

## EMILIA SIMEONOVA

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Economics Department  
Columbia University  
420 W 118 St., 1022 IAB  
New York, NY 10027

e-mail: [es2085@columbia.edu](mailto:es2085@columbia.edu)  
Tel: +1 917 207 9669  
<http://www.columbia.edu/~es2085>

### EMPLOYMENT

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August, 2008      Assistant Professor, Institute for International Economic Studies,  
Stockholm University

### EDUCATION

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2008      Ph.D. with distinction, Economics, Columbia University  
2005      M.Phil. Economics, Columbia University  
2004      M.A. Economics, Columbia University  
2002      B.A. Mathematics and Economics, Macalester College, summa cum laude

### RESEARCH

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#### **Doctors, Patients, and the Racial Mortality Gap: What Are the Causes?**

Abstract: Disparities in health outcomes between white and minority Americans are a significant and well documented challenge in improving equity in healthcare. Two frequently cited explanations are discrimination in treatment - doctors treating minority patients differently, and unequal access to care - patients being trapped in facilities of inferior quality. I use a new dataset from the Department of Veterans Affairs and employ a novel estimation strategy to investigate the sources of the racial gap in mortality for chronic heart disease, the most expensive chronic condition in the elderly. I find that racial differences in mortality persist even when the quality of clinics and doctors is controlled for. Investigating the doctor-patient interaction, I show that doctor quality significantly influences patient outcomes. While minority patients visit slightly less competent doctors, this does not explain the large gap in survival. Individual doctors are found to treat their patients similarly regardless of race. On the patient side, I demonstrate that variation in compliance triggers a racial mortality gap. Differences in patient response to treatment significantly alter survival probabilities. Considerable reductions in medical costs could be achieved by convincing patients of the importance of strictly following the therapy regimen. I estimate that targeting compliance patterns could reduce the black-white mortality gap by at least two-thirds.

#### **In Sickness and in Health: How Does Marriage Affect Survival in the Chronically III?**

Abstract: The positive association between longevity and marriage has been noted long ago. Cross-sectional and longitudinal studies have established that married males live longer than those living without a spouse. However, little is known about the mechanisms underlying this fact and there has been no previous work on estimating the effect of marriage in an elderly population. This study offers a first glimpse into the association between marriage and mortality in the elderly controlling for co-existing medical conditions. The effect of marriage on health behavior and the received quality of care is examined using a unique record of doctor-patient encounters and patient responses to therapy. I find that having a spouse has a positive effect on

the continuity of care and the quality of care received. Finally, this paper offers some evidence on the causal effects of losing a spouse on mortality in elderly males.

### **What Happens When Charity Care Requirements Expire? Evidence from Hill-Burton Hospitals in Florida** (with Douglas Almond and Janet Currie)

**Abstract:** Governments have tried various strategies to give incentives to private entities to increase their charitable contributions. Health has traditionally been an area in which charity has been expected, but also hard to prompt by public policy. In this paper we use the expiration of charity care requirements imposed on private hospitals to investigate the effect on hospitals' admission practices and maternal and infant health. We use the universe of births in Florida between 1979 and 2003 together with hospital data from the American Hospital Association to construct a rich dataset that allows us to examine a number of outcomes. Private hospitals quickly moved away from their charity caseloads and took on a different pool of patients after the expiration of uncompensated care obligations. During the years under obligation private facilities "cream skimmed" lower-risk patients among the indigent population.

### **Do Electronic Patient Record Systems Improve the Quality of Health Care?**

**Abstract:** A great deal has been said about the anticipated positive effects of an electronic patient records system, however there are no studies that demonstrate evidence of its impact. While still a novelty in the private health care sector, computerized patient records have been in use in the Veterans Health Administration medical centers for a decade. In this paper I use a unique dataset of patients suffering from chronic heart failure and their interactions with physicians to investigate the effect of the electronic patient records system on doctors' and patients' behavior and ultimately on patients' health outcomes. The system was implemented across the national network of medical centers between 1995 and 2005. The differential timing of the implementation is used for identification. Preliminary evidence suggests that electronic records improved physicians' compliance with clinical guidelines and had a positive effect on patients' survival.

### **Racial Disparities in Health Care: Evidence from the Veterans Health Administration**

## **PUBLICATIONS**

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**"Choice of Currency in Bond Issuance and the International Role of Currencies"** with Cristina Vespro and Nikolaus Siegfried, European Central Bank Working Paper 814

## **TEACHING**

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Columbia University, New York, NY

2007	<b>Instructor</b> , Mathematics Review for Executive Masters of Public Administration program, School of International Affairs
2007	<b>Teaching Assistant</b> , Global Economic Environment, EMBA class
2004 - 2005	<b>Teaching Assistant</b> , Macroeconomics, undergraduate class
2003	<b>Teaching Assistant</b> , Political Economy, undergraduate class

Macalester College, St. Paul, MN

2002                    **Teaching Assistant**, Combinatorics, undergraduate class  
 2001                    **Teaching Assistant**, Econometrics, undergraduate class

### **HONORS**

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2006, 2007            Wueller Award, Best Pre-dissertation Proposal  
 2005-2006            Columbia University Dissertation Fellowship  
 2005, 2006            Program for Economic Research: summer fellowship  
 2005                    Runner-up, Wueller Third Year Research Proposal Prize  
 2002-2005            Graduate Fellowship, Columbia University  
 2002                    Macalester College, Excellence in Mathematics award  
 2002                    Phi Beta Kappa

### **ACADEMIC PRESENTATIONS**

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Invited Presentations (non job market)

2008                    NBER Summer institute Health Economics  
 2008                    American Society of Health Economists Meetings (Duke University)  
 2008                    NSF-DFG conference on "Contextualizing Economic Behavior"

Other

2008                    Wharton Business School, Duke University, Washington University St. Louis, UC Merced, University of Notre Dame, University of Houston, University of British Columbia, Emory University  
 2007                    Population Association of America Annual Meeting, New York, NY (poster session)  
 2007                    Center for Health Equity Research and Promotion, Philadelphia, PA  
 2004                    European Central Bank (weekly research seminar), Frankfurt, Germany