MOLIN LI

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EDUCATION

Ph.D. Candidate, Economics, University of Texas at Austin, May 2022 (Expected) M.S., Economics, University of Texas at Austin, 2019 M.Phil., Economics and Finance, CEMFI, 2017 B.S., Economics, University of Minnesota, 2014

REFERENCES

Mike Geruso (Co-chair)

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Stephen Trejo (Co-chair)

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TEACHING AND RESEARCH FIELDS

Fields: Labor Economics, Health Economics, Public Economics

HONORS, SCHOLARSHIPS, AND FELLOWSHIPS

2021 Graduate Summer Fellowship, University of Texas at Austin 2015 – 2017 Fellowship for Graduate Studies, CEMFI

RESEARCH EXPERIENCE AND OTHER EMPLOYMENT

Summer, 2016 Research Assistant for Professor Pedro Mira, CEMFI

TEACHING EXPERIENCE

Teaching Assistant,	University of Texas at Austin
2021	Health Economics, for Dr. Helen Schneider
2021	Microeconomic Theory, for Professors Maxwell Stinchcombe
2020	Introduction to Microeconomics, for Dr. John Thompson
2020	Macroeconomic Theory, for Dr. Brian Trinque
2020	Introduction to Microeconomics, Dr. Wayne Hickenbottom
2019	Health Economics, for Professor Mike Geruso
2019	Probability and Statistics (M.A. level), for Professor James Scott
2019	Introduction to Microeconomics, for Dr. Dima Shamoun
2018	Health Economics, for Dr. Helen Schneider
2017 - 2018	Economic Statistics, for Dr. Valerie Bencivenga

WORKING PAPERS

"The Impact of Fertility Restrictions on Parental Labor Supply in Middle and Late Adulthood" (Job Market Paper)

This paper provides new evidence on the long-term consequences of policy-driven fertility restrictions on labor supply. I focus on the implementation of the "Later, Longer, Fewer" campaign (LLF), which rolled out across provinces between 1970 and 1975 in China. For fertility outcomes, I find that exposure to fertility restrictions postpones marriage and reduces lifetime fertility. For long-term labor supply consequences, I find that full exposure to this stringent madatory quantity-control population policy increases the probability of working by 14.4% in parents' middle and late adulthood. Investigating mechanisms, I show that the increase in LLF-induced elderly labor income is close to the LLF-induced reduction in other income sources of old-age support. This suggests that exposure to LLF during reproductive ages leads to a greater pressure to finance consumption in old age, and this negative effect on old-age support provides an explanation for the increase in the elderly labor supply.

"Job displacement and Health of Individuals and Families in Europe"

I investigate whether job displacement has a causal effect on the health of displaced individuals and their family members. I focus on people who were displaced involuntarily due to business closure. Using the Survey of Health, Aging and Retirement in Europe, I show that job loss has a negative causal effect on measures of physical and mental health. This effect is most negative in Southern European countries, but such a negative impact does not exist in Northern Europe. I find no spillover effect on the health of the displaced worker's spouse and parents.

"The Effect of China's New Rural Pension Scheme on Informal Care Provision"

This paper provides new evidence on the effects of the social pension expansion on informal caregiving. Using a regression discontinuity design based on the introduction and expansion of China's New Rural Pension Scheme (NRPS), I find that the probability of being an informal care giver increases at the non-contributory pension eligible age cutoff, while there is no significant effect on the demand of informal care. I also observe rural women significantly drops off from the labor market at the NRPS cutoff, which suggests that time reallocation might explain the jump in informal care provision.

RESEARCH IN PROGRESS

"Response to Medicare Copayments for Skilled Nursing Facilities: Moral Hazard vs. Liquidity Effects and Offset Effects"

Medicare has a non-linear cost-sharing design for skilled nursing facilities (SNFs) where Medicare pays in full for the first 20 days of a SNF benefit period, but on days 20 to 100, most patients are responsible for a daily copayment of over \$150. I try to investigate patients' responses when the daily copayment kicks in. I expect to observe that patients will discharge from the SNFs dispassionately around day 20. However, the welfare effect of this copayment policy is ambiguous. To have a better understanding of the trade-off between a reduction in moral hazard and a strong negative impact on liquidity-constrained patients, I plan to estimate a simple dynamic discrete choice model of patients' discharge decisions. I will also try to evaluate this copayment design by learning about whether there exists an offset effect in terms of increasing the chance of readmission to hospitals and emergency rooms within 30 days after discharging from SNFs for patients whose discharge decision is distorted by this copayment design.

OTHER

Programming Skills: Stata, Julia, Latex Language: English (fluent), Chinese (Native)