

# Jonathan Palisoc

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Dept. of Health Management & Policy · University of Michigan · Ann Arbor, MI 48109

## EDUCATION

**University of Michigan** Ann Arbor, MI  
*Ph.D. Candidate, Health Services Organization & Policy (Economics Cognate) exp. 2026*

*Research Interests:* Medicaid and Medicare policy, health care financing, managed care, uncompensated and charity care, high-need populations, payment and delivery reform, medical debt

*Dissertation:* “Administrative Architecture and Medicaid: Essays on Barriers, Burdens, and Bargaining”

**University of California, Berkeley** Berkeley, CA  
*Master of Public Policy (M.P.P.) 2018*

**California Polytechnic State University, San Luis Obispo** San Luis Obispo, CA  
*Bachelor of Science, Quantitative Economics 2013*

## SELECTED GRANTS, HONORS, & AWARDS

Rackham Merit Fellow, University of Michigan	2021–2026
Winner, NAELA Foundation Medicaid Estate Recovery Research Competition	2025
HSR Student Fellow, Institute for Healthcare Policy & Innovation	2023–2024
Finalist, Michigan Health Policy Case Competition	2022
Junior Service Fellow, Agency for Healthcare Research & Quality	2022
Distinguished Service Award, U.S. Department of Health and Human Services	2020
Young Leader Immersion Awardee, Filipino Young Leaders Program (FYLPRO)	2019
Outstanding Graduate Student Instructor (GSI) Award, UC Berkeley	2017, 2018
Superior Success Award, California Legislature for Assembly Bill 85 (2013)	2015
DHCS Academy Leader Award, California Department of Healthcare Services	2014
Dean’s List, California Polytechnic State University San Luis Obispo	2011–2013
Eagle Scout, Boy Scouts of America	2009

## RESEARCH & POLICY PUBLICATIONS

### Publications in peer-reviewed journals

Mueller, L., **Palisoc, J.**, Batlivala, N. et al. [A Novel Intervention for Medicaid Beneficiaries with Complex Needs](#). *Journal of General Internal Medicine* (2025).

### Manuscripts in review

Hoffman GJ, **Palisoc J.** “Medicare’s Rural Floor Wage Index Adjustment: Implications for Health Equity.” Under review.

Tipirneni R, **Palisoc J.** “The Affordable Care Act’s Role in Aging Disparities Before and After Medicare Eligibility.” Under review.

**Palisoc J.** “Fear as a Barrier to Coverage: The Chilling Effect of the Public Charge Rule on Children’s Medicaid Enrollment.” Under review. *Dissertation Paper 1 (Job Market Paper)*.

**Palisoc J.** “Suspended, Not Terminated: Medicaid Coverage Continuity Across the Prison Door.” Under review. *Dissertation Paper 2*.

**Palisoc J.** “Pooling Is Not Enough: Medicaid Drug Purchasing Pools, Pharmacy-Benefit Governance, and Supplemental Rebate Capture.” Under review. *Dissertation Paper 3*.

**Palisoc J.** “Removing the Gate: Medicaid Prior Authorization for Buprenorphine, Prescribing, and Overdose Mortality.” Under review.

**Palisoc J.** “Watching the Workers: Electronic Visit Verification and the Medicaid Home Care Market.” Under review.

### **Working papers**

**Palisoc J.** The Procedural Wedge: How Medicaid Disenrollment Undermined Community Health Center Finances.

**Palisoc J.** Coverage by State Choice: Medicaid Expansions for Undocumented Immigrants and Insurance Coverage.

**Palisoc J.** Medicaid Expansion, Coverage Gains, and Mortality After Prison Release.

**Palisoc J.** From Pregnancy Care to Chronic Care: Multi-Drug Evidence on Medicaid’s 12-Month Postpartum Extension.

**Palisoc J.** Did Losing Medicaid Make People Sicker? State Unwinding Intensity and Adult Health.

**Palisoc J.** The Brakes on the Unwinding: Federal Renewal-Compliance Enforcement and Medicaid Coverage Retention.

**Palisoc J.** Putting Teeth Into Medicaid: State Adult Dental Benefit Expansions and Population-Level Utilization.

**Palisoc J.** A Tale of Two Work Requirements: Why the Aggregate State-Year Question Is Not Testable.

**Palisoc J.** Bans Without Bite: State Spread-Pricing Laws and Medicaid Generic Drug Spending.

**Palisoc J.** When the Office Closes: Administrative Infrastructure, the SSI–Medicaid Linkage, and Medicaid Coverage Among Disabled Adults.

**Palisoc J.** A Contaminated Kink: ACA-Expansion Contamination of FMAP-Kink Regression Designs.

**Palisoc J.** Setup Leaves Public Traces: A Public-Data Linkage Playbook for Medicaid Program Integrity.

**Palisoc J.** Big Money, Small Margin: State-Directed Payments in Medicaid Managed Care and Hospital Finance.

**Palisoc J.** Health Centers as Enrollment Infrastructure: FQHC Capacity and County Uninsurance.

**Palisoc J.** Coverage Before Release: Section 1115 Medicaid Reentry Waivers and Drug Overdose Mortality.

**Palisoc J.** Going It Alone: Oregon’s Healthier Oregon Medicaid Expansion Without Federal Funds.

**Palisoc J.** Coverage Without Citizenship: California’s Medi-Cal Adult Expansion.

**Palisoc J.** When Medi-Cal Recedes: Section 17000 and California’s County Health Care Backstop.

**Palisoc J.** Cradle Equity: State Medicaid Doula Coverage, Birth Outcomes, and Racial Disparities.

**Palisoc J.** Trading Inpatient Beds for Financial Lifelines: Rural Emergency Hospital Conversions and Hospital Margins.

**Palisoc J.** Pricing the Golden Years: Age-Based Adoption Fee Waivers and Shelter Animal Outcomes.

### **Acknowledgments in peer-reviewed publications**

Jacobs PD, Hill SC, Monnet JN. “Newly and Previously Eligible Medicaid Enrollees Differ, but Not in Health Care Expenditures.” *J Health Care Poor Underserved*. 1 Aug 24. doi: 10.1353/hpu.2024.a934299

### **Blog posts, policy briefs, and presentations in other media**

**Palisoc J.** Medicaid Eligibility and Enrollment Bonanza; A Crash Course in Medicaid Financing. Out-of-Pocket Retreat. 2023, 2024.

**Palisoc J.** [With ACA Subsidy Stoppage, What’s Next for California Healthcare?](#) *Berkeley Public Policy Journal*. Published October 19, 2017.

**Palisoc J,** Chen L. [Obamacare Repeal Almost Certain, But Questions Remain.](#) *Berkeley Public Policy Journal*. Published January 20, 2017.

### **PRESENTATIONS & TALKS**

Paper Presentation: “Effects of Medicaid Interstate Drug Purchasing Pools on Supplemental Rebate Capture.” ASHEcon Annual Conference, 2026.

Paper Presentation: “Effects of Medicaid Managed Care Competition on Quality, Spending, and Outcomes.” Cato Health Policy Workshop, 2025.

Paper Presentation: “Fear as a Barrier to Coverage — Public Charge Chilling Effects.” APPAM Annual Conference, 2025.

Paper Presentation: “Fear as a Barrier to Coverage — Public Charge Chilling Effects.” ASHEcon Annual Conference, 2025.

Discussant: “Mortality and Immigration Enforcement: The Case of Secure Communities.” ASHEcon Annual Conference, 2025.

Panel Chair: “Experimenting with Medicaid: Updates from Recent Section 1115 Waivers.” AcademyHealth Annual Research Meeting, 2024.

Discussant: “Characteristics of Patients, Providers, and Managed Care Organizations Participating in Four Medicaid Value-Based Payment Programs.” Lewis AJ. AcademyHealth Annual Research Meeting, 2024.

Panel Chair: “Achieving Payer-FQHC Partnership Success in the Value-Based Environment.” Yuvo Health, 2022.

### **SERVICE AND AFFILIATIONS**

Abstract Reviewer, AcademyHealth Annual Research Meeting — Medicaid, Coverage & Access 2022–2025

Abstract Reviewer, ASHEcon Annual Conference 2023–2025

Ad-hoc Peer Reviewer, *Medical Care Review* 2025–2026

Director & Executive Board Member, Society of Health Policy Young Professionals 2019–2022

Medical Debt and Charity Care Negotiation Volunteer, DollarFor

Inaugural Member, Out-of-Pocket Society

President, UC Berkeley Health Policy Club 2016–2018

Manuscript Reviewer, Michigan Undergraduate Journal of Public Health 2022–2024

Staff Writer, *Berkeley Public Policy Journal* 2016–2018

Member, American Society of Health Economists; AcademyHealth; Association for Public Policy Analysis & Management

## TEACHING EXPERIENCE

<b>Oakland University, School of Public Health</b> <i>Lecturer — PH 5700: Health Management and Policy</i>	Rochester, MI 2023–2026
<b>University of Michigan, Ross School of Business</b> <i>Teaching Assistant — BE 708: Health Care Markets &amp; Public Policy</i>	Ann Arbor, MI 2023–2026
<b>University of Michigan, Ross School of Business</b> <i>Teaching Assistant — BE 562: Growth and Stabilization in the Macroeconomy</i>	Ann Arbor, MI 2023–2025
<b>University of Michigan, Ross School of Business</b> <i>Teaching Assistant — BE 688: Health Policy &amp; Politics Residential in DC</i>	Ann Arbor, MI 2023, 2025
<b>U.S. Department of Health and Human Services</b> <i>Instructor — Data Analysis and Visualization in Excel</i>	Washington, DC 2020
<b>University of California, Department of Political Economy</b> <i>Teaching Assistant — IAS 107: Intermediate Microeconomic Theory</i>	Berkeley, CA 2016–2018
<b>University of California, Department of Political Economy</b> <i>Teaching Assistant — IAS 106: Intermediate Macroeconomic Theory</i>	Berkeley, CA 2016–2018

## RESEARCH EXPERIENCE

<b>NY Medicaid Fraud Task Force</b> <i>Contractor</i>	Remote April 2026
<ul style="list-style-type: none"><li>• Built a public-data Medicaid fraud analytic workflow screening a 3,563-NPI New York provider cohort across home care/CDPAP, SADC, LHCSA/CHHA, NEMT, DME, and SNF-family service categories using provider-spending, NPPES, sanctions, corporate, litigation, property, and web-footprint records</li><li>• Produced ranked investigative referral packets, validation logs, red-team audit materials, reproducible workbooks, and methodology documentation to distinguish public-data review signals from findings requiring claims-level or subpoena-based verification</li></ul>	
<b>Institute for Healthcare Policy &amp; Innovation</b> <i>Doctoral Researcher</i>	Ann Arbor, MI 2023–2025
<ul style="list-style-type: none"><li>• Head researcher, coder, and modeler for NIH R01 grant: “The Affordable Care Act’s Role in Aging Disparities Before and After Medicare”</li><li>• Utilized American Communities Survey, Health and Retirement Survey, and Current Population Survey to construct interrupted time series and event-study triple-difference models; estimated causal effects of the ACA on health equity and coverage for the 50–64 aged population</li><li>• Head researcher for grant examining effects of Medicare’s rural floor wage index policy and switching between Medicare Advantage and traditional Medicare on persons with dementia</li></ul>	
<b>Agency for Healthcare Research &amp; Quality</b> <i>Research Intern</i>	Woodlawn, MD 2023
<ul style="list-style-type: none"><li>• Conducted research for the Center for Financing, Access, and Cost Trends using the Medical Expenditure Panel Survey and National Health Interview Survey to examine differences in health status and health risk between Medicaid and Marketplace enrollees</li></ul>	
<b>UC Berkeley Goldman School of Public Policy</b> <i>Research &amp; Policy Consultant</i>	Berkeley, CA 2017–2018
<ul style="list-style-type: none"><li>• “CA County Spending Effects: Behavioral Health &amp; Reducing Recidivism’: Original research for the California Behavioral Health Directors’ Association; analyzed spending allocation effects on behavioral health outcomes, recidivism, and downstream costs</li><li>• “An Analysis of Community Outreach Methods and Their Effectiveness on CalEITC Claim-</li></ul>	

ing’’: Original research for the California Department of Community Services & Development; used county-reported data and regressions to determine most effective outreach methods for the California Earned Income Tax Credit

**UC Berkeley Labor Center**

Berkeley, CA

*Graduate Student Researcher*

2017

- Original research; head analyst & modeler for center publication on effects of Republican ACA repeal-and-replace healthcare proposals
- Prepared Medi-Cal data and literature reviews for the California Legislature and public stakeholders

**University of California, San Francisco — Institute for Health Policy Studies**

San Francisco, CA

*Research Assistant*

2017

- Provided research assistance for A. Gaffney paper 'The Effect of Large-scale Health Coverage Expansions in Wealthy Nations on Society-Wide Healthcare Utilization' and JG Kahn paper 'Lowering prescription drug costs in the US: Why prices are high and potential policy interventions'
- Led research constructing a model projecting the effect of a US transition to single-payer on household spending

**Cal Poly San Luis Obispo, Economics Department**

San Luis Obispo, CA

*Capstone Researcher*

2012–2013

- “Lessons for the Affordable Care Act: Finding Difference-in-Differences from the Massachusetts Health Reform’’: Original research using DiD methodology with Massachusetts health reform to project effects of the ACA on health spending per capita, copays, and ER utilization

**RELATED PROFESSIONAL EXPERIENCE**

**California Health Benefits Review Program**

Remote

*Cost Lead*

2026–Present

- Serve as Medicaid and CA health policy subject matter expert for FY 2026 legislative year; analyze the financial impact of proposed health insurance legislation for the California Legislature using a cost model to provide independent, data-driven cost estimates

**North Carolina Dept. of Health and Human Services**

Remote

*Senior Policy Advisor*

2025–Present

- Advise Medicaid executive team including Chief Actuary and Medicaid Director on H.R. 1 (OBBBA) implementation, provider taxes, state directed payments, 1115 waivers, regulatory effect support, and impact modeling/evaluation

**17a**

Remote

*Consultant*

2024–Present

- Assisted in development and implementation of a major state’s \$8 billion Medicaid 1115 waiver amendment
- Developed strategies for state implementation of screening, enrollment, delivery, and tracking of Health-Related Social Needs (HRSN) services, and policy analysis for transition to a total cost-of-care model (AHEAD)
- Developed modeling, policy response, and briefing material for financial implications of proposed Community Engagement requirements on providers
- Advised on reformation of a large state’s pharmacy benefit for Medicaid, including pooling with other state public agencies, interstate Medicaid pools, and implementation of novel rebate negotiating methods, a uniform preferred drug list, and formulary construction; gen-

erated \$200M+ in annual savings

**Center for Medicare and Medicaid Services**

Woodlawn, MD

*PhD Intern*

2023

- Subject matter expert on Medicaid financing; drafted Medicaid 1115 waiver demonstration amendment Special Terms and Conditions and evaluation designs for New York, California, and Massachusetts, totaling more than \$10 billion in federal funds
- Drafted new substance use disorder and mental health disorder monitoring guidelines for states

**U.S. Department of Health and Human Services, Office of the Secretary** Washington, DC

*Medicaid Policy & Budget Analyst — Assistant Secretary for Financial Resources* 2019–2021

- Headed the Medicaid financing portfolio, coordinating HHS analysis on Medicaid managed care, telehealth, DSH, state financing, territories & tribal financing, 1115 waivers, drug pricing and rebates, Medicaid apportionment, and baseline
- Personally wrote waiver updates, analysis, and tracking for HHS Secretary’s daily briefing book
- Coordinated the budget process from policy formulation at CMS to OMB/White House submission, including congressional justifications
- Represented the Assistant Secretary and Office of Budget for all comments/revisions to Medicaid proposed and final regulations, 1115 waiver applications, CMMI models, budget scoring, draft legislation, and all guidance including State Medicaid Director Letters

**Center for Medicare and Medicaid Innovation**

Woodlawn, MD

*Economist*

2019

- Designed, conducted, and performed studies on economic issues related to CMMI models (Oncology Care Model, Comprehensive Care for Joint Replacement Model, Medicaid Maternal Mortality Model, Bundled Payments)
- Personally wrote the initial Innovation Center Investment Proposal (ICIP) for the Transforming Maternal Health (TMaH) model
- Designated by leadership as the “bridge” between executive policy and research/evaluation teams; distilled academic research into actionable insights
- Analyzed claims, Part D, and expenditure data from major CMS data warehouses to inform policy decisions and model development

**California Association of Public Hospitals & Health Systems**

Oakland, CA

*Senior Policy & Finance Analyst*

2018–2019

- Developed policy, financial, and operational initiatives for all 22 of California’s public safety net systems; executed legislative initiatives and built relationships with California state leadership and health executives
- Led “big data” team: encounter data & Medicaid/Medicare cost report analysis, regulatory analysis of Medicare and Medicaid payment policy, 340B drug policy, research of Medicaid incentive payment and value-based models (APMs)

**Office of Assemblymember David Chiu, 17th District**

Sacramento, CA

*Consultant for the Select Committee on Health Reform*

2017

- Advised Asm. Chiu on policy matters; drafted and advanced a package of 13 reform bills including drug pricing
- Led meetings with legislators and stakeholders; presented original material to advance health reform

**Kaiser Permanente**

Oakland, CA

*Master’s Intern, Health Policy*

2017

- Served under the Government Relations team at Kaiser Permanente’s program offices, assisting in advocacy for commercial and Medicare cost controls, fair Medicare Advantage regulations, and Medicare Advantage reimbursement
- Stretch Project: “Emerging Health Risk Trends for the Millennial Generation and Gen X”

**California Department of Health Care Services**

Sacramento, CA

*Health Program Specialist — Office of the Director*

2013–2016

- Sole direct report to the California Medicaid Director and her Deputy Director team; managed and coordinated multiple high-priority projects across competing deadlines
- Led discussions with CA Legislature, CMS leadership, CFOs of county hospital systems, county executives, and consulting entities
- Led policy and financial analysis of California’s 1115 Waiver; personally developed and oversaw budget neutrality calculations
- Crafted data analyses and position papers for legislative/CMS negotiations on the MCO tax, Hep C drug spending, and coverage expansion
- Lead coordinator for the Department’s 32 divisions on CMS’ 2017 Medicaid Managed Care Mega-regulation, drug inflation rebate legislation, FQHC payment reform pilot, and capitated rate and delivery system incentive payment innovation

**REFERENCES**

**Andrew M. Ryan, Ph.D.**

Dept. of Health Services, Policy, & Practice  
Brown University  
[andrew\\_m\\_ryan@brown.edu](mailto:andrew_m_ryan@brown.edu)

**Sarah Miller, Ph.D.**

Ross School of Business  
University of Michigan  
[mille@umich.edu](mailto:mille@umich.edu)

**Richard Hirth, Ph.D.**

Dept. of Health Policy & Management  
University of Michigan  
[rhirth@umich.edu](mailto:rhirth@umich.edu)

**Tom Buchmueller, Ph.D.**

Ross School of Business  
University of Michigan  
[tbuch@umich.edu](mailto:tbuch@umich.edu)

**Renuka Tipirneni, M.D., M.Sc.**

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University of Michigan  
[rtipirne@umich.edu](mailto:rtipirne@umich.edu)