Online Appendix Table 1: Diff-in-Diff Specification with and without Direct Deposit Control

Dependent variable: Logarithm of ED visits for all adults

	(1)	(2)
After Check Sent	0.013	0.011
	(0.003)	(0.004)
	[0.005]	[0.036]
After Direct Deposit		0.012
		(0.015)
		[0.429]

Note: This table reports estimates from difference-in-difference regressions. In each case the sample consists of counts of CA hospital visits by SSN-group and week, covering 19 weeks before and 23 weeks after the rebates were sent. Full sets of SSN-group fixed effects and week fixed effects are also included in the regressions. The first column includes the first SSN group, the second column does not. N = 9 × (1+19+23) = 387. The standard errors in parantheses adjust for correlation between observations from the same SSN group. Standard errors are in parentheses and p-values are in brackets.

Online Appendix Table 2: The Effect of the Stimulus Payments on Alcohol versus Drugs

Dependent variable: Logarithm of ED visits for the given cause

	(1) Drugs and Alcohol	(2) Drugs	(3) Alcohol
After Check Sent	0.0622	0.0624	0.0615
	(0.0211)	(0.0413)	(0.0255)
	[0.0186]	[0.1695]	[0.0421]
R^2	0.982	0.897	0.979

Note: This table reports estimates from difference-in-difference regressions. In each case the sample consists of counts of CA hospital visits by SSN-group and week, covering 19 weeks before and 23 weeks after the rebates were sent. Full sets of SSN-group fixed effects and week fixed effects are also included in the regressions. N = 9 × (1+19+23) = 387. The standard errors in parantheses adjust for correlation between observations from the same SSN group. Standard errors are in parentheses and p-values are in brackets.

Online Appendix Table 3: The Effect of the Stimulus Payments on ED Visits
Including Digit Pairs 00-09

	(1)	(2)	(3)	(4)	(5)	(6)
			A. Replication of Table 3			
	Visits	Men	Women			
After	0.012	0.011	0.013			
Check	(0.003)	(0.005)	(0.004)			
Sent	[0.005]	[0.045]	[0.021]			
Avg. Visits / Week	116,237	50,156	66,077			
			B. Replication of Table 4			
	Chronic Conditions	Not Chronic Conditions	Drug-Related	Not Drug-Related	Avoidable	Not Avoidable
After	0.012	0.012	0.060	0.010	0.001	0.015
Check	(0.010)	(0.003)	(0.017)	(0.003)	(0.006)	(0.005)
Sent	[0.294]	[0.004]	[0.006]	[0.013]	[0.898]	[0.009]
Avg. Visits / Week	18,098	98,140	4,518	111,719	27,248	88,990
			C. Replication of Table 5			
	Low Income	Middle Income	High Income	Privately Insured	Publicly Insured	Not Insured
After	0.011	0.014	0.015	0.009	0.013	0.014
Check	(0.006)	(0.006)	(0.008)	(0.007)	(0.005)	(0.006)
Sent	[0.108]	[0.039]	[0.092]	[0.213]	[0.022]	[0.060]
Avg. Visits / Week	45,883	61,877	46,286	47,235	46,190	22,812

Note: Each cell presents a regression with the logarithm of ED visits from the given category as the outcome of interest. Panels A, B, and C replicate the ED results in Tables 3, 4, and 5, respectively, while including the first SSN-group with digits 00-09 in the analysis. Full sets of SSN-group fixed effects and week fixed effects are included in the regressions. $N = 10 \times (1+19+23) = 430$. The standard errors in parantheses adjust for correlation between observations from the same SSN group. Standard errors are in parentheses and p-values are in brackets.

Online Appendix Table 4: The Effect of the Stimulus Payments on Hospital Visits, Exponential Decay Model

Dependent variable: Logarithm of given type of visit

	(1) ED	(2) Inpatient
Paper Check		
Effect	0.011	-0.001
	(0.005)	(0.003)
Rate of Decay	0.109	-0.133
	(0.186)	(0.096)
Electronic Funds Transfer		
Effect	-0.002	0.000
	(0.005)	(0.001)
Rate of Decay	-0.121	-1.929
	(0.070)	(0.106)
Constant	9.183	8.562
	(0.013)	(0.016)

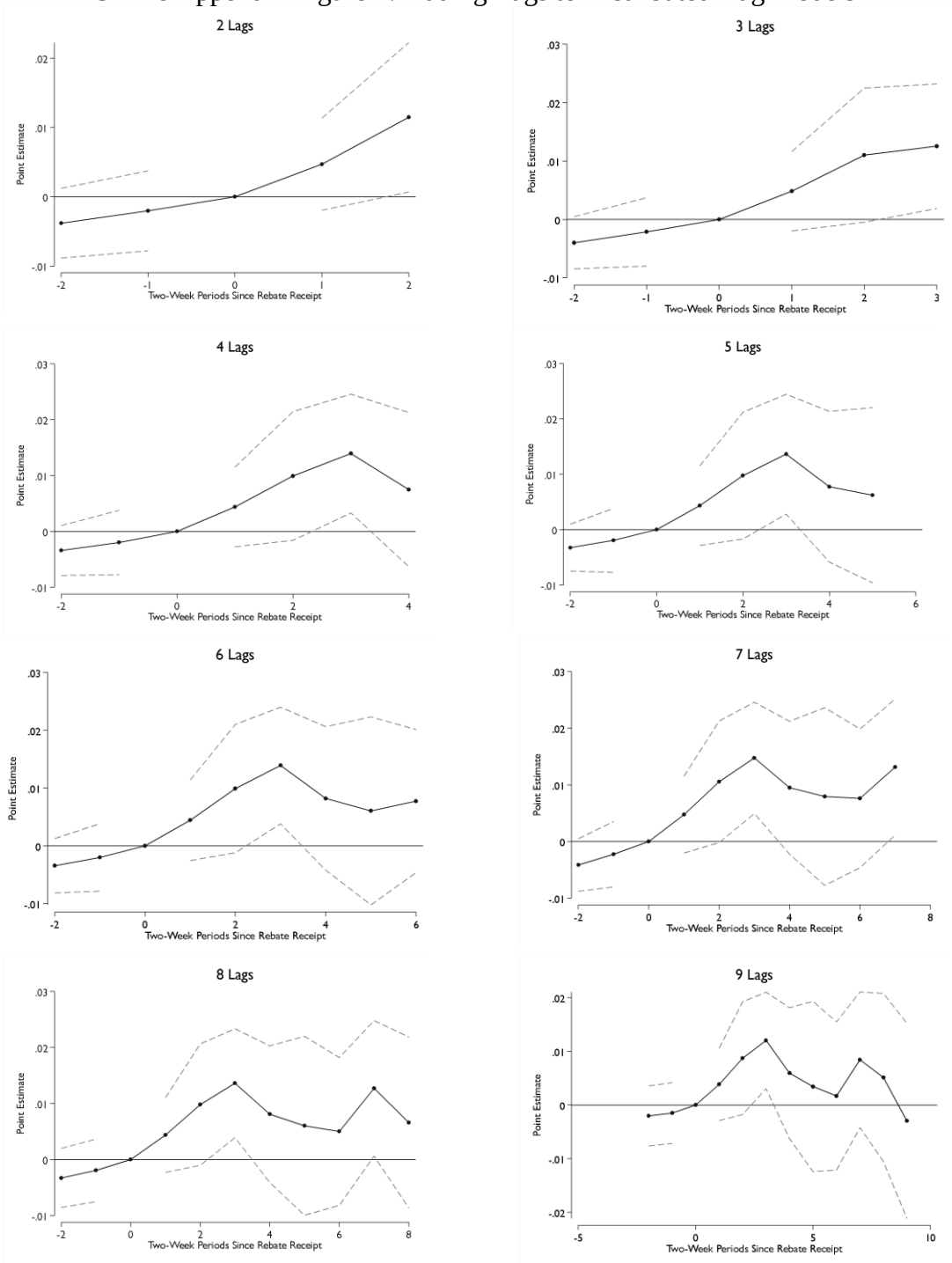
Note: This table reports estimates from nonlinear regressions that allow for responses to the stimulus payments by paper check and electronic funds transfer that decay exponentially. In each case the sample consists of counts of California hospital visits by SSN-group and week, covering 19 weeks before and 23 weeks after the rebates were sent. Full sets of SSN-group fixed effects and week fixed effects are included. $N = 9 \times (1+19+23) = 387$. Standard errors are in parentheses.

Online Appendix Table 5: The Effect of the 2001 Tax Rebates on Health Care Expenditure

	(1) All Health Expenditures	(2) Health Insurance	(3) Medical Services	(4) Prescription Drugs	(5) Medical Supplies	(6) Hospital Room & Meals	(7) Hospital Services	(8) Physician Services	(9) Dental Services	(10) Alcoholic Beverages
Rebate Effect	0.097	0.009	0.067	0.012	0.009	0.012	0.016	-0.010	0.041	0.004
	(0.040)	(0.020)	(0.031)	(0.009)	(0.009)	(0.010)	(0.010)	(0.009)	(0.020)	(0.011)
	[0.014]	[0.633]	[0.031]	[0.166]	[0.345]	[0.229]	[0.118]	[0.273]	[0.043]	[0.729]
Share of Nondurable Expenditure	0.137	0.078	0.029	0.025	0.004	0.001	0.002	0.008	0.012	0.019
Quarterly Expenditure ($)	575.04	298.65	159.22	96.22	20.95	8.20	12.58	36.48	64.49	84.20

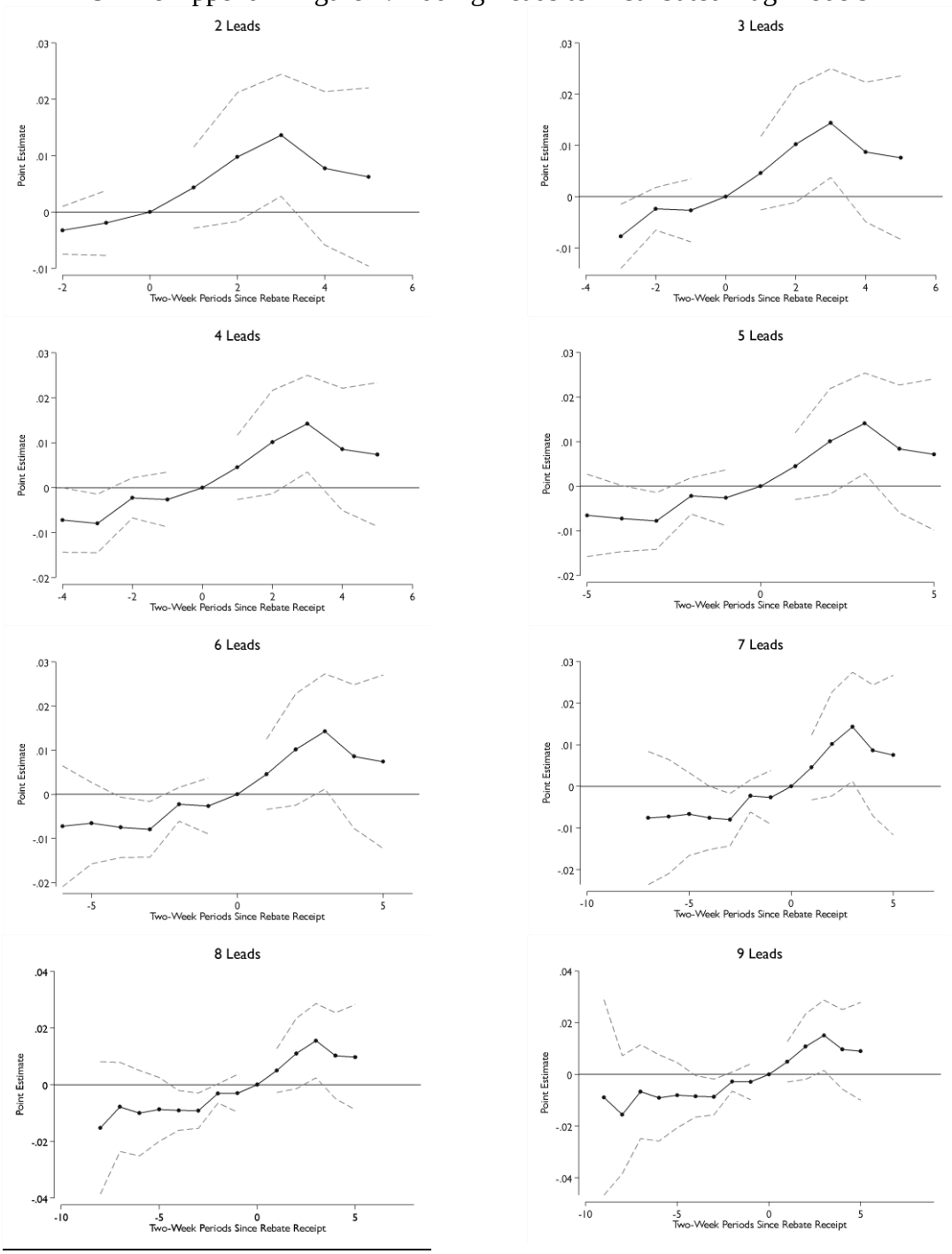
Note: This table presents estimates based on the Consumer Expenditure Survey. The estimates extend specifications reported by Johnson, Parker, and Souleles (2006) to subcategories of health care expenditure. Specifically, each column contains the results from a regression of a change in expenditure on the contemporaneous tax rebate amount, using an indicator for receiving any tax rebate as an exogenous instrument. Thus the Rebate Effect coefficients can be interpreted as marginal propensities to consume in the indicated expenditure categories. The regressions control for age, the change in the number of adults in the household, the change in the number of children in the household, and indicator variables for the month of the survey interview. Column 1 replicates the penultimate column of Table 6 in Johnson, Parker, and Souleles (2006). Columns 2-5 partition Column 1, and Columns 6-9 are components of Column 3. N = 12,370 for the 2001 CEX. Standard errors are in parentheses and p-values in brackets.

Online Appendix Figure 1. Adding Lags to Distributed-Lag Models



Note: Each panel of this figure plots point estimates from a regression of log counts of adult ED visits on different sets of indicators for two-week intervals. The dotted lines plot 95-percent confidence intervals that are robust to autocorrelation between observations from the same SSN group. SSN-group fixed effects, week fixed effects, and an indicator for whether direct deposits had been made are also included in the regressions. The omitted time period is 1 and 2 weeks before rebate checks were sent. Figure 1 is identical to the "6 Lags" panel of this figure.

Online Appendix Figure 2. Adding Leads to Distributed-Lag Models



Note: Each panel of this figure plots point estimates from a regression of log counts of adult ED visits on different sets of indicators for two-week intervals. The dotted lines plot 95-percent confidence intervals that are robust to autocorrelation between observations from the same SSN group. SSN-group fixed effects, week fixed effects, and an indicator for whether direct deposits had been made are also included in the regressions. The omitted time period is 1 and 2 weeks before rebate checks were sent. Figure 1 is identical to the "2 Leads" panel of this figure.