

## Chapin D. White, Ph.D.



### Education

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2004	Ph.D., Health Policy, Harvard University, Cambridge, MA
1999	M.P.P., Kennedy School of Government, Harvard University, Cambridge, MA
1993	A.B., Social Anthropology, <i>cum laude</i> , Harvard College, Cambridge, MA

### Positions

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2023 – present	Director of Health Analysis, Congressional Budget Office, Washington, DC
2020 – 2023	Deputy Director, Health Analysis Division (HAD), Congressional Budget Office, Washington, DC
2019 – 2020	Senior Policy Researcher and Pardee RAND Graduate School Faculty Member, RAND Corporation, Arlington, VA
2018 – 2019	Adjunct Senior Policy Researcher and Pardee RAND Graduate School Faculty Member, RAND Corporation, Arlington, VA
2018 – 2019	President, Freepricer LLC, Takoma Park, MD
2014 – 2018	Senior Policy Researcher and Pardee RAND Graduate School Faculty Member, RAND Corporation, Arlington, VA
2010 – 2013	Senior Health Researcher, Center for Studying Health System Change, Washington, DC
2007 – 2010	Principal Analyst, Congressional Budget Office, Washington, DC
2007	Senior Program Officer, Commonwealth Fund
2004 – 2007	Principal Analyst, Congressional Budget Office, Washington, DC
2003 – 2004	Post-doctoral Fellow, National Bureau of Economic Research, Cambridge, MA
2003 – 2004	Part-time Consultant, Medicare Payment Advisory Commission, Washington, DC
1998 – 2000	Analyst, Abt Associates, Cambridge, MA

### Skills

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Leadership of research teams, federal budget and policy process, economic analysis, policy analysis, microsimulation, qualitative interviews and research methods, econometrics

### Subject Area Expertise

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Medicare payment policy and spending trends, the Affordable Care Act, health insurance exchanges, hospital financing, health care price transparency, health

insurance coverage, price negotiations between health plans and medical providers, health care spending trends, geographic variation in health care spending, Medicaid and the Children's Health Insurance Program, medical malpractice, and tax policy relating to health insurance and nonprofit hospitals

## **Experience**

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### **Congressional Budget Office, Washington, DC**

**Director of Health Analysis (2023 – present) and Deputy Director, Health Analysis Division (2020 – 2023).** Oversee three unit chiefs and a staff of about 25 analysts, the majority of whom have a Ph.D. in economics or a related discipline.

Responsibilities include:

- strategic planning and development of a research portfolio consistent with the needs of the agency and the priorities of the U.S. Congress;
- recruitment, retention and development of managers and analysts;
- coordination among three units within the division, and with other divisions within the agency; and
- review and guidance on analytical modeling and written products, with a focus on achieving the highest technical quality and providing analyses that are unbiased, transparent and complete.

Helped navigate the division through reorganizations and the shifts to all-remote work and then to hybrid work, while continuing to produce high-quality work. Key recent products include reports on: [approaches to reduce prices paid by commercial insurers](#); [prices paid by commercial insurers to hospitals and physicians](#); [spending, use and prices of prescription drugs](#); [a public option for health insurance](#); [drug prices in federal programs](#); [drug price negotiations](#); [single-payer health care](#); [near-universal health insurance coverage](#); [the uninsured population](#); and [federal subsidies for health insurance coverage](#).

### **Independent Consultant**

Developed a statistical methodology to deduce the terms of contracts between health plans and health care providers using data on paid claims. Conducted independent research on health care pricing and contracting.

### **RAND Corporation, Arlington, VA**

Research topics include the design of payment models for specialist physicians for the Center for Medicare & Medicaid Innovation, a qualitative evaluation of the impacts of provider payment reform on physician practices, and simulation modeling of the potential impacts of reference pricing on health care spending and quality of care among the privately insured. Created and led the RAND Provider Payment Interest Group (ProPIG).

**Co-Principal Investigator, A National Hospital Price Transparency Study (2018 – 2020).** The project, funded jointly by the Robert Wood Johnson Foundation and a coalition of self-funded employers, uses commercial claims data and all payer claims databases to measure and publicly report the prices paid for hospital care, using Medicare's administered prices as a benchmark.

**Project Director, RAND Hospital Data (2017 — 2020).** Created a methodology for processing and packaging hospital cost report data, and led the development

of a website (<https://www.hospitaldatasets.org/>) to offer free-tier and subscription-only processed datasets.

**Co-Principal Investigator, Modeling the Impacts of a Single-Payer System in New York State (2018).** The project, funded by the New York State Health Foundation, assessed how the New York Health Act would affect health care utilization and costs using a microsimulation modeling approach.

**Team Leader, Alternative Payment Models and Financial Simulations, Medicaid Innovation Accelerator Program (2016 – 2018).** The project, funded by the Centers for Medicare & Medicaid Services (CMS), provided state Medicaid agencies with technical assistance in developing alternative payment models.

**Project Director, Hospital Prices in Indiana: An Employer-Led Transparency Initiative (2016 – 2017).** The project, funded by the Robert Wood Johnson Foundation, used commercial claims data to measure and publicly report the prices paid for hospital care in Indiana, using Medicare's administered prices as a benchmark.

**Project Director, A Comprehensive Assessment of Four Options for Financing Health Care Delivery in Oregon (2016 – 2017).** This project, funded by the Oregon Health Authority, enabled Oregon policy makers to assess a range of state-based options for financing health care, including adding a public option in the Marketplace and a tax-financed single payer plan. The project included microsimulation analyses of changes in health insurance coverage using RAND's COMPARE model, and simulation analyses of provider responses to payment policy using PADSIM. The report evaluates each policy option using a set of criteria spelled out by the Oregon legislature, including universality of coverage, financial sustainability, and administrative feasibility.

**Project Leader, RAND's Health Care Payment and Delivery Simulation Model (PADSIM) (2014 – 2020).** This project, funded internally by RAND, involves constructing a simulation model of health plan payment policy, and health care providers' responses.

**Project Co-Director, Analysis of Payment Models for Out-of-Network Hospital Care in New Jersey (2016 – 2017).** This project, funded CarePoint Health, involves using commercial claims data and hospital cost reports to estimate hospital revenues from out-of-network (OON) care, and simulate revenues under alternative regulations relating to OON care.

**Task Technical Leader, Developing the Analytic Capacity to Analyze the Performance and Effects of Accountable Care Organizations Relative to Other Payment Systems (2015 – 2017).** This project, funded by the Assistant Secretary for Planning and Evaluation (ASPE), involves a series of analyses relating to measuring and analyzing the impacts of emerging relationships among health care providers, such as Accountable Care Organizations (ACOs).

**Project Director, Medicare Spending Trends (2014 –2016).** This project, funded by the Kaiser Family Foundation, is producing a series of research briefs on Medicare spending trends, and patterns in geographic variation in Medicare spending.

**Senior Advisor, Providing an Incidence Analysis of Health Care Spending in Vermont (2014 – 2015).** This project, funded by the Legislative Joint Fiscal Office of the State of Vermont, used a customized version of RAND's COMPARE microsimulation model to estimate the economic incidence of the financing for health care services.

**Researcher, Effects of Health Care Payment Models on Physician Practice in the United States (2014 – 2015) (PI: Mark Friedberg, Co-PI: Peggy Chen).** This qualitative project, funded by the American Medical Association, described the effects of new payment models on physician practices, work experience, and clinical care.

**Project Director, Analyses of Pricing and Payment Policy Options for Private Health Plans (2014 – 2015).** The National Institute for Health Care Reform (NIHCR) sponsored a series of analyses and reports addressing the following aspects of health plan design and payment policy: the potential impacts of reference pricing on health care quality and spending; a comparison of the progressivity of the "Cadillac tax" versus a cap on the tax exclusion for employer-sponsored health insurance; the difference in prices paid for services provided in hospital outpatient settings versus in a physician office.

**Technical Task Lead, Development of Methodology to Define Patient Archetypes for Adherence Predictive Modeling (2014 – 2015).** This project, funded by CVS, involved developing and testing models for predicting patient adherence with prescription medication therapies for chronic diseases. Led the analytical work and the write-up.

**Technical Task Lead, Specialty Payment Model Opportunities Assessment and Design (2014).** The purpose of this project, funded by the Centers for Medicare and Medicaid Services through a subcontract with MITRE, was to assess episode-based payment models for complex and intensive medical specialty areas, such as oncology, with input from the larger healthcare community and to design and analyze the impact of those payment model designs on both beneficiary services costs and provider costs. Led the analysis and write-up of the simulation modeling for the oncology care model.

**Principal Investigator, Can Price Transparency Help Slow the Growth in Health Care Spending? (2013 – 2014).** This project, funded by the West Health Policy Center (WHPC), consisted of a mixed-methods analysis of the effects of policy options relating to transparency. Qualitative methods were used to gather information from well-informed individuals who are involved in transparency initiatives, and to understand the likely effects of specific policy options. The synthesized results of the qualitative analysis were combined with existing quantitative data sources and used to simulate the range of likely spending impacts. An expert panel provided feedback on preliminary findings.

#### **Center for Studying Health System Change, Washington, DC**

Research topics included Medicare spending trends, the implementation of health insurance exchanges, the effects of Medicare payment cuts on hospital volume and prices paid by private insurers, the effects of coverage expansions on utilization of physician services, and geographic variation in health spending among the privately

insured. As Senior Health Researcher, develop project ideas, write proposals, conduct quantitative and qualitative research, and write articles for general audiences and for peer-reviewed journals.

**Principal Investigator, How Do Changes in Medicare Hospital Payments Affect Private Insurers' Costs? (2011 – 2013).** This project, funded by the National Institute for Health Care Reform (NIHCR), tested the effects of Medicare payment cuts on the prices paid by private insurers using a unique new data set that combined MarketScan private claims data with Medicare hospital cost reports. The results, published in *Health Affairs* (May 2013), showed that hospital markets with relatively slow growth in Medicare inpatient hospital payment rates also had relatively slow growth in private hospital payment rates during 1995–2009, and that a 10 percent reduction in Medicare payment rates led to an estimated reduction in private payment rates of 3 percent or 8 percent, depending on the statistical model used.

**Health Researcher, Health Insurance Markets: Community-Level Preparations for National Health Reform (2012 – 2013).** This project, funded by the Robert Wood Johnson Foundation (RWJF), is a qualitative study of eight selected communities in states receiving support from RWJF to implement national health care reform. The site studies capture both the general structure of the insurance markets in these communities and how the communities are preparing for national reform. Examine the impact of insurance regulations on insurance markets in communities; competition among health insurers; key health insurance product offerings and take up; employer-based coverage; contracting between insurers and providers; and outreach and enrollment for Medicaid and the state Children's Health Insurance Program (CHIP).

**Health Researcher, Medicare Hospital Payment Rates and the Volume of Admissions (2012 – 2013).** This project, funded by Changes in Health Care Financing & Organization (HCFO), will measure the following: How does a change in the level of Medicare payments for inpatient hospital services affect the volume of Medicare-covered inpatient hospital services?; Does the volume of inpatient services respond asymmetrically to increases versus decreases in Medicare payment generosity?; If there are changes in the volume of inpatient hospital services, do those changes occur only among more discretionary types of discharges (e.g. acute exacerbations of chronic obstructive pulmonary disease) and not others (e.g. hip fracture)?. The results of this project will provide the Congressional Budget Office and other analysts with a critical piece of evidence to use in their modeling of Medicare policy options.

#### **Congressional Budget Office, Washington, DC**

**Principal Analyst (2004 – 2007, 2007 – 2010).** Research topics included health reform and its effects on health insurance coverage and premiums, the effects of the individual mandate, medical malpractice and tort reform, long-term trends in health spending, geographic variation in health care spending, the tax

exemption for nonprofit hospitals, and the effects of changes in Medicare payment policy.

**Commonwealth Fund, Washington, DC**

**Senior Program Officer (2007).** Developed and conducted intramural and extramural research on consequences of uninsurance and strategies to expand health insurance coverage. Provided oversight to grantees.

**National Bureau of Economic Research, Washington, DC**

**Post-doctoral Fellow (2003 – 2004).** Analyzed the effects of implementation of Medicare's prospective payment system for skilled nursing facilities on staffing and quality of care.

**Medicare Payment Advisory Commission (MedPAC), Washington, DC**

**Consultant (2003).** Developed a research design, and performed quantitative analyses, that compared treatment patterns and costs among patients admitted to long-term care hospitals versus other facilities. The results were reported in MedPAC's June 2004 Report to the Congress.

**Abt Associates, Cambridge, MA**

**Analyst (1998 - 2000).** Analyzed the effects of alternative casemix adjustment systems for Medicare payments to skilled nursing facilities.

**Papers, Publications, and Presentations**

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**Journal Articles**

Weber, Ellerie, Eric Floyd, Youngran Kim, and Chapin White, "Peering Behind the Veil: Trends in Types of Contracts Between Private Health Plans and Hospitals," *Medical Care Research and Review*, Vol. 78, No. 3, 2021, doi: 10.1177/1077558719859724, <https://journals.sagepub.com/doi/pdf/10.1177/1077558719859724>.

Carman, Katherine Grace, Jodi Liu, Chapin White, "Accounting for the Burden and Redistribution of Health Care Costs: Who Uses Care and Who Pays for It," *Health Services Research*, 2020, doi: 10.1111/1475-6773.13258, <https://onlinelibrary.wiley.com/doi/full/10.1111/1475-6773.13258>.

Henke, Rachel Mosher, Zeynal Karaca, Teresa B. Gibson, Eli Cutler, Chapin White, Michael Head, and Herb S. Wong, "Medicaid Accountable Care Organizations and Childbirth Outcomes," *Medical Care Research and Review*, Vol. 77, No. 6, 2020, pp. 559–573, doi: 10.1177/1077558718823132, <https://journals.sagepub.com/doi/full/10.1177/1077558718823132>.

Henke, Rachel Mosher, Zeynal Karaca, Teresa B. Gibson, Eli Cutler, Chapin White, and Herbert S. Wong, "Medicare Advantage Penetration and Hospital Costs Before and After the Affordable Care Act," *Medical Care*, Vol. 56, No. 4, April, 2018, pp. 321-328, doi: 10.1097/MLR.0000000000000885, <https://www.ingentaconnect.com/content/wk/mcar/2018/00000056/00000004/art00008>.

Hussey, Peter S., Jodi L. Liu, and Chapin White, "The Medicare Access And CHIP Reauthorization Act: Effects on Medicare Payment Policy and Spending," *Health*

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- White, Chapin, Suthira Taychakhoonavudh, Rohan Parikh, and Luisa Franzini, "Roles of Prices, Poverty, and Health in Medicare and Private Spending in Texas," *American Journal of Managed Care*, vol. 21, no. 5, 2015, pp. e303-e311.  
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<https://journals.sagepub.com/doi/full/10.1177/1077558714563174>.
- Franzini, Luisa, Chapin White, Suthira Taychakhoonavudh, Rohan Parikh, Mark Zezza, and Osama Mikhail, "Variation in Inpatient Hospital Prices and Outpatient Service Quantities Drive Geographic Differences in Private Spending in Texas," *HSR Health Services Research*, Vol. 49, No. 6, December, 2014, pp. 1944-1963.  
<https://onlinelibrary.wiley.com/doi/full/10.1111/1475-6773.12192>.
- White, Chapin. "Cutting Medicare Hospital Prices Leads to a Spillover Reduction in Hospital Discharges for the Nonelderly," *HSR Health Services Research*, [Epub May 2014], vol. 49, no. 5, October 2014, pp. 1578-95, doi: 10.1111/1475-6773.12183. <https://onlinelibrary.wiley.com/doi/full/10.1111/1475-6773.12183>.
- White, Chapin, James D. Reschovsky, and Amelia M. Bond. "Understanding Differences between High- and Low-Price Hospitals: Implications for Efforts to Rein in Costs." *Health Affairs*, vol. 33, no. 2, February 2014, pp. 324-31, doi: 10.1377/hlthaff.2013.074.  
<https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2013.074>.
- White, Chapin and Vivian Yaling Wu. "How Do Hospitals Cope with Sustained Slow Growth in Medicare Prices?" *Health Services Research*, vol. 49, no. 1, February 2014, pp. 11-31, doi: 10.1111/1475-6773.12101.  
<https://onlinelibrary.wiley.com/doi/full/10.1111/1475-6773.12101>.
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- Bond, Amelia M. and Chapin White. "Massachusetts Coverage Expansion Associated with Reduction in Primary Care Utilization among Medicare Beneficiaries." *Health Services Research*, vol. 48, no. 6 (part 1), December 2013, pp. 1826-39, doi: 10.1111/1475-6773.12103. <https://onlinelibrary.wiley.com/doi/full/10.1111/1475-6773.12103>.

- White, Chapin. "Contrary to Cost-Shift Theory, Lower Medicare Hospital Payment Rates for Inpatient Care Lead to Lower Private Payment Rates." *Health Affairs*, vol. 32, no. 5, May 2013, pp. 935-943, doi: 10.1377/hlthaff.2012.0332.  
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- He, Fang, and Chapin White. "The Effect of the Children's Health Insurance Program on Pediatricians' Work Hours." *Medicare & Medicaid Research Review* vol. 3, no. 1, March 2013, E1-E33, doi: 10.5600/mmrr.003.01.a01.  
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- White, Chapin. "A Comparison of Two Approaches to Increasing Access to Care: Expanding Coverage Versus Increasing Physician Fees." *Health Services Research*. vol. 47, no. 3, pt. 1, June 2012, pp. 963-983, doi: 10.1111/j.1475-6773.2011.01378.x. <https://onlinelibrary.wiley.com/doi/full/10.1111/j.1475-6773.2011.01378.x>.
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- Ginsburg, Paul B., and Chapin White. "Health Care's Role in Deficit Reduction—Guiding Principles." *New England Journal of Medicine*, vol. 365, no. 17, October 27, 2011, pp. 1559-1561. [https://www.researchgate.net/profile/Chapin-White/publication/51747834\\_Health\\_Care%27s\\_Role\\_in\\_Deficit\\_Reduction\\_-\\_Guiding\\_Principles/links/54d0ecf90cf29ca811040a07/Health-Cares-Role-in-Deficit-Reduction-Guiding-Principles.pdf](https://www.researchgate.net/profile/Chapin-White/publication/51747834_Health_Care%27s_Role_in_Deficit_Reduction_-_Guiding_Principles/links/54d0ecf90cf29ca811040a07/Health-Cares-Role-in-Deficit-Reduction-Guiding-Principles.pdf).
- White, Chapin, and Nguyen Xuan Nguyen. "How Does the Volume of Post-Acute Care Respond to Changes in the Payment Rate?" *Medicare & Medicaid Research Review*, vol. 1, no. 3, August 12, 2011, pp. E1-E22, doi: 10.5600/mmrr.001.03.a01.  
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## **Reports**

- Buttorff, Christine, Chapin White, Monique Martineau, Spencer R. Case, Cheryl L. Damberg. "Increasing Price Transparency in Health Care: Key Themes and Policy Options from a Technical Expert Panel." RAND Health, 2021.  
[https://www.rand.org/pubs/research\\_reports/RR2645.html](https://www.rand.org/pubs/research_reports/RR2645.html).
- Duffy, Erin L., Christopher Whaley, and Chapin White. "The Price and Spending Impacts of Limits on Payments to Hospitals for Out-of-Network Care." RAND Health, 2020.  
[https://www.rand.org/pubs/research\\_reports/RR4378.html](https://www.rand.org/pubs/research_reports/RR4378.html).

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- White, Chapin, Jodi L. Liu, Mikhail Zaydman, Sarah A. Nowak, and Peter S. Hussey. "The RAND Health Care Payment and Delivery Simulation Model (PADSIM)." RAND Health, 2016. [https://www.rand.org/pubs/research\\_reports/RR1428.html](https://www.rand.org/pubs/research_reports/RR1428.html).
- White, Chapin, Sarah A. Nowak, and Christine Eibner. "Can the Cadillac Tax Be Made Less Regressive by Replacing It with an Exclusion Cap?: Methods and Results." RAND Health, October, 2015.  
[https://www.rand.org/pubs/research\\_reports/RR1321.html](https://www.rand.org/pubs/research_reports/RR1321.html).
- White, Chapin, and Virginia Kotzias. "Health Reform 2.0: Alternate State Waiver Paths Under the Affordable Care Act." National Institute for Health Care Reform, No. 19, September, 2015. <https://www.nihcr.org/publications/research-briefs/health-reform-2-0-alternate-state-waiver-paths-under-the-affordable-care-act/>.
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[https://www.rand.org/content/dam/rand/pubs/research\\_reports/RR700/RR799/RAND\\_RR799.pdf](https://www.rand.org/content/dam/rand/pubs/research_reports/RR700/RR799/RAND_RR799.pdf).
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### **Book Chapters**

White, Chapin D., "Economic Research on Health and Health Care Reform," in Payson, Steven, ed., *Public Economics in the United States: How the Federal Government Analyzes and Influences the Economy*; Praeger, 2014.  
<https://www.amazon.com/Public-Economics-United-States-volumes/dp/0313396337>.

### **Other Publications**

Sachdev, Gloria, Chapin White, and Ge Bai, *Self-Insured Employers Are Using Price Transparency to Improve Contracting with Health Care Providers: The Indiana Experience*, Health Affairs Blog, October 7, 2019.  
<https://www.healthaffairs.org/doi/10.1377/hblog20191003.778513/full/>.

Duffy, Erin L., Mark W. Friedberg, Christopher Whaley, and Chapin White, Addressing Surprise Medical Bills Without Raising the Cost of Health Care, RAND Corporation, April 1, 2019. <https://www.rand.org/blog/2019/04/addressing-surprise-medical-bills-without-raising-the.html>.

Hempstead, Katherine, and Chapin White, Plain Talk About Price Transparency, Health Affairs Blog, March 25, 2019. <https://www.healthaffairs.org/doi/10.1377/hblog20190319.99794/full/>.

Weber, E., Floyd, E., Kim, Y., & White, C. (2018). Peering Behind the Veil: Trends in Types of Contracts between Private Health Plans and Hospitals. Retrieved from [https://papers.ssrn.com/sol3/papers.cfm?abstract\\_id=3288647](https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3288647).

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### **Recent Presentations**

"Where Are Employer-Sponsored Health Plans on the Spectrum of Value-Based Payment for Hospital Care?" Presentation by co-author Chris Whaley to the American Society of Health Economists, St. Louis, MO, June 10, 2020. <https://ashecon.confex.com/ashecon/2020/meetingapp.cgi/Paper/9653>.

"Innovative Purchasing Strategies" Presentation to the National Health Policy Conference, Washington, DC, February 11, 2020. <https://academyhealth.confex.com/academyhealth/2020hdpnhpc/meetingapp.cgi/Session/24758>.

"Findings from an Employer-led Hospital Price Transparency Study: Implications for State Regulators" Presentation to the National Association of Insurance Commissioners, Health Innovations Working Group, New York, NY, August 3, 2019. [https://www.naic.org/meetings1908/cmte\\_b\\_health\\_inn\\_wg\\_2019\\_summer\\_nm\\_materials.pdf](https://www.naic.org/meetings1908/cmte_b_health_inn_wg_2019_summer_nm_materials.pdf).

"The Glitch" Presentation at Altarum's Annual Sustainable Health Care Spending Symposium, Washington, DC, July 9, 2019. <https://altarum.org/publications/sustainable-us-health-spending-cost-control-improved-value>.

"Hospital Productivity" Presentation at the Brookings Institution sponsored by the USC-Brookings Schaeffer Initiative for Health Policy, Washington, DC, June 25, 2019. <https://www.brookings.edu/events/hospital-productivity-trends-implications-for-medicare-payment-policy/>.

- "Unit Prices for Health Care: Strategies to Bring them Down" Presentation at the Altarum Healthcare Value Hub's 018 Healthcare Cost and Quality Conference, New Orleans, LA, November 15, 2018.  
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- "Would an Exclusion Cap Be Less Regressive Than the Cadillac Tax?" Presentation at the 6th Biennial Conference of the American Society of Health Economists (ASHEcon), Philadelphia, PA, June 15, 2016.  
<http://ashecon.confex.com/ashecon/2016/webprogram/Paper4486.html>.
- "Alternate State Waiver Paths under the Affordable Care Act." Presentation at the 6th Biennial Conference of the American Society of Health Economists (ASHEcon), Philadelphia, PA, June 13, 2016.  
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- "An Integrated Analysis of the Demand- and Supply-Side Impacts of Health Reform." Presentation at the 6th Biennial Conference of the American Society of Health Economists (ASHEcon), Philadelphia, PA, June 13, 2016.  
<https://ashecon.confex.com/ashecon/2016/webprogram/Paper4458.html>.
- "PADSIM: a simulation model for analyzing payment policy, and the supply side of health care reform." Presentation at the AcademyHealth Annual Research Meeting, Minneapolis, MN, June 15, 2015. <http://fliphtml5.com/pjxc/gizn/basic/>.
- "Medicare's Role in the Health Spending Slowdown." Presentation at the American Economic Association (AEA) annual meeting, Boston, MA, January 3, 2015, <https://www.aeaweb.org/conference/2015/retrieve.php?pdfid=1142>.
- "Prices: The Real Health Care Cost Driver." Presentation at an invitational conference on Addressing Rising Health Care Costs sponsored by the Robert Wood Johnson Foundation and Consumers Union, New Orleans, LA, November 11, 2013.
- "Health Care Modeling at the Congressional Budget Office." Presentation at the Society for Medical Decision Making Annual Meeting, Baltimore, MD, October 22, 2013.
- "The Structural Spending Slowdown." Presentation at a Symposium sponsored by the Altarum Center for Sustainable Health Spending, Washington, DC, July 30, 2013.
- "Building a Successful Career in Non-University Settings." Panel discussion at AcademyHealth Annual Research Meeting, Washington, DC, June 24, 2013.
- "Medicare System and Quality Innovations: The Early Evidence." Chair for Session at AcademyHealth Annual Research Meeting, Washington, DC, June 23, 2013.
- "Cutting Medicare Hospital Prices Leads to a Spillover Reduction in Utilization among the Nonelderly." Presentation at AcademyHealth Annual Research Meeting, Washington, DC, June 23, 2013.
- "Medicare Has Changed, Projections Not So Much." Presentation at the American Enterprise Institute, Washington, DC, June 3, 2013.

- "Contrary To Cost-Shift Theory, Lower Medicare Hospital Payment Rates for Inpatient Care Lead to Lower Private Payment Rates." *Health Affairs* briefing, National Press Club, Washington, DC, May 7, 2013.
- "The Impact of Medicare Price Cuts on Hospitals, Patients, and Payers." Presentation at the National Center for Health Statistics. Hyattsville, MD, January 22, 2013.
- "Cutting Medicare Hospital Prices Leads to Lower Volume." Presentation to the staff of the Assistant Secretary for Planning and Evaluation, Washington, DC, July 10, 2012.
- "Cutting Medicare Hospital Prices Leads to Lower Private Prices." Paper presented at AcademyHealth Annual Research Meeting, Orlando, FL, June 26, 2012.
- "Medicare Price Spillovers in the Inpatient Hospital Setting." Presentation at the 4th Biennial Conference of the American Society of Health Economists, Minneapolis, June 11, 2012.
- "The Big Unknown in Scoring Health Reform: What Happens When Expanding Demand Meets Contracting Supply?" Presentation at Center for Health Policy Research and Ethics Seminar, George Mason University, Fairfax, VA, April 26, 2012.
- "The Slowdown in Medicare Spending Growth: What Does it Mean?" Presentation at National Economists Club, Washington, DC, January 19, 2012.
- "Supply Side Implications of Insurance Coverage Expansions: Research Insights for Policy." Moderator for AcademyHealth Invitational Meeting, Washington, DC, December 13, 2011.
- "Hospital Responses to Medicare's Outpatient Prospective Payment System: Evidence from Florida." Panel discussion of paper by Daifeng He and Jennifer Mellor at the Association for Public Policy Analysis & Management Fall Research Conference, Washington, DC, November 3, 2011.
- "Supply-Side Modeling: A 3-Step Program." Presentation at Agency for Healthcare Research and Quality Annual Conference, Bethesda, MD, September 21, 2011.
- "How Do Changes in Medicare Hospital Payment Rates Affect the Volume of Services?" Presentation at AcademyHealth Annual Research Meeting, Seattle, June 12, 2011.

### **Dissertation Committees, Pardee RAND Graduate School**

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- 2020 Erin Lindsey Duffy ("Surprise Out-of-Network Medical Bills and Out-of-Network Health Care Provider Payment in the United States"), Chair, [https://www.rand.org/pubs/rgs\\_dissertations/RGSD427.html](https://www.rand.org/pubs/rgs_dissertations/RGSD427.html)
- 2018 Aziza Arifkhanova ("The Impact of Nurse Practitioner Scope-of-Practice Regulations in Primary Care"), [https://www.rand.org/pubs/rgs\\_dissertations/RGSD396.html](https://www.rand.org/pubs/rgs_dissertations/RGSD396.html)
- 2017 Fernando Hoces de la Guardia ("How Transparency and Reproducibility Can Increase Credibility in Policy Analysis: A Case Study of the Minimum Wage Policy Estimate"), [https://www.rand.org/pubs/rgs\\_dissertations/RGSD394.html](https://www.rand.org/pubs/rgs_dissertations/RGSD394.html)



## Professional Affiliations

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2005 – present Member, AcademyHealth  
2013 – 2016 Member, National Academy of Social Insurance

## Professional Activities

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2013 – 2014 Chair, Health Economics Interest Group, AcademyHealth  
2012 – 2013 Governance Board Member, Multi-Payer Claims Database (MPCD)  
2007 – 2015 Committee Member, Health Economics Interest Group, AcademyHealth  
2011 – 2012 Committee Member, Institute of Medicine *ad hoc* Committee on Valuing Community Based, Non-Clinical Prevention Policies and Wellness Strategies.

## Referee

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*Health Affairs*  
*Health Economics*  
*Health Services and Outcomes Research Methodology*  
*Inquiry*  
*Journal of the American Gerontological Society*  
*Journal of Health Economics*  
*Medical Care*

## Awards and Honors

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2020 Health Innovation Award, Employers' Forum of Indiana  
2017 RAND President's Innovation Award and Gold Medal Award (for leading the development of PADSIM)  
2013 Health Services Research's "Best of the AcademyHealth Annual Research Meeting" (Bond and White, "Massachusetts Coverage Expansion ...")  
2010 Director's Award, Congressional Budget Office  
2003 – 2004 National Institute on Aging Post-Doctoral Fellowship  
2001 – 2003 National Institute on Aging Pre-Doctoral Fellowship  
1999 – 2001 Agency for Healthcare Research and Quality Pre-Doctoral Fellowship  
1999 Thayer Scholarship, Kennedy School, awarded to one graduating student from each of Harvard's graduate schools in recognition of high academic distinction  
1993 John Harvard Scholarship, awarded to highest GPA group

## Patents

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### *Issued*

White, Chapin. 2017. "Recumbent Bicycle with Direct Underseat Steering." Patent No. 10,435,102 B2, October 8, 2019,  
<https://patentimages.storage.googleapis.com/1b/55/0e/1e5b6249063732/US10435102.pdf>.

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<https://patentimages.storage.googleapis.com/59/36/1d/99f6b0bee6a7f3/US2020058087A1.pdf>.