to substitution from the private sector. I use variation generated by the reform to estimate a model of patient demand and equilibrium waits and use this to evaluate the welfare gains from the policy. More than half of the welfare gains accrued to patients treated at public hospitals because of reduced congestion, but the reform was regressive, largely benefiting patients in high-income areas with existing private capacity.

#### **Working Papers**

"Rationing Medicine Through Bureaucracy: Authorization Restrictions in Medicare" (NBER WP #30878, Revisions requested at American Economic Review)

High administrative costs in US health care have provoked concern among policymakers over potential waste, but many of these costs are generated by managed care policies that trade off bureaucratic costs against reductions in moral hazard. We study this trade-off for prior authorization restriction policies in Medicare Part D, where low-income beneficiaries are randomly assigned to default plans. Beneficiaries who face restrictions on a drug reduce their use of it by 26.8%. Approximately half of marginal beneficiaries are diverted to another related drug, while the other half are diverted to no drug. These policies generated net financial savings, reducing drug spending by \$96 per beneficiary-year (3.6% of drug spending), while only generating approximately \$10 in paperwork costs. Revealed preference approaches suggest that the cost savings likely exceed beneficiaries' willingness to pay for foregone drugs.

#### "Universal Coverage with Financial Constraints: How Public Health Systems Ration Care"

I study how government budget constraints in publicly funded health systems restrict access to health care. Using data from England, I show that cuts to government funding negatively impact access to hospital care for fully insured individuals. I exploit a 'pace-of-change' policy used to determine financial allocations for administrative regions. This policy translates aggregate funding shocks into regional funding allocations using a non-linear formula that generates variation in funding that is plausibly exogenous to demand for health care. Government funding cuts reduce elective hospital admissions and increase hospital wait times. These effects are most pronounced for orthopedic patients. Using survey data on patient-reported benefits from orthopedic surgery, I show that the patients who are rationed out by funding cuts have lower propensity to benefit from treatment and higher income.

#### **Publications**

Max Warner, **Samantha Burn**, George Stoye, Alex Bottle, Paul Aylin and Carol Propper. 2022. "Socio-Economic Deprivation and Ethnicity Inequalities in Disruption to NHS Hospital Admissions during the COVID-19 Pandemic: A National Observational Study", *BMJ Quality & Safety* 31: 590-598

**Samantha Burn**, Peter Chilton, Atul Gawande, and Richard Lilford. 2014. "Peri-operative pulse oximetry in low-income countries: a cost–effectiveness analysis", *WHO Bulletin* 92(12): 858–867

Richard J Lilford, Alan J Girling, Aziz Sheikh, Jamie J Coleman, Peter J Chilton, **Samantha Burn**, David J Jenkinson, Laurence Blake, Karla Hemming. 2014. "Protocol for evaluation of the cost-

effectiveness of ePrescribing systems and candidate prototype for other related health information technologies", BMC Health Services Research 14(1): 1-12

Michael Caley, Samantha Burn, Tom Marshall, Andrew Rouse, 2014. "Increasing the OOF upper payment threshold in general practices in England: impact of implementing government proposals", British Journal of General Practice 64 (618): e54-e59

#### **Papers in Progress**

"Patients: The efficiency and equity consequences of waiting for health care in the English National Health Service."

"Informative Ordeals in Healthcare: Prior Authorization of Drugs in Medicaid" (with Ljubica Ristovska)

"Double Agents? The dual role of primary care doctors as agents for their patients and stewards of health system resources"

"The Effect of in-utero exposure to community water fluoridation on birth outcomes", with Hannes Schwandt and Matthew Neidell

## **Seminars &** Conferences

2023: Harvard/MIT/BU Health Economics Seminar, Congressional Budget Office, American Society of Health Economists conference, National Tax Association (scheduled)

2022: American Society of Health Economists conference, Healthcare Markets and Regulation Industry Working Group Summit, Harvard Medical School, CMS

2020: UBC Health Policy conference, American Society of Health Economists conference (virtual)

2015: International Health Economics Association

#### **Academic Service**

Representative, Student Health Planning Committee, 2017-2020

Instructor, Harvard Chan School of Public Health Youth and Public Health Conference, 2016-2017

Referee: JAMA Internal Medicine, Journal of Economic Behavior & Organization, Journal of Health Economics, Health Economics, Health Policy & Planning

#### **Research Grants**

Economic and Social Research Council, UK (co-I, PI Carol Propper), £127,526. 2020.

# Languages

English (native); French, Spanish (intermediate)

## Software skills

Stata; Python; R; MATLAB

#### Personal information

British citizen