

Hongming Wang

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EDUCATION

PhD Economics

UNIVERSITY OF SOUTHERN CALIFORNIA

2019

MA Economics

UNIVERSITY OF SOUTHERN CALIFORNIA

2015

BA Finance, BS Math (minor)

SHANGHAI JIAOTONG UNIVERSITY

2012

PROFESSIONAL EXPERIENCE

2019-2023 **Research Associate, Hitotsubashi Institute for Advanced Study**, Hitotsubashi University

2020-2022 **Principal Investigator, Grants-in-Aid for Scientific Research**, #20K13509

PUBLICATION

Performance Pay in Insurance Markets: Evidence from Medicare
(with Michele Fioretti) *Review of Economics and Statistics*

Mixing Age and Risk Groups for Accessing COVID-19 Vaccines: A Modelling Study
(with Yoko Ibuka and Ryota Nakamura) *accepted at BMJ OPEN*

WORKING PAPER

Expanding Health Insurance with Mandate and Subsidy: Theory and Evidence from Massachusetts

Reducing Inequality While Improving Health: Long-Run Impacts from the Onset of Universal Health Insurance in Japan
(Grants-in-Aid for Scientific Research, #20K13509, Japan Society for the Promotion of Science)

CONFERENCES

2022 Japan Health Economics Association Annual Conference (Okayama)

2021 Econometric Society European Winter Meetings (virtual)
Econometric Society China Meeting (virtual)
Keio University (Tokyo)
HIAS Health (virtual)
AEA/ASSA (virtual)

2020 Econometric Society European Winter Meetings (Virtual)
INFER (virtual, co-author)
Econometric Society World Congress (virtual)
Society of Labor Economics (virtual)

2019 Econometric Society European Winter Meetings (Rotterdam)
Asia Pacific Industrial Organization Conference (Tokyo)
International Industrial Organization Conference (Boston, co-author)
AEA/ASSA (Atlanta)

GRANTS & FELLOWSHIPS

2020-2022	Grants-in-Aid for Scientific Research, Japan Society for the Promotion of Science
2017-2018	Provost Fellowship, USC
2015-2017	Schaeffer Fellowship, Schaeffer Center for Health Policy and Economics

Teaching

2020-2022	Guest Lecturer, Topics in Health Economics, Hitotsubashi University
2018-2019	Teaching Assistant, Intermediate Micro, USC
2013-2014	Teaching Assistant, Intermediate Micro and Intermediate Macro, USC

PROGRAMMING

STATA, PYTHON, R, MATLAB, LATEX

PAPER ABSTRACTS

PERFORMANCE PAY IN INSURANCE MARKETS: EVIDENCE FROM MEDICARE (WITH MICHELE FIORETTI)

Abstract. Public procurement bodies increasingly resort to pay-for-performance contracts to promote efficient spending. We show that firm responses to pay-for-performance can widen the inequality in accessing social services. Focusing on the U.S. Medicare Advantage market, we find that insurers with higher quality ratings responded to bonus payments by selecting healthier enrollees with premium differences across counties. Selection is profitable because the quality rating fails to adjust for differences in the health of enrollees. Selection inflated the bonus payments and shifted the supply of high-rated insurance to the healthiest counties, hurting the healthcare access of sicker patients in the riskiest counties.

EXPANDING HEALTH INSURANCE WITH MANDATE AND SUBSIDY: THEORY AND EVIDENCE FROM MASSACHUSETTS

Abstract. Expanding health insurance to achieve coverage for all is a policy objective pursued by many governments. This paper explores adverse selection and the societal burden of charity care as motivations for expanding health insurance. I show that expansions replacing charity care with tax-financed subsidies on premiums can improve welfare under adverse selection and progressive taxation. Exploiting the subsidy and penalty incentives in Massachusetts, I find that 60% of the pricing benefits are reductions in premiums, and the joint benefits on premiums and charity costs offset the fiscal cost of expansion. Redistribution can motivate further expansions subsidizing the low-income.

REDUCING INEQUALITY WHILE IMPROVING HEALTH: LONG-RUN IMPACTS FROM THE ONSET OF UNIVERSAL HEALTH INSURANCE IN JAPAN

(GRANTS-IN-AID FOR SCIENTIFIC RESEARCH, #20K13509, JAPAN SOCIETY FOR THE PROMOTION OF SCIENCE)

Abstract. Universal insurance is pursued by many governments to ensure the access to healthcare and to reduce the inequalities in health and health investments. Exploiting the historic onset of universal insurance in Japan in 1956-1961, this paper examines the long-run impacts of universal insurance on the 1956-1965 birth cohorts who were differentially exposed to universal insurance due to the reform. I find that exposure reduced the prevalence rate of chronic conditions and the mortality from cancer in prime age. For women, exposure increased college enrollment and the probability of marrying a college-educated spouse. In households, exposure increased women's employment and earnings while the homemaker's role shifted from women to men. The results show that universal insurance not only improved health, but further increased the socio-economic status of women with reduced gender inequalities in education, employment, and earnings.

MIXING AGE AND RISK GROUPS FOR ACCESSING COVID-19 VACCINES IN JAPAN: A MODELING STUDY (WITH YOKO IBUKA AND RYOTA NAKAMURA)