

# Policy Evaluation - Natural Experiments & the Oregon Medicaid Study

March 18, 2025

## Estimating Treatment Effects Review

- $ATE = Avg_n[Y_i^1 - Y_i^0]$
- $ATE_{est} = Avg_n[Y_i^1 | D_i = 1] - Avg_n[Y_i^0 | D_i = 0]$
- When  $(Y^1, Y^0) \not\perp D$ :

$$ATE_{est} = ATE + \underbrace{\{Avg_n[Y_i^0 | D_i = 1] - Avg_n[Y_i^0 | D_i = 0]\}}_{\text{Selection Bias}} \\ + \underbrace{(1 - \pi)(ATT - ATU)}_{\text{Heterogeneous Treatment Effect Bias}}$$

- $ATE_{est} = \beta_0 + \beta_1 D + \beta_2 X_1 + \beta_3 X_2 + \dots \beta_k X_{k-1} + \varepsilon$

# Natural Experiments to Estimate Treatment Effects

- What is a natural experiment?

# Natural Experiments to Estimate Treatment Effects



VS.



**EXPERIMENTAL GROUP**

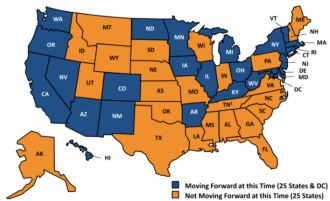


**CONTROL GROUP**



# Natural Experiments to Estimate Treatment Effects

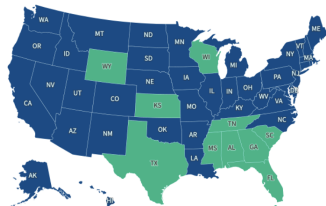
## Status of State Medicaid Expansion Decisions, as of October 24, 2013



SOURCES: State decisions on the Medicaid expansion as of October 24, 2013. Based on data from the Centers for Medicare and Medicaid Services, available at: <http://www.medicare.gov/fftopublicaccess/medicaid-choices-forward-2014/medicaid-and-chose-eligibility-levels/medicaid-choices.html> as of October 24, 2013.

## Status of State Action on the Medicaid Expansion Decision

■ Adopted and implemented (41 states including DC) ■ Not adopted (10 states)



Source: KFF tracking and analysis of state actions related to adoption of the ACA Medicaid expansion • Get the data • Download PNG

# Natural Experiments to Estimate Treatment Effects

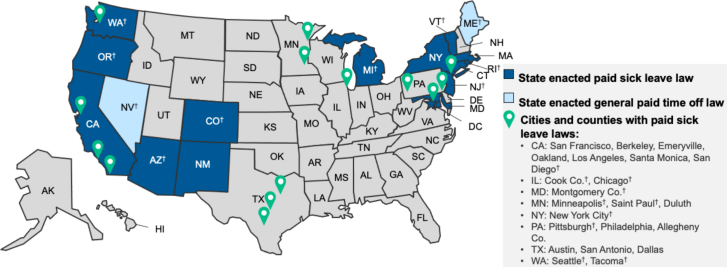


SOURCE: U.S. Geological Survey photo, May 2002

JOHN DUCHNESKIE / Inquirer Staff Artist

# Natural Experiments to Estimate Treatment Effects

## State and Local Paid Sick Leave Laws, 2021



†Law permits use of accrued leave for workplace closure or closure of the worker's child's school or childcare associated with a public health emergency.  
NOTES: NM's law takes effect July 1, 2022. CO's law for employers with fewer than 16 workers takes effect Jan. 1, 2022; currently in effect for all other CO employers. Allegheny Co.'s law was enacted in Sept. 2021 and will take effect 90 days after the county posts compliance information for employers. The three local laws passed in TX are on hold due to a pending court challenge. All other state and local laws are currently in effect. All state and all local paid sick leave laws except Pittsburgh, Oakland, and Berkeley permit use of paid leave for reasons associated with sexual assault, domestic violence, or stalking, known as "safe time."  
SOURCE: KFF analysis of state paid family and medical leave laws; A Better Balance. [Overview of Paid Sick Time laws in the United States](#)



THE NEW ENGLAND JOURNAL OF MEDICINE

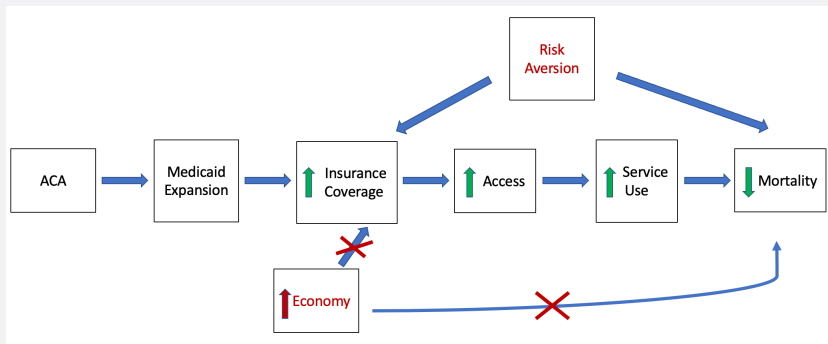
SPECIAL ARTICLE

### Cancer Screening after the Adoption of Paid-Sick-Leave Mandates

Kevin Callison, Ph.D., Michael F. Pesko, Ph.D., Serena Phillips, Dr.P.H., and Julie A. Sosa, M.D.

## Natural Experiments to Estimate Treatment Effects

- Why are natural experiments valuable when estimating treatment effects?





# Oregon Health Study

- Oregon Medicaid

# Oregon Health Study

- Oregon Medicaid
  - ▶ Oregon Health Plan Plus (OHP Plus) - coverage for categorically eligible.
  - ▶ Oregon Health Plan Standard (OHP Standard) - coverage for adults ages 19-64 with income < FPL and assets below \$2k.

# Oregon Health Study

- Oregon Medicaid
  - ▶ Oregon Health Plan Plus (OHP Plus) - coverage for categorically eligible.
  - ▶ Oregon Health Plan Standard (OHP Standard) - coverage for adults ages 19-64 with income < FPL and assets below \$2k.
- OHP Standard enrollment:
  - ▶ 2002: 110k
  - ▶ 2004: Closed to new enrollment
  - ▶ 2008: 19k

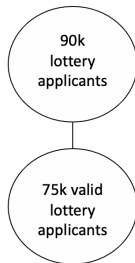
## Oregon Health Study

- Oregon Medicaid
  - ▶ Oregon Health Plan Plus (OHP Plus) - coverage for categorically eligible.
  - ▶ Oregon Health Plan Standard (OHP Standard) - coverage for adults ages 19-64 with income < FPL and assets below \$2k.
- OHP Standard enrollment:
  - ▶ 2002: 110k
  - ▶ 2004: Closed to new enrollment
  - ▶ 2008: 19k
- Expand OHP Standard enrollment by 10k in 2008.
  - ▶ 90k people applied

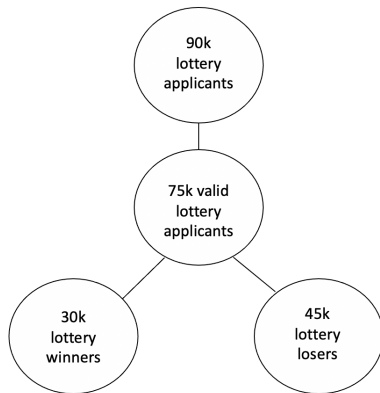
# Oregon Health Study



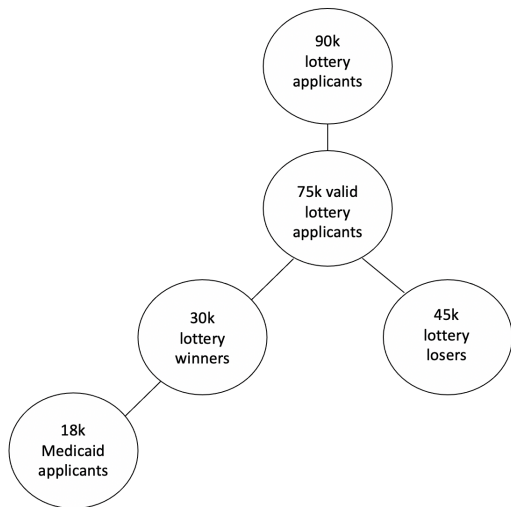
# Oregon Health Study



## Oregon Health Study

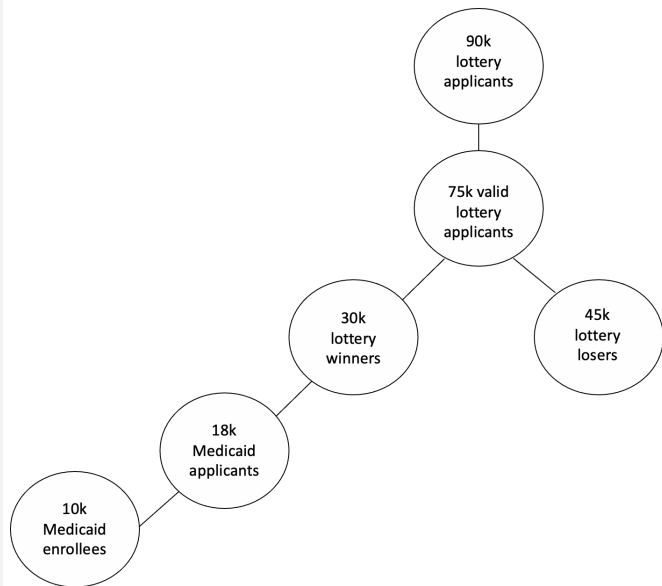


# Oregon Health Study

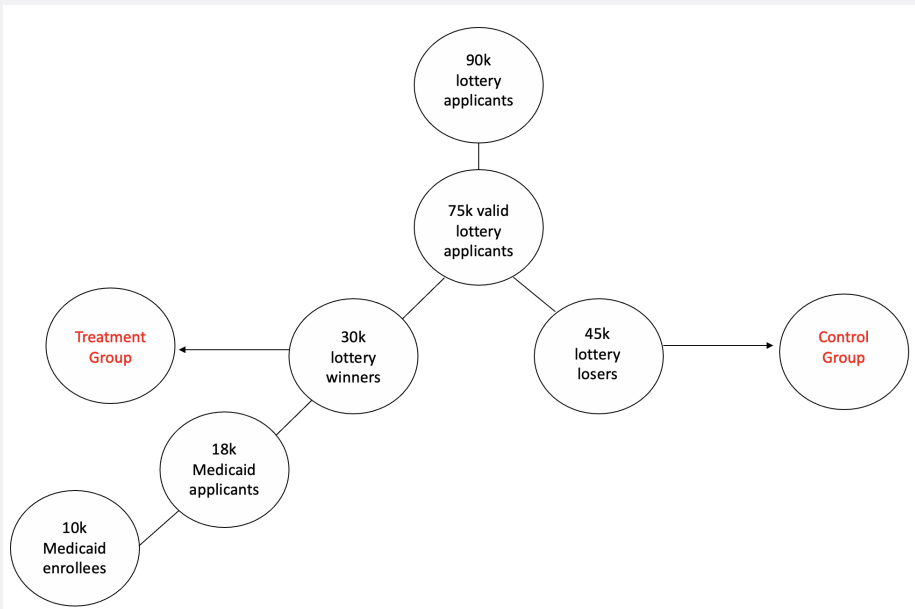




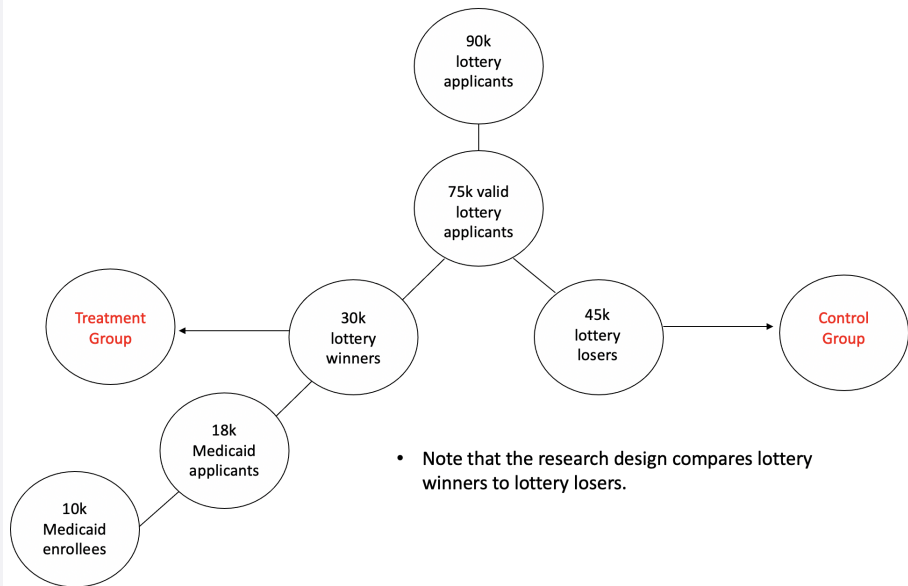
# Oregon Health Study



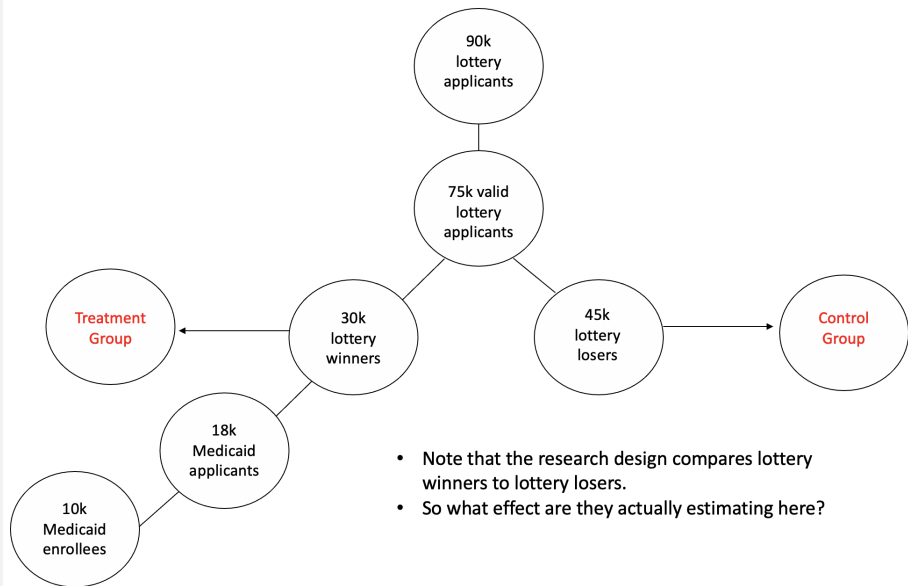
# Oregon Health Study



# Oregon Health Study



# Oregon Health Study



## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.
  - ▶ So the ITT estimate should *understate* the true effect of gaining Medicaid coverage on health.



## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.
  - ▶ So the ITT estimate should *understate* the true effect of gaining Medicaid coverage on health.
- Why didn't the researchers focus on the effect of gaining Medicaid coverage instead of the ITT effect?

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.
  - ▶ So the ITT estimate should *understate* the true effect of gaining Medicaid coverage on health.
- Why didn't the researchers focus on the effect of gaining Medicaid coverage instead of the ITT effect?
- Treatment-on-the-treated effect (TOT): The effect of gaining Medicaid coverage on health.

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.
  - ▶ So the ITT estimate should *understate* the true effect of gaining Medicaid coverage on health.
- Why didn't the researchers focus on the effect of gaining Medicaid coverage instead of the ITT effect?
- Treatment-on-the-treated effect (TOT): The effect of gaining Medicaid coverage on health.
  1. Divide the ITT by the share of lottery winners gaining coverage.

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.
  - ▶ So the ITT estimate should *understate* the true effect of gaining Medicaid coverage on health.
- Why didn't the researchers focus on the effect of gaining Medicaid coverage instead of the ITT effect?
- Treatment-on-the-treated effect (TOT): The effect of gaining Medicaid coverage on health.
  1. Divide the ITT by the share of lottery winners gaining coverage.
    - Recall the EconTalk discussion of "prudence".

## Oregon Health Study

- Intent-to-treat effect (ITT): The effect of winning the lottery on health.
  - ▶ But only 10k of the 30k lottery winners actually enrolled in Medicaid.
  - ▶ Randomization does not imply compliance.
  - ▶ So the ITT estimate should *understate* the true effect of gaining Medicaid coverage on health.
- Why didn't the researchers focus on the effect of gaining Medicaid coverage instead of the ITT effect?
- Treatment-on-the-treated effect (TOT): The effect of gaining Medicaid coverage on health.
  1. Divide the ITT by the share of lottery winners gaining coverage.
    - Recall the EconTalk discussion of "prudence".
  2. Instrumental variables estimate of the local average treatment effect (LATE).

## Oregon Health Study

- **Instrumental Variables - Two-stage least squares**
- First stage:  $Insurance_i = \alpha_0 + \alpha_1 Lottery_i + \varepsilon_i$
- Second stage:  $Health_i = \beta_0 + \beta_1 \hat{Insurance}_i + \varepsilon_i$

- **Instrumental Variables - Two-stage least squares**
- First stage:  $Insurance_i = \alpha_0 + \alpha_1 Lottery_i + \varepsilon_i$
- Second stage:  $Health_i = \beta_0 + \beta_1 \hat{Insurance}_i + \varepsilon_i$
- Intuition:
  - ▶ *Actual* insurance coverage is subject to omitted variable bias (“prudence”).
  - ▶ *Predicted* coverage only depends on the lottery outcome.

- **Instrumental Variables - Two-stage least squares**
- First stage:  $Insurance_i = \alpha_0 + \alpha_1 Lottery_i + \varepsilon_i$
- Second stage:  $Health_i = \beta_0 + \beta_1 \hat{Insurance}_i + \varepsilon_i$
- Intuition:
  - ▶ *Actual* insurance coverage is subject to omitted variable bias (“prudence”).
  - ▶ *Predicted* coverage only depends on the lottery outcome.
- Caveats:



- **Instrumental Variables - Two-stage least squares**

- First stage:  $Insurance_i = \alpha_0 + \alpha_1 Lottery_i + \varepsilon_i$

- Second stage:  $Health_i = \beta_0 + \beta_1 \hat{Insurance}_i + \varepsilon_i$

- Intuition:

- ▶ *Actual* insurance coverage is subject to omitted variable bias (“prudence”).
- ▶ *Predicted* coverage only depends on the lottery outcome.

- Caveats:

- ▶ Exclusion restriction: The effect of winning the lottery on health only operates through gaining Medicaid coverage.

- **Instrumental Variables - Two-stage least squares**

- First stage:  $Insurance_i = \alpha_0 + \alpha_1 Lottery_i + \varepsilon_i$

- Second stage:  $Health_i = \beta_0 + \beta_1 \hat{Insurance}_i + \varepsilon_i$

- Intuition:

- ▶ *Actual* insurance coverage is subject to omitted variable bias (“prudence”).
- ▶ *Predicted* coverage only depends on the lottery outcome.

- Caveats:

- ▶ Exclusion restriction: The effect of winning the lottery on health only operates through gaining Medicaid coverage.
- ▶ LATE: those who obtain insurance after winning the lottery and who would not have obtained insurance without winning the lottery.

- **Instrumental Variables - Two-stage least squares**

- First stage:  $Insurance_i = \alpha_0 + \alpha_1 Lottery_i + \varepsilon_i$

- Second stage:  $Health_i = \beta_0 + \beta_1 \hat{Insurance}_i + \varepsilon_i$

- Intuition:

- ▶ *Actual* insurance coverage is subject to omitted variable bias (“prudence”).
- ▶ *Predicted* coverage only depends on the lottery outcome.

- Caveats:

- ▶ Exclusion restriction: The effect of winning the lottery on health only operates through gaining Medicaid coverage.
- ▶ LATE: those who obtain insurance after winning the lottery and who would not have obtained insurance without winning the lottery.
  - How does this distinction between ITT and TOT/LATE relate to the concept of external validity?