

## ADRIANA CORREDOR-WALDRON

Center for Health and Wellbeing, Julis Romo Rabinowitz Building, Princeton University  
+1 (217) 751-2804   [adrianaw@princeton.edu](mailto:adrianaw@princeton.edu) ✉   [adriana-corredorwaldron.github.io](https://github.com/adriana-corredorwaldron) ↗

Placement Director: Gianluca Violante  
Coordinator: Laura Hedden

violante@princeton.edu ☒ +1(609)258-4003  
lhedden@princeton.edu ☒ +1(609)258-4006

## ACADEMIC APPOINTMENTS

Postdoctoral Research Associate, Princeton University

2019-Present

## EDUCATION

Ph.D., Economics, University of Illinois at Urbana-Champaign (UIUC)

2013 - 2019

M.Phil., Economics, Universidad de los Andes

2008 - 2010

B.A., Economics, Universidad de los Andes

2004 - 2008

## REFERENCES

Janet Currie  
Department of Economics  
Princeton University  
+1(609)258-7393  
jcurrie@princeton.edu ✉

Nolan Miller  
Department of Finance  
University of Illinois - UIUC  
+1(217)244-2847  
nmiller@illinois.edu 

Mark Borgschulte  
Department of Economics  
University of Illinois - UIUC  
+1 (217) 300-2088  
markborg@illinois.edu ☒

## RESEARCH FIELDS & RESEARCH INTERESTS

Primary fields: Applied Microeconomics and Health Economics.

Interests: Health Policy, Access to Health Care and Mental Health Services.

## RESEARCH AND PUBLICATIONS

## Research Papers

**“A Path Out: Prescription Drug Abuse, Treatment, and Suicide,”** *Journal of Economic Behavior and Organization*, 149, May 2018, 169-184 (with Mark Borgschulte and Guillermo Marshall)

In this paper we investigate the dual role of supply restrictions and drug treatment in combating the concurrent rise of opioid abuse and suicide in the United States over the last two decades. We find that supply-side interventions decrease suicides in places with strong addiction-help networks, implying that prescription drug abuse is associated with an inherent risk of suicide. Our findings support an important role for access to treatment services in policies designed to combat the opioid epidemic.

**Spillover Effects of Medicare Policy on Medicaid: Evidence From the Nursing Home Industry**  
(*Job market paper*).

Despite rapid growth in the U.S. elderly population, the utilization of nursing facilities in the country has decreased substantially since the 2000s. Previous literature has attributed the decline to the surge in alternative services such as in-home care. This paper explores a different explanation for this phenomenon. Using administrative data and a quasi-random variation in Medicare reimbursement policy,

I find that a one percent increase in Medicare fees reduces Medicaid admissions to nursing facilities operating near capacity by two percent. I do not find evidence of increased access for new Medicare residents, but I estimate a one percent increase in Medicare readmissions. Because a significant fraction of long-term residents are enrolled in both Medicaid and Medicare, there is an incentive for facilities to strategically adjust their readmissions to induce a Medicare payment. These findings show how changes in Medicare policy have fueled the shift in focusing on long-term care covered by Medicaid to short-term care covered by Medicare. It also illustrates how the existence of separate payment systems for Medicare and Medicaid have unintended negative consequences by reducing Medicaid beneficiaries' access to long-term care.

**Tackling the Substance Abuse Crisis: The Role of Access to Treatment Facilities** (with Janet Currie). NBER Working Paper No. 28862. Revised and Resubmit *Journal of Health Economics*

The continuing drug overdose crisis in the U.S. has highlighted the urgent need for greater access to treatment. This paper examines the impact of openings and closings of substance abuse treatment facilities in New Jersey on emergency room visits for substance abuse issues among nearby residents. We find that drug-related ER visits increase by 11.1% after a facility closure and decrease by 7.5% after an opening. The effects are largest in relatively under-served areas, among Medicaid enrollees, and among males. They are smaller for the middle aged than for either younger or older people. The results suggest that expanding access to treatment results in significant reductions in morbidity related to drug abuse.

### **Research in Progress**

**Unscheduled C-sections and Mother's Subsequent ER Visits for Substance Abuse** (with Janet Currie and Molly Schnell).

Many new mothers receive powerful opioid medications following a C-section, which places them at risk for developing opioid use disorder. This paper uses unique data covering all births in New Jersey from 2008 to 2017 and exploits variation in doctors underlying propensities to perform unscheduled C-sections. We show that the marginal Black woman who receives a C-section because she sees a high C-section provider is more likely to return to hospital with an opioid use disorder in the next two years. However, we do not find any significant effect for other racial and ethnic groups.

**Data Quality and Trends in Child Mental Health** (with Janet Currie).

We frequently hear that child mental health is deteriorating in the United States. However, some of the apparent increase in illness may be due to the way mental illness is defined and measured as well as changes in the incentives insurers have to code multiple diagnoses. This paper examines trends in diagnoses in several common childhood mental health conditions with a view towards uncovering how much of the increase is real and how much is due to measurement.

**What Does Medicaid Do for the Elderly?** (with Norma Coe).

This research paper investigates how medical spending changes with Medicaid coverage. Medicaid coverage can increase financial security among its enrollees, but it can also create incentives to seek higher health care utilization (moral hazard). This paper aims to disentangle the impact of Medicaid coverage using variation in nursing home access.

### **Pre-Doctoral Publications**

**"Macprudential Capital Requirements and Systemic Risk: Evidence from Colombia"**, Banco de la Republica Working Paper No.74, September 2012 (with Wilmar Cabrera and Carlos Quicazan) (in Spanish)

**"Fragility Determinants of the Private Corporate Sector in Colombia,"** Banco de la Republica Working Paper No.66, March 2012 (with Juan Lemus and Javier Gutierrez- Rueda)

## TEACHING AND RESEARCH EXPERIENCE

<b>Teaching Assistant</b>	2014 - 2017
<i>Department of Economics, University of Illinois</i>	
Principles of Macroeconomics	2017
Principles of Microeconomics	2016
Statistics I	2014 - 2015
<b>Research Assistant</b>	2015 - 2019
<i>Institute of Government and Public Affairs, University of Illinois</i>	
Professor Elizabeth Powers	2017 - 2019
<i>Department of Economics, University of Illinois</i>	
Professor EunYi Chung	2015 - 2017

## PROFESSIONAL EXPERIENCE

<b>Banco de la Republica (Central Bank of Colombia)</b>	2009 - 2013
Specialist Analyst, Financial Stability Department	2012 - 2013
Analyst, Financial Stability Department	2009 - 2011

## AWARDS AND HONORS

Research Fellowship, University of Illinois	Summer 2016
Research Fellowship, University of Illinois	Summer 2015
Department of Economics Fellowship, University of Illinois	Fall 2013-Spring 2014

## CONFERENCES AND INVITED SEMINARS

2021: Southern Economic Association, NBER Summer Institute Aging Session, Barnard College Department of Economics Seminar.  
2020: EALE SOLE AASLE (World Conference).  
2019: American Society of Health Economists (8th Annual Meeting), Southern Economic Association (88th Annual Meeting).  
2018: Association for Public Policy Analysis and Management (40th Annual Fall Research Conference), International Atlantic Economic Society (86th International Conference), Association for Public Policy Analysis and Management Student Conference.  
2012: LACEA and LAMES (17th Annual Meeting), CEMLA, II Meeting on Financial Stability.

## LANGUAGES AND SKILLS

<b>Languages:</b>	English (fluent), Spanish (native).
<b>Software proficiency:</b>	ArcGIS, L <sup>A</sup> T <sub>E</sub> X, MS Office, R, STATA.