### Module 0: Introduction

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### Introductions

### Mad libs ice breaker

#### We need some ideas:

- name
- area of study
- book
- food
- fear
- liquid
- gift
- area of study

#### Mad libs

(name) was excited to start school! Today, they were going to learn about (area of study). They stayed up all night reading (book) and eating (food). Now they are tired. They fall asleep in class, and dream about (fear). They are awoken when the professor throws (liquid) at their desk. Feeling bad for sleeping, they give the professor a (gift), apologize, and are careful to never sleep in class again. Now everyone is happy to learn more about (area of study).

## Motivation

### Health and Healthcare

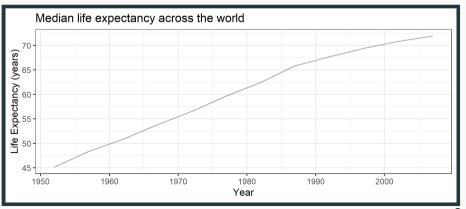


### Health and Healthcare

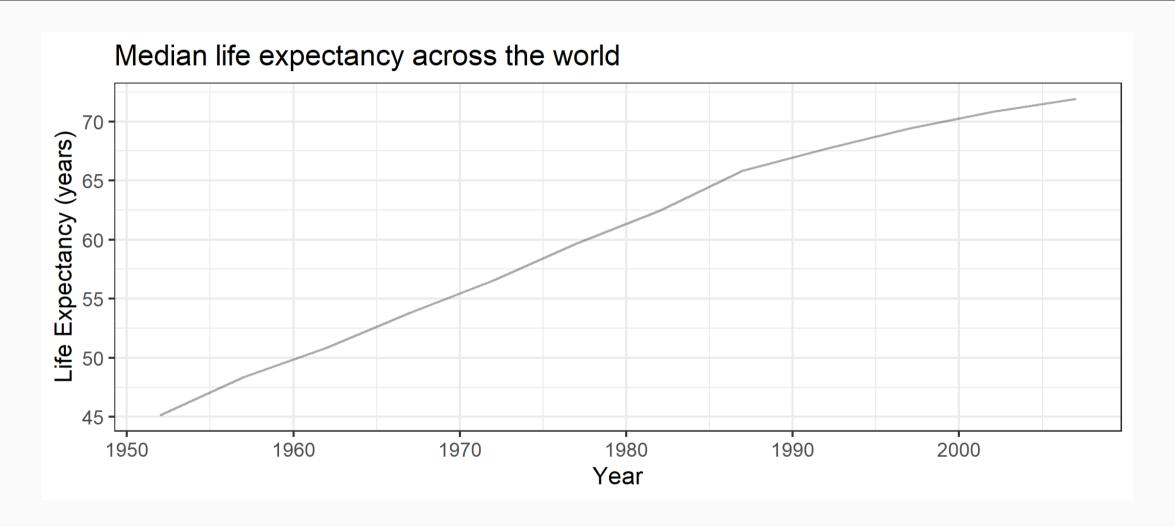
We've made *major* improvements in life expectancy (and many other measures of health) across the world

- Poverty reduction
- Technology development and innovation
- Technology diffusion and adoption
- Access to better services, including healthcare

### Evidence of better health

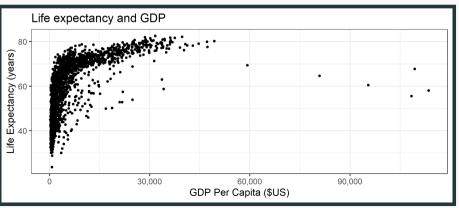


### Evidence of better health

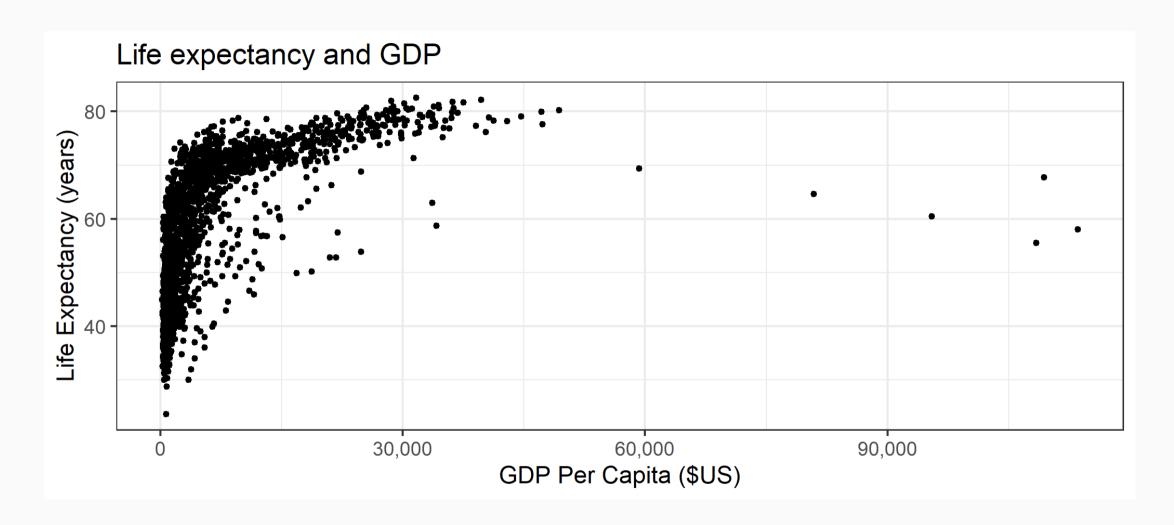


### **GDP** and Health

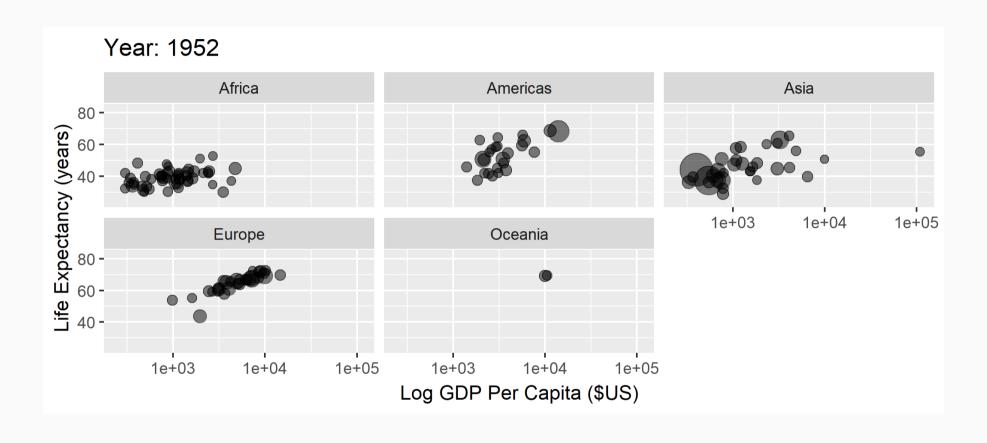
```
library(gapminder)
ggplot(data = gapminder, mapping = aes(x = gdpPercap, y = lifeExp)) +
    geom_point(size = 1) + theme_bw() + scale_x_continuous(label = comma) +
    labs(x = "GDP Per Capita ($US)",
        y = "Life Expectancy (years)",
        title = "Life expectancy and GDP")
```



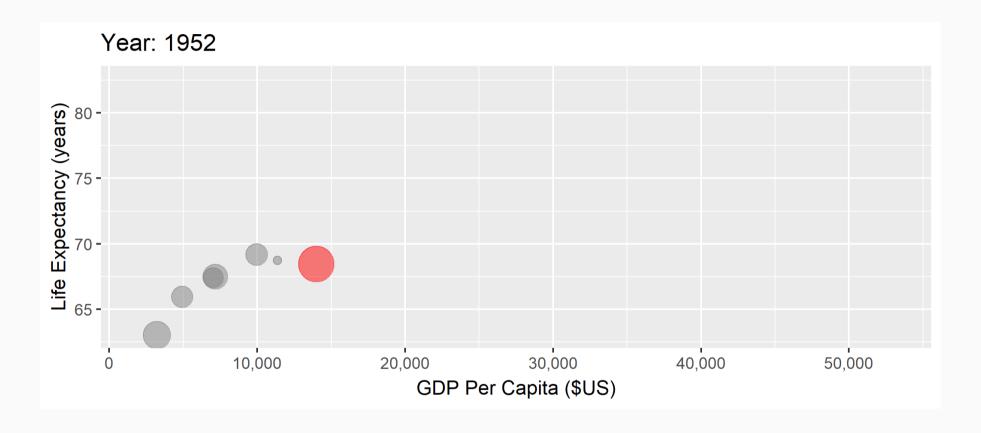
### **GDP** and Health



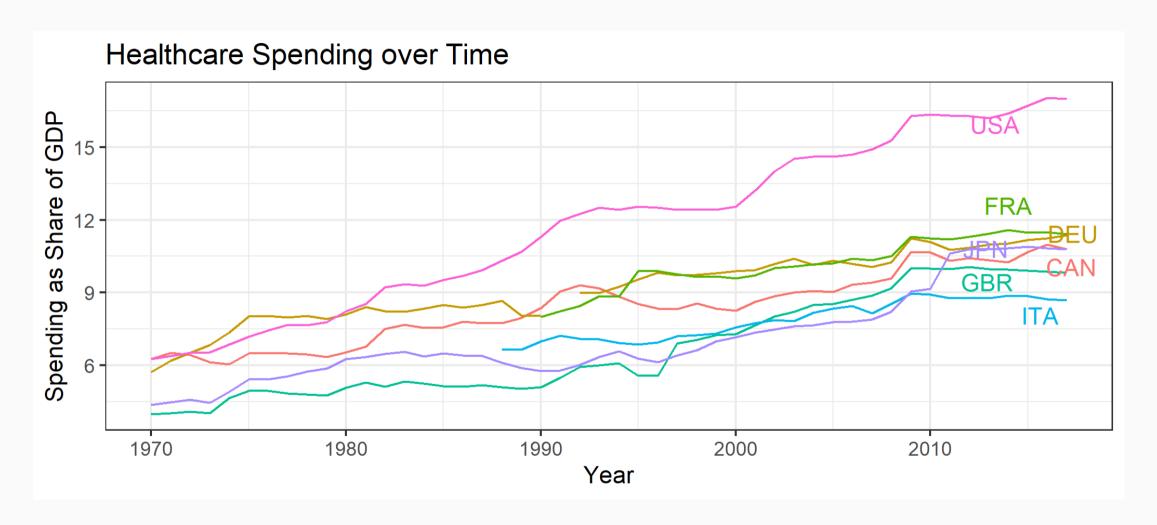
### GDP and Health over Time



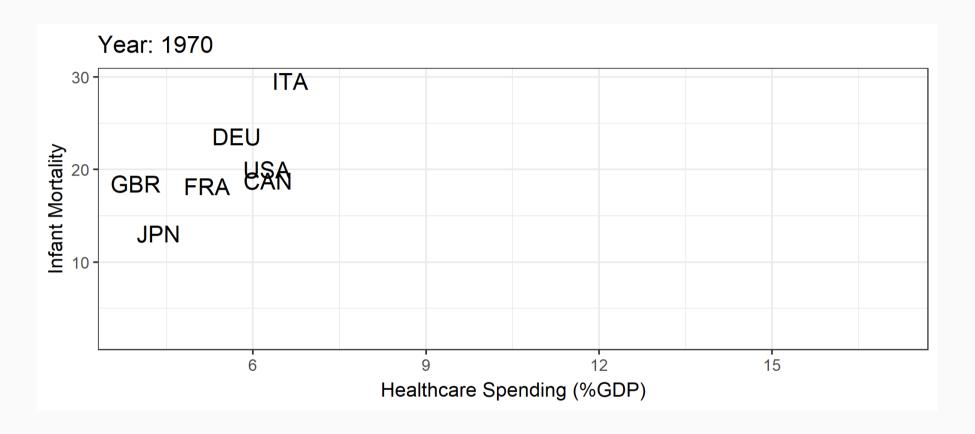
## But the US is unique



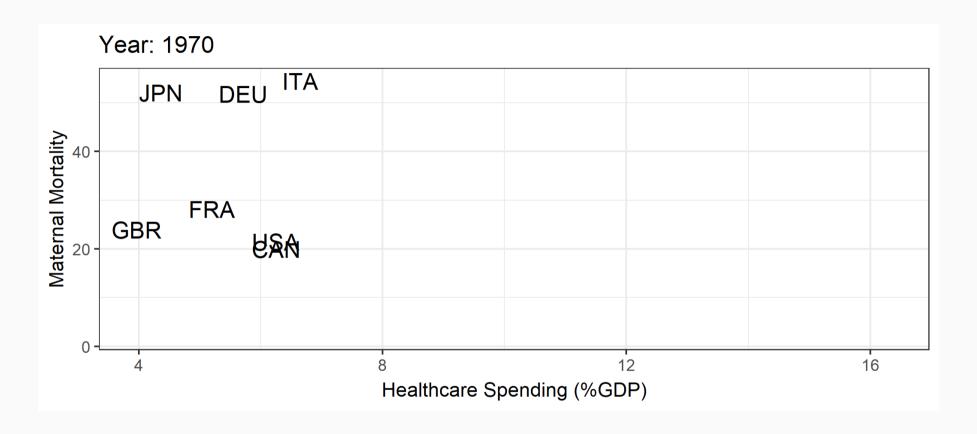
## Healthcare spending



## Spending and infant mortality



### Spending and maternal mortality



### Why study healthcare

- 1. Health and healthcare are constantly changing
- 2. \$3.5 trillion, 17.9% of GDP, \$10,739 per person
- 3. Coronavirus shows interconnected web of economics, health policy, public policy, public health
- 4. U.S. healthcare is uniquely inefficient in many ways

### Economic issues in healthcare

Lots of interesting economic issues in healthcare (not all unique to the U.S.):

- 1. Extremely heterogeneous products
- 2. Asymmetric information between patients and physicians
- 3. Unobservable quality (experience good)
- 4. Unpredictable need (inability to shop in many cases)
- 5. Distortion of incentives due to insurance
- 6. Adverse selection (asymmetric information between patients and insurers)

### What about this class specifically?

- 1. Overlap with industrial organization and healthcare
- 2. Data challenges and opportunities
- 3. Good blend of microeconomic theory and applied empirical micro

## Syllabus highlights

(Read the full document here)

- Substantive areas
  - Hospital ownership and production
  - Physician agency
  - Information disclosure and choice
  - Competition and industrial organization

- Applying canonical methods for causal inference
  - Instrumental variables
  - Regression discontinuity
  - Difference-in-differences

- Datasets from the real world
  - Hospital Cost Report Information System (HCRIS)
  - o Inpatient Prospective Payment System (IPPS) Final Rule Files
  - Provider of Services (POS) files
  - Provider Utilization and Payment Public Use Files (PUF)
  - Medicare Advantage Insurance Data

- Practical workflow for replicable work
  - Git and GitHub
  - Practice with cloud computing
  - Extracting and managing raw data

## Assignments

- Empirical exercises (x4)
- Presentation (x2)
- Lit review or draft paper
- Replication
- Discussion

# Grading

Component	Weight
Online discussions	5%
4 × empirical exercies (5% each)	20%
2 x presentations (10% each)	20%
Lit review/draft paper	25%
Replication	30%

### Software Installation

### Software Installation

- 1. Download R
- 2. Download RStudio
- 3. Download Git
- 4. Create an account on GitHub

For help and troubleshooting with Git and GitHub, take a look at Jenny Bryan's http://happygitwithr.com.

#### Checklist

☑ Do you have the most recent version of R?

```
version$version.string
## [1] "R version 3.6.0 (2019-04-26)"
```

☑ Do you have the most recent version of RStudio? (The preview version is fine.)

```
RStudio.Version()$version
## Requires an interactive session but should return something like "[1] '1.1.463'"
```

☑ Have you updated all of your R packages?

```
update.packages(ask = FALSE, checkBuilt = TRUE)
```

### Checklist

- Open up the shell
- Windows users, make sure that you installed a Bash-compatible version of the shell. If you installed Git for Windows, then you should be good to go.

### Checklist

☑ Which version of Git have you installed?

```
git --version
```

☑ Did you introduce yourself to Git? (Substitute in your details.)

```
git config --global user.name 'Ian McCarthy'
git config --global user.email 'ian.mccarthy@emory.edu'
git config --global --list
```

☑ Did you register an account in GitHub?

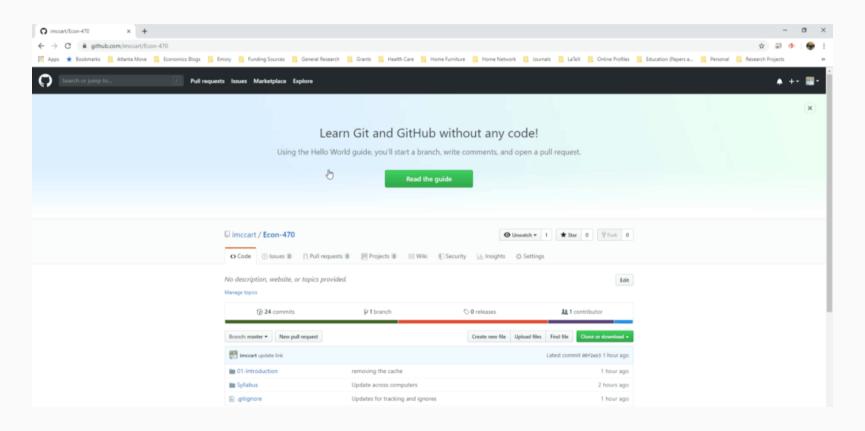
### Practice with Git and RStudio

### Before next class (see http://happygitwithr.com)

- 1. Download R
- 2. Download RStudio
- 3. Download Git
- 4. Create an account on GitHub
- 5. Connect RStudio to Git and GitHub
- 6. Start/clone/fork a repository for this class

### Setting things up

Now we're going to clone a GitHub repository (repo) using RStudio.



### Some common mistakes for windows users

- Windows folders are *not* files...there is no content without a file. You can't commit or push changes without content.
- Let RStudio/GitHub create the directory (main folder) for you.
- If you're working across devices on your own repo, be sure to pull before starting and push afterward.
- Avoid spaces in file names. Avoid them at all costs. DO NOT PUT SPACES IN YOUR FILE NAMES.
  - "A space in a file name is a space in your soul."

### Ideal workflow

Until you are a Git(Hub) expert...

- 1. Start project on GitHub (fork from another repo if needed)
- 2. Clone to desktop with RStudio
- 3. See <a href="http://happygitwithr.com">http://happygitwithr.com</a> for instructions on linking your local repo with a new upstream remote