Nick Grasley

Stanford University Department of Economics 579 Jane Stanford Way Stanford, CA 94305 ngrasley@stanford.edu nickgrasley.github.io (971) 720-7574

EDUCATION Ph.D. in Economics, Stanford University

B.S. in Economics, Brigham Young University B.S. in Mathematics, Brigham Young University

In progress 2019

REFERENCES Neale Mahoney (Primary)

Trione Director of SIEPR
TG Wijaya Prof. of Economics
Dept. of Economics, Stanford University
nmahoney@stanford.edu

Caroline Hoxby

Scott & Donya Bommer Prof. in Economics Dept. of Economics, Stanford University

choxbv@stanford.edu

Luigi Pistaferri

The Ray Lyman Wilbur Prof. of Economics Dept. of Economics, Stanford University pista@stanford.edu

RESEARCH FIELDS Public, Labor

Working

The Insurance Value of Federal Rental Assistance

PAPERS Job Market Paper

Abstract: Each year, the U.S. federal government spends \$48 billion providing large rental subsidies to a relatively small share of low-income households, many of whom wait years to receive assistance. Unlike other safety net programs, rental assistance uniquely subsidizes households when area rents rise or when household income falls, smoothing the share of income spent on rent. Motivated by this design and the high fixed costs of adjusting housing consumption, I conceptualize federal rental assistance as insurance against joint rent-income risk. To analyze this risk, I use the Panel Survey of Income Dynamics (PSID) and rich HUD administrative data, showing that rents exacerbate consumption risk beyond income risk alone. I quantify how rental assistance insures this particular consumption risk using a sufficient statistics framework, finding that rental assistance generates \$1.51 in benefits per dollar of government spending, significantly larger than the previous literature's estimate of \$0.66. I attribute this large insurance value to insuring rent volatility for fixed-income households and insuring income in high-rent locations. Using a structural lifecycle model, I conduct counterfactual analysis that demonstrates that the program's dynamic subsidy design and rationing through waitlists are crucial features that enhance its insurance value.

Do Sports Bettors Need Consumer Protection? Evidence from a Field Experiment with Matthew Brown and Mariana Guido

Abstract: We conduct a field experiment with high-volume sports bettors to study how biases impact sports betting demand and evaluate corrective policy interventions. We find substantial overoptimism about financial returns: the average participant predicts that they will break even, but loses 7.5 cents for every dollar wagered. We also find evidence of self-control problems, though these are quantitatively smaller. Our estimates imply that surplus-maximizing taxes on sports betting are about twice as large as prevailing taxes. Though targeted interventions can improve efficiency relative to uniform taxes, experimental evidence shows that two specific interventions favored by the gambling industry are ineffective.

Aligning Incentives or Gaming the System? The Impact of Insurer-Physician Acquisitions

with Mariana Guido

Abstract: In a healthcare market characterized by agency problems stemming from misaligned incentives between insurers and physicians, vertical integration is increasingly seen as a strategy for aligning incentives between insurers and primary care physicians. Using data from the Colorado All Payers' Claims Data, which includes medical encounters from 2015 to 2019, we analyze the effects of a 2017 insurer-physician acquisition in Colorado, across both Medicare Advantage (MA) and Commercial segments. Our findings reveal that the acquisition led to a substantial increase in diagnosis coding by physicians, resulting in an estimated \$1500 increase in risk-adjusted payments per patient per year from the government to the insurer in the MA segment. Furthermore, we note that the acquisition enables physicians to internalize the costs of their referral decisions, leading to an increase in price sensitivity when referring patients to specialists, which translated to average savings of approximately \$300 per inpatient referral for Commercial beneficiaries. Our study shed light on how insurer-physician integration effectively aligns incentives, increasing MA revenues for the insurer while managing the cost of specialist care.

WORK IN PROGRESS

Misperceptions, Willpower, and the Demand for Talk Therapy with Sarah Bogl, Matthew Brown, Nick Grasley, and Mariana Guido

Abstract: Many people with mental health problems do not seek treatment despite evidence that therapy can improve well-being. Working with a provider of gambling addiction therapy, we conduct a field experiment to measure how behavioral biases impact therapy demand and what interventions may overcome them. We consider two behavioral biases: misperceptions and willpower problems. To study misperceptions, we measure how participants' perceptions of therapy change after attending a session. To study willpower issues, we measure participants' willingness to pay for a commitment device to attend therapy. Lastly, we evaluate the effectiveness of two scalable interventions – financial incentives and text message encouragements – at increasing therapy takeup.

Private Equity's Impact on Primary Care and Medicare

with Mariana Guido

Abstract: Private equity (PE) investment in the U.S. healthcare sector has grown exponentially, raising concerns about its impact on the cost and quality of care. This paper investigates how PE acquisitions alter the behavior of primary care practices (PCPs) and, crucially, explores heterogeneity based on the acquirer's structure. We distinguish between acquisitions by pure financial sponsors and those by PE-insurer joint ventures, which may face conflicting incentives between profit maximization and managing population health costs. We construct a novel national dataset by linking PitchBook data on PE acquisitions from 2006 to 2018 with Medicare fee-for-service claims. Then, we employ a staggered difference-in-differences strategy to compare acquired PCPs to not-yet-acquired PCPs. Using state All-Payer Claims Data (APCD), we will further test for differential effects among Traditional Medicare and Medicare Advantage patients, where insurer-backed owners have stronger incentives to control utilization.

TEACHING EXPERIENCE	Instructor of Record Economic Policy Seminar, Social Insurance & Aging in the U.S.	2025
	Teaching Assistant, Stanford University, Economics Dept. Advanced Topics in Econometrics, Introduction to Financial Decision Making, Economic Policy Seminar	2021-2025
	Teaching Assistant, Brigham Young University, Economics Dept. Intermediate Macroeconomics	2017
RESEARCH EXPERIENCE	Stanford University, Department of Economics Research Assistant to Prof. Neale Mahoney	2020-2021
	Brigham Young University, Department of Economics Research Assistant to Prof. Joseph Price Research Assistant to Prof. Scott Condie	2017-2019 2018-2019
	Notre Dame University, Department of Economics Research Assistant to Prof. Kasey Buckles	2018
FELLOWSHIPS & AWARDS	Bradley Graduate and Post Graduate Fellowship NSF Graduate Research Fellowship, honorable mention NSF Research Experience for Undergraduates Brigham Young University Heritage Scholarship	2025 2019 2018 2012-2019