

HUI DING

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EDUCATION

Ph.D. in Economics, Stanford University,
Expected Completion: June 2022

B.A. in Economics, Peking University (China), 2012-2016

B.S. in Psychology (double major), Peking University (China), 2013-2016

DISSERTATION COMMITTEE

Prof. Mark Duggan (Primary)
Economics Department, Stanford University
(650) 723-3982
mgduggan@stanford.edu

Prof. Maya Rossin-Slater
Department of Health Policy, Stanford University
(650) 723-7264
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Prof. Heidi Williams
Economics Department, Stanford University
(650) 723-9303
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RESEARCH AND TEACHING FIELDS

Primary field: Health Economics, Public Economics

Secondary field: Labor Economics

RESEARCH PAPERS

[*Geographic Variation in Mental Health Care: Evidence from Migration*](#) (Job Market Paper)

Mental illnesses, including depression and anxiety, are widespread among older adults in the U.S. Although treatments are known to be effective for many mental health conditions, care utilization rates vary substantially across geographic areas. Using administrative data from Medicare, this paper isolates the patient- and place-specific drivers of the geographic variation in mental health care use among older adults. Specifically, I use an event-study framework with individual fixed effects to study changes in mental health care utilization for patients who move across areas with differing rates of average utilization. My results show that 60 percent of the geographic variation

is attributed to place-specific factors. I then explore components of the “place effect”, finding that mental health care provider capacity explains only one fifth of it. Beyond that, local attitudes toward mental health play an important role, as shown by asymmetric responses for people who move from low-to-high and high-to-low care utilization areas, especially among those who were never diagnosed with any mental illness before moving. Lastly, I find a strong negative correlation between area-level mental health care utilization and suicide rates, and suggestive evidence that moving to high utilization areas is associated with a lower risk of self-harm-related Emergency Department visits. These findings suggest that promoting mental health care could benefit the older population, and that there is substantial scope for achieving this goal with interventions targeting place-specific factors.

[*Getting the Price Right? The Impact of Competitive Bidding in the Medicare Program*](#) (with Mark Duggan, and Amanda Starc) *Revise and Resubmit, the Review of Economics and Statistics*

We study Medicare's competitive bidding program (CBP) for durable medical equipment (DME). We exploit Medicare claims data to examine both prices and utilization, focusing on continuous positive airway pressure (CPAP) devices to treat sleep apnea. We find that spending falls by 47.2% percent after a highly imperfect bidding mechanism is introduced. The effect is almost entirely driven by a 44.8% price reduction, though quantities also fall by 4.3%. To disentangle supply and demand, we leverage differential cost sharing across Medicare recipients. We measure a demand elasticity of -0.272 and find that quantity reductions are concentrated among less clinically appropriate groups.

[*Germs in the Family: The Long-Term Consequences of Intra-Household Endemic Respiratory Disease Spread*](#) (with N. Meltem Daysal, Maya Rossin-Slater, and Hannes Schwandt)

While the COVID-19 pandemic has laid bare the large costs of infectious diseases, less attention has been paid to the impacts of more common, endemic respiratory viruses that frequently circulate in the population, especially when it comes to their potential long-term consequences for population health, human capital, and economic outcomes. This paper uses Danish population-level administrative data on 35 birth cohorts of children to provide a comprehensive analysis of both the mechanisms through which infants become infected by respiratory illnesses, as well as the consequences of early-life respiratory disease exposure for their later outcomes. First, we document a striking difference in the likelihood of severe respiratory illness by birth order: younger siblings have two to three times higher rates of hospitalization for respiratory conditions before age one than older siblings at the same age. We argue that the family unit is central in virus transmission, with older children “bringing home” the virus to their younger siblings. We then combine the birth order variation with within-municipality variation in respiratory disease prevalence among preschool-aged children to identify differential long-term impacts of early-life respiratory illness between younger and older siblings. We find that moving from the 25th to the 75th percentile in the local disease prevalence distribution (“disease index”) is associated with a 30.9 percent differential increase in the number of respiratory illness hospitalizations in the first year of life for younger compared to older siblings. In the long term, for younger relative to older siblings, we find a 0.5 percent differential reduction in the likelihood of high school graduation, and a 1.3 percent additional reduction in age-30 earnings.

RESEARCH IN PROGRESS

Gender Difference in Mental Health Diagnosis and Services

Among older adults above age 65, men are less likely to be diagnosed with mental health problems but have 5-15 times higher suicide rate than women. Such potential under-diagnosis and under-treatment could be caused by low awareness and high stigma towards mental health problems among men. Using 20% Medicare claims data, I investigate gender differences in mental illness diagnosis rate, place of first diagnosis, follow-up treatment after being diagnosed in inpatient/ER settings. Preliminary results show that, conditional on getting diagnosed, males are less likely to be diagnosed from PCPs but more from inpatient care. They are also less likely to get follow-up treatment 2-11 months after being diagnosed in inpatient/ER settings. Instrumented by the gender ratio of local PCPs, male PCPs further decrease male patients' mental health diagnosis rate.

PUBLICATIONS

Hui Ding, Yiwei Chen, Min Yu, Jieming Zhong, Ruying Hu, Xiangyu Chen, Chunmei Wang, Kaixu Xie, and Karen Eggleston. (2021) "[The Effects of Chronic Disease Management in Primary Health Care: Evidence from Rural China.](#)" *Journal of Health Economics*, 102539.

Linlin Hu, **Hui Ding**, Shiyang Liu, Zijuan Wang, Guangyu Hu, and Yuanli Liu. (2020). "[Influence of Patient and Hospital Characteristics on Inpatient Satisfaction in China's Tertiary Hospitals: A Cross-sectional Study.](#)" *Health Expectations*, 23(1), 115-124.

Linlin Hu, **Hui Ding**, Guangyu Hu, Zijuan Wang, Shiyang Liu, and Yuanli Liu. (2019). "[How Perceived Quality of Care Affects Outpatient Satisfaction in China: A Cross-Sectional Study of 136 Tertiary Hospitals.](#)" *Inquiry: A Journal of Medical Care Organization, Provision and Financing*, 56: 1-8.

TEACHING EXPERIENCE

2020 - 2021 Teaching Assistant for Prof. John Taylor, Stanford University, Econ 1
 2019 - 2020 Teaching Assistant for Prof. John Taylor, Stanford University, Econ 1
 Teaching Assistant for Prof. Mark Duggan, Stanford University, Econ 1
 2018 - 2019 Teaching Assistant for Prof. Mark Duggan, Stanford University, Econ 1

RELEVANT POSITIONS

2017 - 2021 Research Assistant for Prof. Mark Duggan, Stanford University
 2019 Research Assistant for Prof. Maya Rossin-Slater, Stanford University
 2014 - 2016 Research Assistant for Prof. Wanchuan Lin, Peking University

SCHOLARSHIPS, HONORS AND AWARDS

2021 - 2022 Leonard W. Ely and Shirley R. Ely Graduate Student Fellowship
 2019 - 2020 Patricia Liu McKenna and Kenneth McKenna Graduate Fellowship
 2016 - 2017 Stanford University Graduate Fellowship

CONFERENCE PRESENTATIONS

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| 2021 | All-California Labor Economics Conference, graduate student poster session
European Economic Association meeting
Conference of the American Society of Health Economist (ASHEcon) |
| 2018 | Conference of the American Society of Health Economist (ASHEcon), poster session (Atlanta, GA) |

OTHERS

Languages: Chinese (native), English (fluent)

Programming: Stata, SAS, SQL, R, LaTeX