## Molly Emma Frean

Curriculum Vitae - Updated October 2020

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#### **EDUCATION**

#### The Wharton School, University of Pennsylvania

PhD, Health Care Management and Economics

2016-2021 (expected)

Dissertation Chair: Mark V. Pauly

#### Macalester College

BA, Economics and Psychology

2008-2012

#### RESEARCH INTERESTS

Health Economics, Industrial Organization, Health Insurance, Health Policy

#### RESEARCH EXPERIENCE

#### University of Pennsylvania

Research Assistant to Dr. Mark V. Pauly	2017-Present
Research Assistant to Dr. Hanming Fang	$2017 ext{-Present}$
Research Assistant to Dr. Claudio Lucarelli	2018-Present

#### Stanford University School of Medicine

Research Assistant to Dr. Sara J. Singer 2017-2019

#### Harvard T.H. Chan School of Public Health

Research Assistant to Drs. Benjamin Sommers, Katherine Baicker and Sara J. Singer 2015-2016

#### Boston Health Economics, Inc.

Research Associate	2014-2015
Research Assistant	2012-2013

#### **PUBLICATIONS**

Frean, M., ..., & Singer, S. J. (2020). Patient experiences of integrated care in Medicare Accountable Care Organizations and Medicare Advantage versus Traditional Fee-For-Service. *Medical Care (forthcoming)*.

**Frean, M.**, Gruber, J., & Sommers, B. D. (2017). Premium subsidies, the mandate, and Medicaid expansion: Coverage effects of the Affordable Care Act. *Journal of Health Economics*, 53, 72-86.

Kerrissey, M. J., ..., **Frean, M.**, ... & Singer, S. J. (2017). Medical group structural integration may not ensure that care is integrated from the patient's perspective. *Health Affairs*, 36(5), 885-892.

Frean, M., Gruber, J., & Sommers, B. D. (2016). Disentangling the ACA's coverage effects - lessons for policymakers. *New England Journal of Medicine*, 375(17), 1605-1608.

Frean, M., Shelder, S., Rosenthal, M. B., Sequist, T. D., & Sommers, B. D. (2016). Health reform and coverage changes among Native Americans. *JAMA Internal Medicine*, 176(6), 858-860.

#### WORKING PAPERS

#### Understanding Manufacturer-Sponsored Copay Assistance Programs (Job Market Paper)

Manufacturer-sponsored copay assistance is an increasingly common and controversial practice in the US prescription drug industry. While drug manufacturers argue that their coupons help underinsured patients access valuable therapies, insurers are concerned that the discounts undermine their efforts to direct patients towards high-value options with cost-sharing. In this paper, I develop an economic model to show that while coupons may raise spending through both higher prices and higher quantities, their effects on welfare are ambiguous. I highlight the role of competition in determining these effects. In a complementary empirical analysis, I combine a novel dataset on coupon offers with administrative claims data from a large national insurer to estimate the effects of coupon introductions between 2015 and 2018. While prior research on coupons has focused on brands facing generic competition or brands in just a couple therapeutic classes, I study a diverse set of drugs that span over 20 therapeutic classes and face varying degrees of competition. I use difference-in-difference methods to address the potential endogeneity of coupon offers, and a new measure of coupon exposure that exploits variation in cost-sharing across insurance plans. I find that coupons have larger effects on the utilization of branded drugs facing generic competition, though absolute effects are relatively small in magnitude (<10%). I also find evidence that coupons are associated with significantly faster price growth, suggesting price may be an equally important mechanism through which coupons raise spending. Results support existing policy towards coupons that places greater limitations on their use when generic alternatives are available.

# Does high cost-sharing slow the long-term growth rate of health spending? Evidence from the states (NBER Working Paper No. 25156, with Mark V. Pauly)

Research has shown that higher cost-sharing lowers health care spending levels but less is known about whether cost-sharing also affects spending growth. From 2002 to 2016, private insurance deductibles more than tripled in magnitude. We use data from the Centers for Medicare and Medicaid Services and the Agency for Healthcare Research and Quality to estimate whether areas with relatively higher deductibles experienced lower spending growth during this period. We leverage panel variation in private deductibles across states and over time and address the potential endogeneity of deductibles using instrumental variables. We find that spending growth is significantly lower in states with higher average deductibles and observe this relationship with regard to both private insurance benefits and total spending (including Medicare and Medicaid), suggestive of potential spillovers. We hypothesize that the impact on spending growth happens because deductibles affect the diffusion of costly new technology.

#### OTHER WORKS IN PROGRESS

Enrollee turnover and implications for health insurance benefit design (with Hanning Fang and Benjamin Ukert)

Competition between community-rated and risk-rated but guaranteed-renewable insurance (with Mark V. Pauly)

What does a deductible do to health care spending growth? (with Mark V. Pauly, Claudio Lucarelli, Aliza Gordon and Lynn Hua)

#### INVITED CONFERENCE PRESENTATIONS

Conference of the American Society of Health Economists - Virtual	2020
Conference of the American Society of Health Economists - Washington D.C.	2019
AcademyHealth Annual Research Meeting - Washington D.C.	2019
National Tax Association Annual Conference on Taxation - Baltimore, MD	2016
AcademyHealth Annual Research Meeting - Boston, MA	2016

## TEACHING ASSISTANTSHIPS

The Microeconomics of Health and Health Care Perelman School of Medicine, University of Pennsylvania	Summer 2019
Management and Economics of the Pharmaceutical & Biotech Industries The Wharton School, University of Pennsylvania	Spring 2019
The Nonprofit Sector: Economic Challenges and Strategic Responses The Wharton School, University of Pennsylvania	Spring 2018
Economics for Health Policy Harvard T.H. Chan School of Public Health	Summer 2017
Introduction to Econometrics Macalester College	Spring 2012

## HONORS, AWARDS AND FELLOWSHIPS

NIHCM Annual Health Care Research Award, Finalist	2018
Associate Fellow, Leonard Davis Institute of Health Economics	2017
Phi Beta Kappa	2012
David Meiselman Prize, Macalester College Economics Department	2012
Ruth and Vernon Taylor Public Health Fellowship, Macalester College	2011

## PROFESSIONAL ACTIVITIES

Referee Service	Health Affairs, Health Economics, Journal of Risk and Insurance, Journal of Policy Analysis and Management, American Journal of Preventive Medicine, Journal of Health Services Research and Policy
Memberships	American Economic Association (AEA), American Society of Health Economists (ASHEcon), AcademyHealth

### TECHNICAL SKILLS

Programming Languages	Stata, R, SAS, SQL
Other	LATEX, Microsoft Office