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LEARNING NON-MONOTONE OPTIMAL INDIVIDUALIZED TREATMENT REGIMES

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Abstract: We propose a new modeling and estimation approach that selects an optimal treatment regime by constructing a robust estimating equation. The method is protected against a misspecification of the propensity score model, the outcome regression model for the nontreated group, and the potential non-monotonic treatment difference model. Our method also allows residual errors to depend on the covariates. We include a single index structure to facilitate the nonparametric estimation of the treatment difference. We then identify the optimal treatment by maximizing the value function. We also establish the theoretical properties of the treatment assignment strategy. Lastly, we demonstrate the performance and effectiveness of our proposed estimators using extensive simulation studies and an analysis of a real data set from a study on the effect of maternal smoking on baby birth weight.

Key words and phrases: Double- and multi-robust, optimal treatment regimes, propensity score, value function.
1. Introduction

Individuals sometimes respond differently to the same treatment, owing to between-person heterogeneity. Factors that contribute to such heterogeneity include genetic risk factors, age, and individual-specific environmental exposures. Thus, when different treatment options are available, we need to be able to select the best treatment regime specific to a particular individual, which is one of the goals of precision medicine. Precision medicine aims to determine a strategic assignment of treatments to patients according to their characteristics and medical history. This goal can be achieved by using an individualized treatment rule (ITR), that is, a deterministic function of subject-specific factors that are responsible for patients’ heterogeneous responses to a treatment. The optimal ITR maximizes the expected clinical outcome of interest under the ITR. Furthermore, an optimal dynamic treatment regime usually consists of a set of sequential decision rules applied at a set of decision points. There have recently been significant research developments on estimating optimal treatment regimes. In this work, we focus on estimating an individualized treatment regime at a single decision time point.

Two popular model-based methods used to derive optimal dynamic treatment regimes are quality learning (Q-learning) and advantage learning.
(A-learning). Q-learning (Watkins 1989, Watkins & Dayan 1992, Nahum-Shani et al. 2012, Zhao et al. 2009, 2011, Murphy 2005, Qian & Murphy 2011, Song et al. 2015, Goldberg & Kosorok 2012, Chakraborty et al. 2010) is built on a postulated regression outcome model for the outcome of interest, and is implemented using a backward induction fitting procedure. This approach was initially proposed by Watkins (1989), with a detailed proof of convergence later provided by Watkins & Dayan (1992). The performance of the optimal treatment decision rule obtained using Q-learning depends on the outcome model being specified correctly. A-learning (Murphy 2003, Blatt et al. 2004, Robins 2004, Orellana et al. 2010, Liang et al. 2018) maximizes estimating equations to estimate the contrast functions, using the estimated probability of an observed treatment assignment, given patient information, at each decision point (i.e., treatment propensity scores). Thus, the performance of the optimal treatment decision rule obtained using A-learning relies on having a suitable treatment assignment model.

Another approach, known as the model-free or policy (value) search method (Zhang, Tsiatis, Laber & Davidian 2012, Zhang, Tsiatis, Davidian, Zhang & Laber 2012, Zhao et al. 2012, Jiang, Lu, Song & Davidian 2017, Jiang, Lu, Song, Hudgens & Napravnik 2017), directly derives and maximizes a consistent estimator for the value function over a prespeci-
fied class of treatment regimes indexed by a finite-dimensional parameter, or over a class of nonparametric treatment regimes. For example, Zhang, Tsiatis, Laber & Davidian (2012) formulated an inverse propensity score weighted (IPW) estimator and a doubly robust augmented IPW estimator for a value function with a single decision time point. Later, Zhang et al. (2013) extended this idea to value functions with more than one decision point. Zhang, Tsiatis, Davidian, Zhang & Laber (2012) and Zhao et al. (2012) recast the original problem of finding the optimal treatment regime as a weighted classification problem. The former obtains the optimal treatment regime by minimizing the expected weighted misclassification error, whereas latter uses an outcome-weighted support vector machine. Other relevant works include those of Robins (2004), Foster et al. (2011), Zhao et al. (2013), Matsouaka et al. (2014), Song et al. (2017), Bai et al. (2017), Fan et al. (2017), Shi et al. (2018), and Huang & Yang (2020).

Here, we propose a new modeling and estimation method that can be used to determine the optimal treatment regime at a decision time point, combining the advantages of Q-learning, A-learning, and the model-free approach. In addition, our model has the advantage that it assumes only that the treatment difference is a smooth function of an index of the covariates, without requiring the smooth function to be monotonic. This is
practically important. For example, for a patient with heart disease, low blood pressure and high blood pressure can both increase the risk of a heart attack, resulting in a possible nonmonotonic treatment difference model. Another example is the relationship between BMI and health risks, where underweight and obese individuals both have increased risks of a range of health measures. Our model also allows the model error to be dependent on the covariates, which is important in practice. Furthermore, we consider a multi-robust estimating equation to protect against a misspecified propensity score function, treatment difference model, or outcome regression model for the nontreated group. Benefiting from the smoothness of the treatment difference function, our treatment regime identification rate is $O_p(n^{-2/5})$, which is faster than the existing rate of $O_p(n^{-1/3})$ (Fan et al. 2017), where the treatment difference function is assumed to be monotonic.

The remainder of the paper is organized as follows. In Section 2, we introduce the estimation procedure and the algorithm for our proposed method. Section 3 provides the asymptotic properties of the proposed estimators for $\beta$ and the treatment difference function $Q(\cdot)$. In Section 4, we summarize the finite-sample performance of the estimators for different designs, including well-specified and misspecified models. In Section 5, we demonstrate our method by analyzing a data set on baby birth weight,
where the research interest is to investigate whether maternal smoking during pregnancy affects birth weight. Section 6 concludes the paper.

2. Model and Estimation

We consider the following treatment difference model:

$$Y_{i1} - Y_{i0} = Q(\beta^T X_i) + \epsilon_i,$$  \hspace{1cm} (2.1)

where $Y_{i1}$ is the potential outcome for individual $i$ if a treatment is received, $Y_{i0}$ is the potential outcome for individual $i$ if no treatment is received, $X_i \in \mathcal{R}^{d_\beta}$ is the set of covariates, the treatment difference function $Q(\cdot)$ is an unknown smooth function, and $E(\epsilon \mid X) = 0$, where $\epsilon$ is the model error.

Here, $\beta \in \mathcal{R}^{d_\beta}$ is a vector of unknown parameters and $d_\beta$ is the dimension of $\beta$. Let $A_i$ be the treatment indicator. Our estimation is performed under the following two assumptions, commonly assumed in the literature.

**Assumption 1.** (Stable unit treatment value assumption) $Y_i = Y_{i1}A_i + Y_{i0}(1 - A_i)$.

**Assumption 2.** (No-unmeasured-confounders assumption) $A_i \perp (Y_{i1}, Y_{i0}) \mid X_i$.

For the identifiability of $\beta$, we require $\beta$ to have the form $\beta = (1, \beta_L^T)^T$,.
where the lower sub-vector is an arbitrary vector of length $d_\beta - 1$. If $Y_{i1}$ and $Y_{i0}$ are both available, we can estimate $\beta$ by simultaneously solving
\[
\sum_{i=1}^{n} \left\{ Y_{i1} - Y_{i0} - \tilde{Q}(\beta^T X_i) \right\} \{ X_{Li} - E(X_{Li} \mid \beta^T X_i) \} = 0 \quad \text{and} \quad \sum_{j=1}^{n} K_h (\beta^T X_j - \beta^T X_i) (Y_{j1} - Y_{j0} - c_i) = 0, \quad \text{for } i = 1, \ldots, n.
\]
Here, $X_L$ represents the sub-vector of $X$ formed by its lower $d_\beta - 1$ components and $\tilde{Q}(\beta^T X_i) = c_i$. Note that we use $\tilde{Q}(\beta^T X_i)$ instead of $c_i$ in the first equation to emphasize that it is an estimate of the function $Q(\cdot)$ evaluated at $\beta^T X_i$, for $i = 1, \ldots, n$. Note that $K_h(\cdot) = K(\cdot/h)/h$, where $K(\cdot)$ is a kernel function and $h$ is a bandwidth. However, because we observe only $Y_i$, we can consider an IPW-based estimator (Robins et al. 1994) and modify the above equations to
\[
\sum_{i=1}^{n} \left[ A_i Y_i/\pi(X_i) - (1 - A_i)Y_i/\left\{ 1 - \pi(X_i) \right\} \right] - \tilde{Q}(\beta^T X_i) \} \times \{ X_{Li} - E(X_{Li} \mid \beta^T X_i) \} = 0 \quad \text{and} \quad \sum_{i=1}^{n} K_h (\beta^T X_i - \beta^T X_j) \left[ A_i Y_i/\pi(X_i) - (1 - A_i)Y_i/\left\{ 1 - \pi(X_i) \right\} - c_j \right] = 0, \quad \text{for } j = 1, \ldots, n,
\]
where $\pi(X_i)$ is a known propensity score model. To protect against a misspecified $\pi(X_i)$, we adopt the models $\mu(X_i, \alpha) = E(Y_{i0} \mid X_i)$ and $\pi(X_i, \gamma) = P(A_i = 1 \mid X_i)$, and estimate $\beta$ by modifying the above equations to the following doubly robust augmented version (Robins et al. 1994):
\[
\sum_{i=1}^{n} \left[ \frac{A_i - \pi(X_i, \hat{\gamma})}{\pi(X_i, \hat{\gamma})} \left\{ Y_i - \mu(X_i, \hat{\alpha}) \right\} \right] + \left\{ 1 - \frac{A_i}{\pi(X_i, \hat{\gamma})} \right\} \tilde{Q}(\beta^T X_i) \} \times \{ X_{Li} - E(X_{Li} \mid \beta^T X_i) \} = 0, \quad \text{(2.2)}
\]
and

\[
\sum_{i=1}^{n} K_h (\beta^T X_i - \beta^T X_j) \left[ \frac{(A_i - \pi(X_i, \hat{\gamma})) \{Y_i - \mu(X_i, \hat{\alpha})\}}{\pi(X_i, \hat{\gamma}) \{1 - \pi(X_i, \hat{\gamma})\}} - \frac{A_i}{\pi(X_i, \hat{\gamma})} c_j \right] = 0,
\]

for \( j = 1, \ldots, n \). This relation can be equivalently written as

\[
\tilde{Q}(\beta^T X_j, \beta, \hat{\alpha}, \hat{\gamma}) = \sum_{i=1}^{n} K_h (\beta^T X_i - \beta^T X_j) \frac{(A_i - \pi(X_i, \hat{\gamma})) \{Y_i - \mu(X_i, \hat{\alpha})\}}{\pi(X_i, \hat{\gamma}) \{1 - \pi(X_i, \hat{\gamma})\}} \frac{A_i}{\pi(X_i, \hat{\gamma})} c_j.
\]

Proposition 1. Under the model in (2.1), as long as one of \( \pi(X, \gamma) \) and \( \mu(X, \alpha) \) is correct, then the estimator for \( \beta \) is consistent. In addition, to estimate \( \beta \), we can use a working model for the \( Q(\cdot) \) function that may differ from the true treatment difference function if both \( \pi(X, \gamma) \) and \( \mu(X, \alpha) \) are specified correctly.

The \( \beta \) estimator based on (2.2) is doubly robust with respect to \( \pi(X, \gamma) \) and \( \mu(X, \alpha) \). Following the literature, we consider the parametric models \( \pi(X, \gamma) \) and \( \mu(X, \alpha) \), for simplicity.
data \((X_i, A_i)\), for \(i = 1, \ldots, n\), using, for example, a maximum likelihood estimator (MLE). Similarly, \(\mu(X, \alpha) = E(Y_i \mid X_i, A_i = 0)\), and hence \(\hat{\alpha}\) can be obtained based on the data \((X_i, Y_i)\) for \(i\) where \(A_i = 0\), by, for example, solving generalized estimating equations (GEEs). When solving \((2.2)\) to obtain \(\hat{\beta}\), the choice of bandwidth \(h\) is flexible and can be any positive number, as long as \(n^{-1/2} \ll h \ll n^{-1/4}\). However, once we obtain \(\hat{\beta}\), we estimate \(Q(\cdot)\) using an optimal bandwidth of order \(n^{-1/5}\), which can be obtained using cross-validation. We now describe the algorithm of the estimation procedure in detail.

**Algorithm:**

**Step 1.** Obtain the estimate of \(\gamma, \hat{\gamma}\), using MLE based on the data \((X_i, A_i)\), for \(i = 1, \ldots, n\).

**Step 2.** Extract the observations with \(A_i = 0\). Denote the subset of observations corresponding to \(A_i = 0\) as \((X_i, Y_i^0)\), for \(i = 1, \ldots, n_0\). Use this subset to compute the estimator of \(\alpha, \hat{\alpha}\), by solving the GEEs

\[
\sum_{i=1}^{n_0} W(X_i, \alpha) \{Y_i^0 - \mu(X_i, \alpha)\} = 0,
\]

where \(W(X_i, \alpha)\) is an arbitrary \(d_\alpha \times 1\) matrix of functions of covariates \(X_i\), the parameter \(\alpha \in \mathcal{R}^{d_\alpha}\), and \(d_\alpha\) is the dimension of \(\alpha\).

**Step 3.** Plug \(\hat{\gamma}\) and \(\hat{\alpha}\) into \((2.3)\) and obtain \(\tilde{Q}(\beta^T X_j, \beta, \hat{\alpha}, \hat{\gamma})\).
Step 4. Plug $\hat{\gamma}$, $\hat{\alpha}$, and $\tilde{Q}(\beta^T X_i, \beta, \hat{\alpha}, \hat{\gamma})$ into (2.2) and solve (2.2) to obtain $\hat{\beta}_L$.

Step 5. Select a bandwidth $h_{\text{opt}}$.

Step 6. Obtain $\hat{Q}(\cdot, \hat{\beta}, \hat{\alpha}, \hat{\gamma})$ from (2.3), while plugging in $\hat{\gamma}$, $\hat{\alpha}$, $\hat{\beta}$, and $h_{\text{opt}}$.

In step 5, to estimate $Q(\cdot)$, we need a suitable bandwidth, which we select using leave-one-out cross-validation method. Specifically, we estimate $Q(\cdot)$ by

$$\tilde{Q}_{-j}(\hat{\beta}^T X_j, \hat{\beta}, \hat{\alpha}, \hat{\gamma}) = \frac{\sum_{i=1, i \neq j}^n K_h(\hat{\beta}^T X_i - \beta^T X_j)\{A_i - \pi(X_i, \hat{\gamma})\}Y_i - \mu(X_i, \hat{\alpha})}{\sum_{i=1, i \neq j}^n K_h(\hat{\beta}^T X_i - \beta^T X_j)A_i/\pi(X_i, \hat{\gamma})},$$

where $\tilde{Q}_{-j}(\cdot)$ denotes the estimator with the $j$th observation left out.

Then, we calculate the leave-one-out cross-validated prediction MSE as

$$CV(h) = n^{-1} \sum_{i=1}^n \left( \frac{\{A_i - \pi(X_i, \hat{\gamma})\}Y_i - \mu(X_i, \hat{\alpha})}{\pi(X_i, \hat{\gamma})} - A_i\tilde{Q}_{-i}(\hat{\beta}^T X_i, \hat{\beta}, \hat{\alpha}, \hat{\gamma})/\pi(X_i, \hat{\gamma}) \right)^2,$$

and choose $h$ as the minimizer of $CV(h)$.

Considering that $Q(\beta^T X)$ may be a nonmonotonic function, we denote all regions where $Q(\beta^T X) > 0$ as the treatment region; that is, we assign treatment 1 to an individual if and only if $Q(\beta^T X) > 0$. Obviously, this maximizes the value function, leading to the optimal treatment regime. Specifically, the value function $V\{Q(\cdot), \beta\} = E[Y_{1i} I\{Q(\beta^T X_i) > 0\}]$.
0} + Y_{i0} I\{Q(\beta^T X_i) \leq 0\}] under our identification strategy. Therefore, even if \(Q(\beta^T X)\) has multiple roots, we can still identify the optimal treatment regimes. Note that \(Q(\beta^T X) > 0\) simplifies to \(\beta^T X > 0\) if \(Q(\beta^T X)\) is monotone. Therefore, our strategy \(Q(\beta^T X) > 0\) accommodates both monotone and nonmonotone functions. Thus, once we obtain \(\hat{Q}(\cdot, \hat{\beta}, \hat{\alpha}, \hat{\gamma})\) and \(\hat{\beta}\), we directly identify the optimal treatment regime by assigning treatment 1 if and only if \(\hat{Q}(\hat{\beta}^T X) > 0\). We can further estimate the subsequent maximum value function as

\[
\hat{V}(\hat{Q}(\cdot, \hat{\beta}, \hat{\alpha}, \hat{\gamma})
= n^{-1} \sum_{i=1}^{n} \left[ A_i I(\hat{Q}(\hat{\beta}^T X_i, \hat{\beta}, \hat{\alpha}, \hat{\gamma}) > 0) + (1 - A_i) I(\hat{Q}(\hat{\beta}^T X_i, \hat{\beta}, \hat{\alpha}, \hat{\gamma}) \leq 0)\right] Y_i
+ n^{-1} \sum_{i=1}^{n} \left\{ \pi(X_i, \hat{\gamma}) - A_i \right\} \left[ \frac{\mu(X_i, \hat{\alpha}) + \hat{Q}(\hat{\beta}^T X_i, \hat{\beta}, \hat{\alpha}, \hat{\gamma})}{\pi(X_i, \hat{\gamma})} I(\hat{Q}(\hat{\beta}^T X_i, \hat{\beta}, \hat{\alpha}, \hat{\gamma}) > 0) \right]
- \frac{\mu(X_i, \hat{\alpha}) - A_i}{\pi(X_i, \hat{\gamma})} I(\hat{Q}(\hat{\beta}^T X_i, \hat{\beta}, \hat{\alpha}, \hat{\gamma}) \leq 0) \right]
\]

\[(2.4)\]

which is a consistent estimator of the true value function \(V(\hat{Q}(\cdot, \beta))\).
3. Theoretical Properties

We now study the theoretical properties of the proposed estimators. For notational simplicity, define
\[ W(\gamma) = E \left( \frac{\partial^2 \log [\pi(X, \gamma)^A (1 - \pi(X, \gamma))]^{1-A}}{\partial \gamma \partial \gamma^T} \right), \]
\[ \phi_\gamma(X_i, A_i, \gamma) = W(\gamma)^{-1} \partial \log [\pi(x_i, \gamma)^A (1 - \pi(x_i, \gamma))]^{1-A} / \partial \gamma, \]
and
\[ \phi_\alpha(X_i, A_i, Y_i, \alpha) = \left[ E \{ W(X, \alpha) D(X, \alpha) \} \right]^{-1} W(X_i, \alpha) (1-A_i) \{ Y_i - \mu(X_i, \alpha) \}, \]
where \( W(X, \alpha) \) is an arbitrary weight matrix and \( D(X, \alpha) = \partial \mu(X, \alpha) / \partial \alpha^T \).

Throughout this paper, \( a^{\otimes 2} = aa^T \).

Proposition 2. Write the conditional distribution of \( A \) given \( X \) as \( \pi(x, \gamma)^A (1 - \pi(x, \gamma))^\gamma \). Regardless of whether \( \pi(X, \gamma) \) is the true propensity score model, there exists \( \gamma_0 \) such that the MLE \( \hat{\gamma} \) satisfies
\[ \sqrt{n} (\hat{\gamma} - \gamma_0) = n^{-1/2} \sum_{i=1}^n \phi_\gamma(X_i, A_i, \gamma) + o_p(1). \]
Hence, \( \sqrt{n} (\hat{\gamma} - \gamma_0) \to N \{ 0, W(\gamma_0)^{-1} B(\gamma_0) W(\gamma_0)^{-1} \} \)
in distribution when \( n \to \infty \), where \( B(\gamma_0) = E \{ \phi_\gamma(X_i, A_i, \gamma_0)^{\otimes 2} \} \).

Specifically, when the model \( \pi(x, \gamma) \) is correct, \( \gamma_0 \) is the true parameter value that yields \( \pi_0(x) = \pi(x, \gamma_0) \), and the covariance matrix simplifies to the inverse of Fisher’s information matrix \( I(\gamma_0) \), which is
\[ I(\gamma_0) = -W(\gamma_0)^{-1}. \]
When the model \( \pi(x, \gamma) \) is incorrect, \( \gamma_0 \) is the parameter vector that minimizes the Kullback–Leibler distance
\[ E \left\{ \log \left[ \pi_0(X)^A (1 - \pi_0(X))^{1-A} \right] / \left[ \pi(X, \gamma)^A (1 - \pi(X, \gamma))^{1-A} \right] \right\}. \]

Proposition 3. Regardless of whether \( \mu(X, \alpha) \) is the true model, let \( \hat{\alpha} \)
be the estimator that solves the estimating equation $\sum_{i=1}^{n_0} W(X_i, \alpha) \{Y_i - \mu(X_i, \alpha)\} = 0$. Then, $\sqrt{n_0}(\hat{\alpha} - \alpha_0) = n_0^{-1/2} \sum_{i=1}^{n_0} \phi_\alpha(X_i, A_i, Y_i, \alpha_0) + o_p(1)$. Hence, $\sqrt{n_0}(\hat{\alpha} - \alpha_0) \rightarrow N(0, V_\alpha)$ in distribution when $n \rightarrow \infty$, where $V_\alpha = [E\{W(X, \alpha_0)D(X, \alpha_0)\}]^{-1} \times E\{W(X, \alpha_0)v(X)W(X, \alpha_0)^T\}([E\{W(X, \alpha_0)D(X, \alpha_0)\}]^{-1}T$, and $v(X)$ is the conditional variance of $Y$ given $X$. When the model $\mu(X, \alpha)$ is specified correctly, $\alpha_0$ satisfies $\mu_0(X) = \mu(X, \alpha_0)$, where $\mu_0(x)$ is the true mean outcome under $A = 0$. However, when the model $\mu(X, \alpha)$ is specified incorrectly, $\alpha_0$ satisfies $E\{W(X_i, \alpha_0)\{Y_i - \mu(X_i, \alpha_0)\}\} = 0$.

The results in Propositions 2 and 3 follow directly from the findings of White (1982) and Yi & Reid (2010); hence, we omit detailed proofs. We develop the asymptotic properties of the estimators $\hat{\beta}$ and $\hat{Q}(\cdot, \hat{\beta}, \hat{\alpha}, \hat{\gamma})$, the root of $\hat{Q}(\cdot, \hat{\beta}, \hat{\alpha}, \hat{\gamma})$, and $\hat{V}\{\hat{Q}(\cdot, \hat{\beta}, \hat{\alpha}, \hat{\gamma})\}$ under the following conditions.

**Regularity Conditions:**

(C1) The true parameter value $\beta_0$ belongs to a compact set $\Omega$.

(C2) The univariate kernel $K(\cdot)$ is symmetric, has compact support, and is Lipschitz-continuous on its support. It satisfies $\int K(u)du = 1, \int uK(u)du = 0$, $0 \neq \int u^2K(u)du < \infty$.

(C3) The probability density function of $\beta^T X$, denoted by $f(\beta^T x)$, is
bounded away from zero and $\infty$.

(C4) $E(X \mid \beta^T x)f(\beta^T x)$ and $Q(\beta^T x)$ are twice differentiable, and their second derivatives and $f(\beta^T x)$ are locally Lipschitz-continuous and bounded.

(C5) The bandwidth $h = O(n^{-\kappa})$, for $1/8 < \kappa < 1/2$.

(C6) The treatment assignment probability satisfies $c < \pi_0(x) < 1 - c$, where $c$ is a small positive constant.

(C7) The true treatment responses, $\mu_0(x)$ for the nontreated group and $\mu_1(x)$ for the treated group are bounded by a constant $C$.

(C8) The true treatment effect function $Q(\beta_0^T x)$ has roots $r_1, \ldots, r_K$, for $K < \infty$. In addition, $Q'(r_k) \neq 0$, for all $k = 1, \ldots, K$.

Conditions [(C1)]–[(C5)] are standard conditions that ensure a sufficient convergence rate of the nonparametric estimators. Condition [(C6)] is also routinely assumed to exclude weights near zero and one. Condition [(C7)] is very mild, and is usually satisfied in practice. Condition [(C8)] allows roots for the function $Q(\cdot)$, and is also very mild.

**Lemma 1.** Under Conditions [(C2)], [(C3)], and [(C4)], at any $\beta \in \Omega$ and for any function $H(X_j, A_j, Y_j)$ such that $E\{H(X_j, A_j, Y_j) \mid \beta^T X_j\}$ is twice
differentiable, we have

\[
E \{ H(X_j, A_j, Y_j)K_h(\beta^T X_j - \beta^T x) \} - E \{ H(X_j, A_j, Y_j) | \beta^T x \} f(\beta^T x) \\
= \frac{\partial^2}{(\partial \beta^T x)^2} \left[ E \{ H(X_j, A_j, Y_j) | \beta^T x \} f(\beta^T x) \right] \frac{h^2}{2} \int z^2 K(z) dz + o(h^2),
\]

\[
var\{n^{-1} \sum_{j=1}^n H(X_j, A_j, Y_j)K_h(\beta^T X_j - \beta^T x) \} \\
= (nh)^{-1} E\{H^2(X_j, A_j, Y_j) | \beta^T x \} f(\beta^T x) \int K^2(z) dz + O(n^{-1}).
\]

**Lemma 2.** Assume the regularity Conditions (C1)–(C5) hold. Then, at any \( \beta \in \Omega \), the kernel estimator \( \hat{Q}(\beta^T x, \beta, \alpha_0, \gamma_0) \) satisfies \( \hat{Q}(\beta^T x, \beta, \alpha_0, \gamma_0) - Q(\beta^T x) = O_p\{h^2 + (nh)^{-1/2}\} \).

Note that the convergence rate of \( \hat{Q}(\beta^T x, \beta, \alpha_0, \gamma_0) \) is slower than \( \sqrt{n} \), whereas \( \hat{\gamma} \) and \( \hat{\alpha} \) have a \( \sqrt{n} \) convergence rate. Thus, estimating \( \hat{Q}(\beta^T x, \beta, \hat{\alpha}, \hat{\gamma}) \), which is based on \( \hat{\alpha} \) and \( \hat{\gamma} \) instead of \( \alpha_0 \) and \( \gamma_0 \), respectively does not change the results in Lemma 2.

**Theorem 1.** Assume \( \beta_L \) solves (2.2). Then, under the regularity conditions (C1)–(C5), \( \beta_L \) satisfies \( \sqrt{n}(\hat{\beta}_L - \beta_{L0}) \rightarrow N(0, B^{-1}V_1(B^{-1})^T) \) in distribution as \( n \rightarrow \infty \), where \( V_1 = E \left[ \left\{ \phi_\beta(X_i, Y_i, A_i, \beta_0, \alpha_0, \gamma_0) + B_\gamma \phi_\gamma(X_i, A_i, \gamma_0) + B_\alpha \phi_\alpha(X_i, A_i, Y_i, \alpha_0) \right\}^2 \right] \). Detailed expressions for \( B, B_\gamma, B_\alpha, \) and \( \phi_\beta(X_i, Y_i, A_i, \beta_0, \alpha_0, \gamma_0) \) are provided in Section S1 of the Supplementary Material.
The first term in the variance expression $V_1$ captures the variability of estimating different functions, the second term captures the variability in estimating $\beta$ due to the estimation of $\gamma$, and the third term captures the same induced by $\hat{\alpha}$.

**Lemma 3.** Assume the regularity Conditions [C1]–[C5] hold. Then, the kernel estimator obtained from Step 6, $\hat{Q}(\beta^T x, \hat{\beta}, \hat{\alpha}, \hat{\gamma})$, satisfies

$$bias\{\hat{Q}(\beta^T x, \hat{\beta}, \hat{\alpha}, \hat{\gamma})\}$$

$$= h_{opt}^2 \left\{ \frac{Q'(\beta_0^T x) d[E\{\pi_0(X_j)/\pi(X_j, \gamma_0) \mid \beta_0^T x\}] f(\beta_0^T x)}{f(\beta_0^T x) E\{\pi_0(X_j)/\pi(X_j, \gamma_0) \mid \beta_0^T x\}} + \frac{Q''(\beta_0^T x)}{2} \right\}$$

$$\times \int z^2 K(z) dz + o(h_{opt}^2 + n^{-1/2} h_{opt}^{-1/2}),$$

and

$$var\{\hat{Q}(\beta^T x, \hat{\beta}, \hat{\alpha}, \hat{\gamma})\} = \frac{1}{nh_{opt}^2} \left\{ E \left[ \frac{\pi_0(X_j)}{\pi^2(X_j, \gamma_0)} \{Y_{1j} - \mu(X_j, \alpha_0)\}^2 \mid \beta_0^T x \right] \right.$$

$$+ E \left[ \frac{1 - \pi_0(X_j)}{\{1 - \pi(X_j, \gamma_0)\}^2} \{Y_{0j} - \mu(X_j, \alpha_0)\}^2 \mid \beta_0^T x \right]$$

$$- Q^2(\beta_0^T x) E \left\{ \frac{\pi_0(X_j)}{\pi^2(X_j, \gamma_0)} \{\mu_0(X_j) - \mu(X_j, \alpha_0)\} \mid \beta_0^T x \right\}$$

$$- 2Q(\beta_0^T x) E \left\{ \frac{\pi_0(X_j)}{\pi^2(X_j, \gamma_0)} \{\mu_0(X_j) - \mu(X_j, \alpha_0)\} \mid \beta_0^T x \right\}$$

$$\times \frac{1}{f(\beta_0^T x)} \left[ E \left\{ \frac{\pi_0(X_j)}{\pi(X_j, \gamma_0)} \mid \beta_0^T x \right\} \right]^{-2} \int K^2(z) dz + O(n^{-1}).$$

*Here, for a generic function $r(\cdot)$, $r'(\cdot)$ and $r''(\cdot)$ are its first and second*
derivatives, respectively.

**Theorem 2.** Let $Q(z_0) = 0$ and $\hat{Q}(\hat{z}, \hat{\beta}, \hat{\alpha}, \hat{\gamma}) = 0$. Then, as $n \to \infty$, under the regularity Conditions $\text{(C1)}$–$\text{(C5)}$, $\hat{z} \to z_0$ at the rate $n^{-2/5}$. Specifically, the leading term of the bias of $\hat{z}$ is

$$-h^2_{\text{opt}} \left\{ \frac{d}{d(z_0)} \left[ E \left\{ \frac{\pi_0(X)}{\pi^2(X, \gamma_0)} f(z_0) \right\} \right] + \frac{Q''(z_0)}{2Q'(z_0)} \right\} \int z^2 K(z) dz,$$

and the leading term of the variance of $\hat{z}$ is

$$\frac{1}{nh_{\text{opt}}} \left( E \left\{ \frac{\pi_0(X)}{\pi^2(X, \gamma_0)} \left[ Y_1 - \mu(X, \alpha_0) \right]^2 \right\} \right) + \frac{1}{Q'(z_0)^2} \left[ E \left\{ \frac{\pi_0(X)}{\pi(X, \gamma_0)} \left[ Y_0 - \mu(X, \alpha_0) \right]^2 \right\} \right]^{-2} \int K^2(z) dz.$$

Theorem 2 indicates that our treatment region identification rate is $O_p(n^{-2/5})$, which is better than the classical rate $O_p(n^{-1/3})$ (Fan et al. 2017). This is because of the smoothness assumption made in Condition $\text{(C4)}$.

**Theorem 3.** Under the regularity Conditions $\text{(C1)}$–$\text{(C8)}$, the optimal value function estimator given in (2.4) satisfies $n^{1/2} \left[ \hat{V}(\hat{Q}(\cdot), \hat{\beta}, \hat{\alpha}, \hat{\gamma}) - V(Q(\cdot), \beta_0) \right] \to N(0, \sigma^2)$ in distribution when $n \to \infty$, where $\sigma^2 = E \left[ -U^T \beta B^{-1} \right]$

$$\{ \phi_\beta(X_i, Y_i, A_i, \beta_0, \alpha_0, \gamma_0) + B_\gamma \phi_\gamma(X_i, A_i, \gamma_0) + B_\alpha \phi_\alpha(X_i, A_i, Y_i, \alpha_0) \}$$

$$+ U^T_\alpha \phi_\alpha(X_i, A_i, Y_i, \alpha_0) + U^T_\gamma \phi_\gamma(X_i, A_i, \gamma_0) + v_Q \{ X_i, A_i, Y_i, \beta_0, \alpha_0, \gamma_0, Q(\cdot) \}$$
+v_0(X_i, A_i, Y_i)^2$. Detailed expressions for $B, B_γ, B_α, U_α, U_γ, φ_β(X_i, Y_i, A_i, β_0, α_0, γ_0), v_Q(X_i, A_i, Y_i, β_0, α_0, γ_0, Q(·)), and v_0(X_i, A_i, Y_i)$ are provided in Section S1 of the Supplementary Material.

We can understand the first term in $σ^2$ as the variability in the value function due to $β$. The second term is related to the variability induced by $α$. The third term captures the variability due to the $γ$ estimation. The fourth term measures the variability in the value function induced by estimating the treatment effect function. Lastly, the fifth term captures the variability in the value function inherited from the variability of the covariates.

4. Simulations

We conduct simulation studies to compare the performance of the estimators discussed in Section 2. To demonstrate the robustness of the proposed estimators, we consider scenarios in which either $π(X, γ)$ or $μ(X, α)$ is misspecified. We use a sample size of $n = 500$, with 1000 replicates.

4.1 Simulation 1

Our first simulation follows similar designs to those in Fan et al. (2017), which require the monotonicity of $Q(·)$. We set $d_β = 4$ and generate the
covariate vector $X_i$ from a multivariate normal distribution with zero mean and identity covariance matrix. We generate the treatment indicator $A_i$ from a Bernoulli distribution with probability $\pi_0(X_i) = 0.5$. The response variables are formed from $Y_i = \mu_0(X_i) + A_iQ_0(\beta_0^T X_i) + \epsilon_i$, where $\epsilon_i$ is generated from a centered normal distribution with variance 0.25. Here, $Q_0(\beta_0^T x) = 2\beta_0^T x$ and $\mu_0(x) = 1 + \alpha_0^T x$, where $\alpha_0 = (1,-1,1,1)^T$ and $\beta_0 = (1,1,-1,1)^T$.

To illustrate the robustness of our method, we consider four cases for the estimation. In Case I, we use the constant treatment probability model and a linear model for $\mu(x, \alpha)$ in the implementation, both of which are specified correctly. In Case II, we use a constant model for $\mu(x, \alpha)$, which is a misspecified model, while keeping the treatment probability $\pi$ unchanged. In Case III, we fix $\pi$ at $0.4$, and use the same $\mu$ model as in Case I. Thus, $\mu$ is specified correctly, whereas $\pi$ is misspecified. Lastly, in Case IV, both models are misspecified by using the same model for $\mu$ as in Case II and setting $\pi$ as in Case III.

We follow the algorithm described in Section 2, where we use the Epanechnikov kernel in the nonparametric implementation, and use the bandwidth $c\sigma n^{-1/3}$ to estimate $\beta$, where $\sigma^2$ is the estimated variance of $\beta^T x$ and $c$ is a constant between 7 and 7.5 in step 3.
From the results summarized in Table 1 in the first three cases, our estimation for \( \beta \) yields a small bias. In contrast, for Case IV, when both \( \pi(x) \) and \( \mu(x, \alpha) \) are misspecified, the estimation for \( \beta \) is biased. In terms of inference, the estimated standard deviations based on the asymptotic properties match closely with the empirical variability of the estimators, and the 95% confidence intervals have coverage close to the nominal level in the first three cases. Interestingly, the value function estimator and the root of \( Q(\cdot) \) perform well in all cases. Figure 1 further shows that the 95% confidence interval for \( Q(\cdot) \) includes the true function \( Q_0(\cdot) \).

Figure 1: Simulation 1. Mean, median, and 95% confidence band of the estimators of \( Q_0(t) = 2t \), when (I) \( \mu(\cdot) \) and \( \pi(\cdot) \) are both correct (top-left), (II) \( \mu(\cdot) \) is misspecified and \( \pi(\cdot) \) is correct (top-right), (III) \( \pi(\cdot) \) is misspecified and \( \mu(\cdot) \) is correct (bottom-left), and (IV) both \( \mu(\cdot) \) and \( \pi(\cdot) \) are misspecified (bottom-right).
Table 1: Simulation 1. $Q_0(\beta_0^T x) = 2\beta_0^T x + \mu_0(x) = 1 + \alpha_0^T x$. Case I: $\mu(\cdot)$ and $\pi(\cdot)$ are specified correctly; Case II: $\mu(\cdot)$ is misspecified; Case III: $\pi(\cdot)$ is misspecified; Case IV: both models are misspecified. For the different cases, we also compute the mean of the estimated sd based on asymptotics (sd), empirical coverage obtained with 95% confidence intervals based on these estimated sd (cvg), and mean squared error (mse).

| Case | parameters | True | Estimate | sd  | sd  | cvg | MSE  |
|------|------------|------|----------|-----|-----|-----|------|
| I    | $\beta_2$  | 1    | 0.9960   | 0.0567 | 0.0563 | 95.1% | 0.0032 |
|      | $\beta_3$  | -1   | -0.9953  | 0.0563 | 0.0559 | 95.3% | 0.0032 |
|      | $\beta_4$  | 1    | 0.9941   | 0.0559 | 0.0549 | 94.4% | 0.0032 |
|      | V          | 2.5958 | 2.5955  | 0.1453 | 0.1458 | 97.2% | 0.0211 |
| II   | $\beta_2$  | 1    | 1.0256   | 0.1598 | 0.2033 | 93.4% | 0.0262 |
|      | $\beta_3$  | -1   | -1.0252  | 0.1561 | 0.1982 | 93.7% | 0.0250 |
|      | $\beta_4$  | 1    | 1.0068   | 0.1361 | 0.1913 | 94.6% | 0.0186 |
|      | V          | 2.5958 | 2.6083  | 0.1926 | 0.1702 | 96.2% | 0.0373 |
| III  | $\beta_2$  | 1    | 1.0049   | 0.0468 | 0.0470 | 95.3% | 0.0022 |
|      | $\beta_3$  | -1   | -1.0044  | 0.0470 | 0.0473 | 95.2% | 0.0022 |
|      | $\beta_4$  | 1    | 1.0032   | 0.0482 | 0.0464 | 94.7% | 0.0023 |
|      | V          | 2.5958 | 2.6176  | 0.1476 | 0.1471 | 96.9% | 0.0223 |
| IV   | $\beta_2$  | 1    | 0.7494   | 0.1106 | 0.0940 | 41.3% | 0.0751 |
|      | $\beta_3$  | -1   | -0.7485  | 0.1073 | 0.0919 | 42.1% | 0.0748 |
|      | $\beta_4$  | 1    | 1.0243   | 0.0901 | 0.0939 | 95.8% | 0.0087 |
|      | V          | 2.5958 | 2.6401  | 0.1665 | 0.1655 | 96.4% | 0.0297 |

| Results for the root of $Q_0(t) = 2t$ |
|-----------------|-----------------|------|------|------|------|-----|------|
| Case | true | mean  | bias | bias | sd  | sd  | cvg | MSE  |
| I    | 0    | 0.0023 | -0.0013 | 0.0641 | 0.0663 | 96.6% | 0.0041 |
| II   | 0    | -0.0004 | -0.0001 | 0.1703 | 0.1693 | 93.7% | 0.0290 |
| III  | 0    | 0.0015  | -0.0004 | 0.0589 | 0.0594 | 95.7% | 0.0035 |
| IV   | 0    | -0.0080 | -0.0080 | 0.1242 | 0.1225 | 93.2% | 0.0155 |

4.2 Simulation 2

In our second simulation study, we examine the performance of our estimators in the presence of nonmonotonic function $Q_0(\cdot)$ and heteroscedastic error variance. When generating the data, the true treatment difference function is $Q_0(\beta_0^T x_i) = (\beta_0^T x_i)^2 - 2$, $\mu_0(x) = 1 + \sin(\alpha_1^T x) + 0.5(\alpha_2^T x)^2$.
and the errors satisfy $\epsilon_i \sim \mathcal{N}(0, \log((\beta_0^T x_i)^2+1))$. Here, $\beta_0 = (1, 1, -1, 1)^T$, $\alpha_{10} = (1, -1, 1, 1)^T$, and $\alpha_{20} = (1, 0, -1, 0)^T$. All other aspects of the simulation setting are identical to those in Simulation 1.

Despite the heteroscedasticity and nonmonotone treatment difference function, similar to Simulation 1, we consider four cases to demonstrate the robustness of our estimator. In Case I, we use correctly specified models for both $\pi$ and $\mu(x, \alpha)$. In Case II, we misspecify the $\mu(x, \alpha)$ model as a linear model. In Case III, we misspecify $\pi$ as 0.4. Finally, in Case IV, both $\mu(x, \alpha)$ and $\pi$ are misspecified.

We use the same nonparametric estimation procedures as we did in Simulation 1 to implement the algorithm in Section 2. The results in Table 2 show that despite the nonmonotonic function $Q_0(\cdot)$ and a heteroscedastic error variance, the estimations for the parameters $\beta$, the value function, and the two roots of $Q_0(\cdot)$ yield very small bias in the first three cases. In addition, the estimated standard deviations are close to the empirical standard deviations, and the confidence intervals are close to the nominal coverage levels. As expected, the estimation of $\beta$ in Case IV does not perform well, although the performance of the value function and the two roots of $Q(\cdot)$ show a certain robustness, even in Case IV. In Figure 2 note that the 95% confidence interval for $Q(\cdot)$ includes the true $Q_0(\cdot)$ function.
in all four cases.

Table 2: Simulation 2. $Q_0(\beta_0^T x) = (\beta_0^T x)^2 - 2$ and $\mu_0(x) = 1 + \sin(\alpha_0^T x) + 0.5(\alpha_2^T x)^2$, when the error variance is heteroscedastic. See also the caption of Table I.

| Case | parameters | True | Estimate | sd   | sd   | cvg | MSE  |
|------|------------|------|----------|------|------|-----|------|
| I    | $\beta_2$ | 1    | 1.0364   | 0.0646| 0.0911| 93.5% | 0.0055|
|      | $\beta_3$ | -1   | -1.0368  | 0.0653| 0.0911| 93.1% | 0.0056|
|      | $\beta_4$ | 1    | 1.0330   | 0.0646| 0.0893| 92.9% | 0.0053|
|      | $\beta_0$| 4.7166| 4.6415   | 0.2843| 0.2970| 94.9% | 0.0864|
| II   | $\beta_2$ | 1    | 1.0398   | 0.1124| 0.1384| 92.8% | 0.0142|
|      | $\beta_3$ | -1   | -1.0341  | 0.1062| 0.1320| 94.0% | 0.0124|
|      | $\beta_4$ | 1    | 1.0411   | 0.1166| 0.1385| 93.2% | 0.0153|
|      | $\beta_0$| 4.7166| 4.6160   | 0.3095| 0.3053| 94.4% | 0.1059|
| III  | $\beta_2$ | 1    | 1.0295   | 0.0618| 0.0833| 92.6% | 0.0047|
|      | $\beta_3$ | -1   | -1.0300  | 0.0640| 0.0830| 93.6% | 0.0050|
|      | $\beta_4$ | 1    | 1.0262   | 0.0629| 0.0826| 94.2% | 0.0046|
|      | $\beta_0$| 4.7166| 4.7024   | 0.2967| 0.3052| 95.9% | 0.0882|
| IV   | $\beta_2$ | 1    | 0.9549   | 0.0894| 0.0990| 86.4% | 0.0100|
|      | $\beta_3$ | -1   | -1.0283  | 0.0865| 0.1020| 92.0% | 0.0083|
|      | $\beta_4$ | 1    | 0.9563   | 0.0910| 0.1007| 89.4% | 0.0102|
|      | $\beta_0$| 4.7166| 4.7518   | 0.3122| 0.3174| 96.1% | 0.0987|

| Case | mean | true mean bias | bias | sd   | sd   | cvg | MSE  |
|------|------|----------------|------|------|------|-----|------|
| I    | -1.4142| -1.4469    | -0.0327| -0.0109| 0.1498| 0.1120| 93.2% | 0.0235|
|      | 1.4142| 1.4480     | 0.0338| 0.0047| 0.1259| 0.1108| 93.7% | 0.0170|
| II   | -1.4142| -1.4482    | -0.0340| -0.0144| 0.2096| 0.1943| 94.7% | 0.0451|
|      | 1.4142| 1.4408     | 0.0266| 0.1191| 0.1854| 0.1830| 95.2% | 0.0351|
| III  | -1.4142| -1.4423    | -0.0281| -0.0170| 0.1104| 0.1033| 93.1% | 0.0130|
|      | 1.4142| 1.4436     | 0.0294| 0.1112| 0.1112| 0.1019| 93.3% | 0.0132|
| IV   | -1.4142| -1.4087    | 0.0056| -0.0180| 0.1585| 0.1745| 97.4% | 0.0252|
|      | 1.4142| 1.4363     | 0.0221| -0.0145| 0.1497| 0.1662| 97.5% | 0.0229|

4.3 Simulation 3

In the previous simulation settings, we considered a constant true propensity score. We now consider a nonconstant propensity score, which better
Figure 2: Simulation 2. Mean, median, and 95% confidence band of the estimators of $Q_0(t) = t^2 - 2$ with heteroscedastic error variance. See also the caption of Figure 1.

reflects the situation in observational studies. Specifically, we let $\pi(x_i) = \exp(\gamma_0^T x_i)/(1 + \exp(\gamma_0^T x_i))$, where $\gamma_0 = (0.1, 0, -0.1, 0)^T$. Furthermore consider $Q_0(\beta_0^T x_i) = (\beta_0^T x_i) + \sin(\beta_0^T x_i)$ and generate the other data as in Simulation 2.

To show the robustness of our method, we consider four cases, similar to Simulation 2. In Case I, we use correctly specified models for both $\pi(x, \gamma)$ and $\mu(x, \alpha)$. In Case II, we misspecify the $\mu(x, \alpha)$ model as a linear model, while keeping the treatment probability model $\pi(x, \gamma)$ unchanged. In Case III, we use a constant model for $\pi(x, \gamma)$, which is misspecified, and use the same model for $\mu(x, \alpha)$ as in Case I. Finally, in Case IV, both models
are misspecified by using the same model for $\mu(\mathbf{X}, \alpha)$ as in Case II and considering $\pi(\mathbf{X}, \gamma)$ as in Case III.

We follow the algorithm described in Section 2 and summarize the results in Table 3. Despite the heteroscedastic error and nonconstant propensity score model, in the first three cases, the estimations for the parameters $\beta$, value function $V$, and the root of the treatment difference function yield a small bias. In addition, the estimated standard deviations are still close to the empirical version of the estimators, and the confidence intervals have coverage close to the nominal levels. Interestingly, the estimator of the root of $Q(\cdot)$ performs well, even in Case IV. In Figure 3, note that the 95% confidence interval for $Q(\cdot)$ includes the true $Q_0(\cdot)$ function in all four cases.

4.4 Simulation 4

Here, we consider a nonconstant propensity score model similar to that in Simulation 3, and generate the other data as in Simulation 2. Thus, we consider a nonconstant propensity score model with a nonmonotonic treatment difference function and a heteroscedastic error variance in this simulation.

Similarly to Simulation 3, we consider four cases and demonstrate the robustness of our estimators. The results summarized in Table 4 show that
Table 3: Simulation 3. \( Q_0(\beta_0^T x) = (\beta_0^T x) + \sin(\beta_0^T x), \pi_0(x) = \exp(\gamma_0^T X)/(1 + \exp(\gamma_0^T X)), \) and \( \mu_0(x) = 1 + \sin(\alpha_0^T x) + 0.5(\alpha_0^T x)^2. \) See also the caption of Table [1]

| Case | parameters | True | Estimate | sd | sd | cvg | MSE |
|------|------------|------|----------|----|----|-----|-----|
| I    | \( \beta_2 \) | 1    | 1.0100   | 0.1197 | 0.1603 | 93.2\% | 0.0144 |
|      | \( \beta_3 \) | -1   | -1.0093  | 0.1177 | 0.1625 | 93.5\% | 0.0139 |
|      | \( \beta_4 \) | 1    | 1.0120   | 0.1227 | 0.1640 | 93.3\% | 0.0152 |
|      | V        | 3.0533 | 3.0345 | 0.1254 | 0.1287 | 95.7\% | 0.0161 |
| II   | \( \beta_2 \) | 1    | 1.0418   | 0.1742 | 0.1896 | 93.9\% | 0.0321 |
|      | \( \beta_3 \) | -1   | -0.9983  | 0.1696 | 0.2087 | 93.0\% | 0.0287 |
|      | \( \beta_4 \) | 1    | 1.0467   | 0.1749 | 0.1866 | 93.1\% | 0.0327 |
|      | V        | 3.0533 | 2.9907 | 0.1157 | 0.1359 | 95.5\% | 0.0173 |
| III  | \( \beta_2 \) | 1    | 1.0220   | 0.1278 | 0.1757 | 92.4\% | 0.0168 |
|      | \( \beta_3 \) | -1   | -1.0170  | 0.1243 | 0.1755 | 93.2\% | 0.0157 |
|      | \( \beta_4 \) | 1    | 1.0168   | 0.1276 | 0.1765 | 93.7\% | 0.0165 |
|      | V        | 3.0533 | 3.0440 | 0.1440 | 0.1203 | 95.0\% | 0.0208 |
| IV   | \( \beta_2 \) | 1    | 1.0512   | 0.2019 | 0.1727 | 80.5\% | 0.0434 |
|      | \( \beta_3 \) | -1   | -1.0083  | 0.1976 | 0.1929 | 82.7\% | 0.0391 |
|      | \( \beta_4 \) | 1    | 1.0575   | 0.2094 | 0.1837 | 82.6\% | 0.0472 |
|      | V        | 3.0533 | 2.9647 | 0.1402 | 0.1406 | 90.6\% | 0.0275 |

The estimations for the parameters \( \beta \), value function, \( V \), and root of the treatment difference function result in a small bias in the first three cases, as expected. Furthermore, the estimated standard deviations are close to the empirical standard deviations, and the confidence intervals are close to the nominal coverage levels. Interestingly, the estimation and inference of \( \beta \), \( V \), and the two roots perform well in Case IV. In Figure [4] the 95%
Figure 3: Simulation 3. Mean, median, and 95% confidence band of the estimators of \( Q_0(t) = t + \sin(t) \) with a nonconstant propensity score model and heteroscedastic error variance. See also the caption of Figure 1.

Confidence interval for \( Q(\cdot) \) includes the true \( Q_0(\cdot) \) function in all four cases.

For comparison, we also implement the methods in Fan et al. (2017) for all simulations. The results are summarized in Tables S.3 to S.8 in the Supplementary Material, and show that when the monotonicity assumption is violated, the methods of Fan et al. (2017) deteriorate and perform worse than our proposed method. We also provide additional simulation studies in the Supplementary Material, and implement two machine learning methods (Zhang et al. 2015; Zhao et al. 2012); the results are reported in Tables S.9 and S.10 in the Supplementary Material.
Table 4: Simulation 4. $Q_0(\beta^T_0 x) = (\beta^T_0 x)^2 - 2$, $\pi_0(x) = \exp(\gamma^T_0 X)/(1 + \exp(\gamma^T_0 X))$ and $\mu_0(x) = 1 + \sin(\alpha^T_0 x) + 0.5(\alpha_2^T x)^2$. See also the caption of Table 1.

| Case | parameters | True | Estimate | sd | sd | cvg | MSE |
|------|------------|------|----------|----|----|-----|-----|
| I    | $\beta_2$  | 1    | 1.0316   | 0.0659 | 0.0870 | 92.7% | 0.0053 |
|      | $\beta_3$  | -1   | -1.0346  | 0.0644 | 0.0890 | 92.8% | 0.0053 |
|      | $\beta_4$  | 1    | 1.0346   | 0.0635 | 0.0874 | 93.9% | 0.0052 |
|      | V         | 4.7166 | 4.6549 | 0.3035 | 0.3294 | 96.3% | 0.0959 |
| II   | $\beta_2$  | 1    | 1.0236   | 0.1117 | 0.1377 | 93.4% | 0.0130 |
|      | $\beta_3$  | -1   | -1.0186  | 0.1111 | 0.1362 | 93.6% | 0.0127 |
|      | $\beta_4$  | 1    | 1.0173   | 0.1143 | 0.1349 | 92.9% | 0.0133 |
|      | V         | 4.7166 | 4.6134 | 0.2952 | 0.3269 | 96.3% | 0.0977 |
| III  | $\beta_2$  | 1    | 1.0361   | 0.0637 | 0.0889 | 93.0% | 0.0054 |
|      | $\beta_3$  | -1   | -1.0343  | 0.0637 | 0.0895 | 95.0% | 0.0052 |
|      | $\beta_4$  | 1    | 1.0327   | 0.0642 | 0.0877 | 94.0% | 0.0052 |
|      | V         | 4.7166 | 4.6381 | 0.2930 | 0.3020 | 95.8% | 0.0920 |
| IV   | $\beta_2$  | 1    | 1.0396   | 0.1219 | 0.1368 | 93.5% | 0.0164 |
|      | $\beta_3$  | -1   | -1.0245  | 0.1103 | 0.1321 | 94.0% | 0.0128 |
|      | $\beta_4$  | 1    | 1.0343   | 0.1215 | 0.1371 | 92.3% | 0.0159 |
|      | V         | 4.7166 | 4.6004 | 0.2905 | 0.3056 | 94.2% | 0.0979 |

| Case | true mean | bias | bias sd | sd sd | cvg | MSE |
|------|-----------|------|---------|------|-----|-----|
| I    | -1.4142   | -1.4268 | -0.0126 | -0.0199 | 0.1201 | 0.1085 | 95.3% | 0.0146 |
|      | 1.4142    | 1.4556 | 0.0414  | 0.0238 | 0.1115 | 0.1172 | 94.8% | 0.0142 |
| II   | -1.4142   | -1.3810 | 0.0331  | 0.0368 | 0.1811 | 0.1885 | 94.4% | 0.0339 |
|      | 1.4142    | 1.4553 | 0.0411  | 0.0086 | 0.1792 | 0.1835 | 93.2% | 0.0338 |
| III  | -1.4142   | -1.4410 | -0.0288 | -0.0159 | 0.1221 | 0.1169 | 93.2% | 0.0156 |
|      | 1.4142    | 1.4554 | 0.0412  | 0.0137 | 0.1160 | 0.1206 | 93.6% | 0.0151 |
| IV   | -1.4142   | -1.3941 | 0.0201  | -0.0065 | 0.1905 | 0.1950 | 94.9% | 0.0367 |
|      | 1.4142    | 1.4508 | 0.0306  | -0.0080 | 0.1769 | 0.1885 | 95.9% | 0.0326 |

5. Real-Data Application

In this section, we apply our proposed method to data from a study of the effect of smoking during pregnancy on a baby’s birth weight. The primary outcome is birth weight (in grams) of singleton births in Pennsylvania,
Figure 4: Simulation 4. Mean, median, and 95% confidence band of the estimators of $Q_0(t) = t^2 - 2$ with a nonconstant propensity score model and heteroscedastic error variance. See also the caption of Figure 1.

USA (Almond et al., 2005). This study aims to determine whether pregnant women should stop smoking to ensure a healthy birth in terms of the baby’s birth-weight. We consider a subset of 1394 unmarried mothers. The data set contains data on the maternal smoking habit during pregnancy, which is treated as treatment $A_i$ (1 = Non-smoking, 0 = Smoking). The covariates observed are mother’s age (mage), an indicator variable for alcohol consumption during pregnancy (alcohol), an indicator variable of previous birth in which the infant died (deadkids), mother’s education (medu), father’s education (fedu), number of prenatal care visits (nprenatal), months since last birth (monthslb), mother’s race (mrace), and an indicator variable
for the first born child (fbaby).

To estimate the propensity score, mean outcome model for the non-treated group, and treatment difference function, we first normalize all the continuous covariates. We use the expit model $\pi(X, \gamma)$ to describe the propensity score, and use an MLE to estimate $\gamma$. In addition, we consider a linear model for the mean outcome model for the nontreatment group $\mu(X, \alpha)$, and solve GEE to obtain $\tilde{\alpha}$. Lastly, we estimate the treatment difference model $Q(\beta^T X)$ using the proposed method.

To implement the algorithm described in Section 2, we use the quartic kernel in the nonparametric implementation to estimate $\beta$ with bandwidth $c \sigma n^{-1/3}$, where $\sigma^2$ is the estimated variance of $\beta^T X$ and $c = 0.05$.

For identifiability purposes, we fix the coefficient of the first covariate (here, mage) to be one and estimate the remaining eight coefficients. The estimated parameters in $\beta$, their standard errors, and the value function are summarized in Table 5. From the 95% confidence interval for $\beta$, we conclude that all covariates are significant, except for the indicator variable for alcohol consumption. We provide the estimated treatment difference model, $\hat{Q}(\hat{\beta}^T X)$, in Figure 5. Here, the covariate alcohol is included when estimating $\hat{Q}(\hat{\beta}^T X)$. The results show a higher baby birth weight for mothers who did not smoke during pregnancy, once $\hat{Q}(\hat{\beta}^T X)$ is greater than zero.
We further construct the 95% confidence band for the difference function $Q(t)$, based on 500 bootstrap samples, by resampling the residuals. The results from the CAL and CAL-DR methods of Fan et al. (2017) are summarized in Table 6. Here, neither CAL nor CAL-DR detect any significant covariates. Furthermore, the variability when estimating the value function using CAL or CAL-DR is higher than when using the proposed method. In addition, the 95% confidence intervals computed by the CAL and CAL-DR methods include the estimated value function obtained by our method.

**Remark 1.** We also performed an analysis after excluding the covariate alcohol, and observed that the estimated function $\hat{Q}(\hat{\beta}^T X)$ does not change much. However, excluding alcohol influences the estimated confidence band. This suggests that we need to be more careful with variable selection and when performing inference post variable selection. This is beyond the scope of this study, and so is left to future research.

6. Discussion

We have proposed a robust method for estimating the optimal treatment regimes for a single decision time point under weak conditions; that is, our treatment difference model $Q(\cdot)$ does not need to be monotonic and we require only that $E(\epsilon \mid X) = 0$. Our method enjoys protection against
Table 5: Birth-weight study analysis: Results for $\beta$ and value function $V$ with 95% CI.

| parameters   | Estimate | sd    | Confidence interval          |
|--------------|----------|-------|------------------------------|
| $\beta_2$ (alcohol) | 0.2965   | 0.4842| (-0.6525,1.2455)            |
| $\beta_3$ (deadkids) | 0.3406   | 0.0233| (0.2950,0.3862)             |
| $\beta_4$ (medu)    | -0.1972  | 0.0073| (-0.2116,-0.1828)           |
| $\beta_5$ (fedu)    | -0.0947  | 0.0005| (-0.0957,-0.0938)           |
| $\beta_6$ (nprenatal) | 0.2822   | 0.0061| (0.2703,0.2941)             |
| $\beta_7$ (monthsib) | 0.0183   | 0.0002| (0.0178,0.0188)             |
| $\beta_8$ (mrace)   | 3.0882   | 0.3753| (2.3527,3.8237)             |
| $\beta_9$ (fbaby)   | -1.8505  | 0.4267| (-2.6868,-1.0143)           |
| Value function     | 3274.9   | 25.439| (3225.1,3324.8)             |

Figure 5: Data analysis. The estimated treatment difference model, $\hat{Q}(\hat{\beta}^Tx)$, its median, and 95% confidence bands based on the data set of low baby birth weights.
Table 6: Application to birth-weight study using the CAL and CAL-DR methods.

| parameters | Estimate | sd  | Confidence interval     |
|------------|----------|-----|-------------------------|
| CAL estimates for $\beta$ and value function $V$ for the real data analysis. |
| $\beta_2$ (alcohol) | -0.0223 | 7.0207 | (-13.783,13.738) |
| $\beta_3$ (deadkids) | 0.2088 | 5.9428 | (-11.439,11.857) |
| $\beta_4$ (medu) | -0.1998 | 0.6850 | (-1.542,1.1428) |
| $\beta_5$ (fedu) | -0.0902 | 0.2929 | (-0.664,0.4838) |
| $\beta_6$ (nprenatal) | 0.2966 | 0.5499 | (-0.781,1.3743) |
| $\beta_7$ (monthslb) | 0.0192 | 0.1653 | (-0.304,0.3431) |
| $\beta_8$ (mrace) | 3.1975 | 7.1149 | (-10.747,17.142) |
| $\beta_9$ (fbaby) | -2.0682 | 3.8728 | (-9.658,5.5222) |
| Value function | 3244.4 | 30.345 | (3185.0,3303.9) |
| CAL-DR estimates for $\beta$ and value function $V$ for the real data analysis. |
| $\beta_2$ (alcohol) | -0.1111 | 1.7382 | (-3.517,3.2958) |
| $\beta_3$ (deadkids) | 0.2589 | 0.9554 | (-1.613,2.1314) |
| $\beta_4$ (medu) | -0.2058 | 0.3147 | (-0.822,0.4109) |
| $\beta_5$ (fedu) | -0.0815 | 0.1545 | (-0.384,0.2213) |
| $\beta_6$ (nprenatal) | 0.2759 | 0.2782 | (-0.2693,0.8212) |
| $\beta_7$ (monthslb) | 0.0183 | 0.0383 | (-0.057,0.0933) |
| $\beta_8$ (mrace) | 3.2234 | 2.4674 | (-1.612,8.0594) |
| $\beta_9$ (fbaby) | -2.0459 | 1.7858 | (-5.546,1.4542) |
| Value function | 3241.9 | 30.243 | (3182.6,3301.2) |

A misspecification of either the propensity score model or the outcome regression model for the nontreated group or the nonmonotonic treatment difference model. We use a nonparametric kernel-based estimator to obtain the treatment difference model, and show that the treatment identification rate is $O_p(n^{-2/5})$. Our simulation studies demonstrate the superior performance of the proposed method under various scenarios.

Regardless of whether the true treatment difference function $Q(\cdot)$ has single or multiple roots, our procedure always identifies the region $\{x: \hat{Q}(\hat{\beta}^T x) > 0\}$ as the treatment region. When $\hat{Q}(\cdot)$ has multiple roots, the
corresponding treatment region is the union of several intervals for $\hat{\beta}^T x$. In practice, this does not cause problem, because when new patients enter with a covariate $x_0$, we simply evaluate $\hat{Q}(\hat{\beta}^T x_0)$ to determine whether they should receive the treatment. We consider parametric models for the propensity score function and the mean outcome model for the nontreated group. One can also use semiparametric or nonparametric methods to obtain these two functions. For example, one can use the semiparametric estimation procedure of Ma & Zhu (2013) to estimate the propensity score and the mean outcome model for the nontreated group to obtain $n^{1/2}$-consistent estimators for $\gamma$ and $\alpha$. The treatment identification rate remains unchanged.

Many extensions of this work are interesting and worth pursuing. For example, we may consider multiple treatment decision times, while incorporating the usual backward induction to obtain the optimal dynamic treatment regimes. We may also consider multiple treatment choices sharing the same index. These topics are left to future research.

Supplementary Material

The online Supplementary Material contains proofs for Proposition 1, Lemma 1–3, and Theorems 1–3.
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References

Almond, D., Chay, K. Y. & Lee, D. S. (2005), ‘The costs of low birth weight’, The Quarterly Journal of Economics 120, 1031–1083.

Bai, X., Tsiatis, A. A., Lu, W. & Song, R. (2017), ‘Optimal treatment regimes for survival endpoints using a locally-efficient doubly-robust estimator from a classification perspective’, Lifetime data analysis 23(4), 585–604.

Blatt, D., Murphy, S. A. & Zhu, J. (2004), ‘A-learning for approximate planning’, Ann Arbor 1001, 48109–2122.

Chakraborty, B., Murphy, S. & Strecher, V. (2010), ‘Inference for non-regular parameters in optimal dynamic treatment regimes’, Statistical methods in medical research 19(3), 317–343.

Fan, C., Lu, W., Song, R. & Zhou, Y. (2017), ‘Concordance-assisted learning for estimating optimal individualized treatment regimes’, Journal of the royal statistical society, Series
B. **79**, 1565–1582.

Foster, J. C., Taylor, J. M. & Ruberg, S. J. (2011), ‘Subgroup identification from randomized clinical trial data’, *Statistics in medicine* **30**(24), 2867–2880.

Goldberg, Y. & Kosorok, M. R. (2012), 'Q-learning with censored data', *Annals of statistics* **40**(1), 529–560.

Huang, M.-Y. & Yang, S. (2020), ‘Robust inference of conditional average treatment effects using dimension reduction’, *arXiv preprint arXiv:2008.13137* .

Jiang, R., Lu, W., Song, R. & Davidian, M. (2017), ‘On estimation of optimal treatment regimes for maximizing t-year survival probability’, *Journal of the Royal Statistical Society. Series B, Statistical methodology* **79**(4), 1165–1185.

Jiang, R., Lu, W., Song, R., Hudgens, M. G. & Naprvavnik, S. (2017), ‘Doubly robust estimation of optimal treatment regimes for survival data—with application to an hiv/aids study’, *The annals of applied statistics* **11**(3), 1763–1786.

Liang, S., Lu, W. & Song, R. (2018), ‘Deep advantage learning for optimal dynamic treatment regime’, *Statistical theory and related fields* **2**(1), 80–88.

Ma, Y. & Zhu, L. (2013), ‘Efficient estimation in sufficient dimension reduction’, *The Annals of Statistics* **41**, 250–268.

Matsouaka, R. A., Li, J. & Cai, T. (2014), ‘Evaluating marker-guided treatment selection strategies’, *Biometrics* **70**(3), 489–499.
Murphy, S. A. (2003), ‘Optimal dynamic treatment regimes’, *Journal of the Royal Statistical Society: Series B (Statistical Methodology)* **65**(2), 331–355.

Murphy, S. A. (2005), ‘A generalization error for q-learning’, *Journal of Machine Learning Research* **6**(Jul), 1073–1097.

Nahum-Shani, I., Qian, M., Almirall, D., Pelham, W. E., Gnagy, B., Fabiano, G. A., WannJosh, J. G., Yu, J. & Murphy, S. A. (2012), ‘Q-learning: A data analysis method for constructing adaptive interventions’, *Psychological methods* **17**(4), 478–494.

Orellana, L., Rotnitzky, A. & Robins, J. M. (2010), ‘Dynamic regime marginal structural mean models for estimation of optimal dynamic treatment regimes, part i: main content’, *The international journal of biostatistics* **6**(2), Article 8.

Qian, M. & Murphy, S. A. (2011), ‘Performance guarantees for individualized treatment rules’, *Annals of statistics* **39**(2), 1180–1210.

Robins, J. M. (2004), ‘Optimal structural nested models for optimal sequential decisions’, *Proceedings of the second seattle Symposium in Biostatistics* pp. 189–326.

Robins, J. M., Rotnitzky, A. & Zhao, L. P. (1994), ‘Estimation of regression coefficients when some regressors are not always observed’, *Journal of the American Statistical Association* **89**, 846–866.

Shi, C., Song, R., Lu, W. & Fu, B. (2018), ‘Maximin projection learning for optimal treatment decision with heterogeneous individualized treatment effects’, *Journal of the Royal Statistical Society. Series B, Statistical methodology* **80**(4), 681–702.
Song, R., Luo, S., Zeng, D., Zhang, H. H., Lu, W. & Li, Z. (2017), ‘Semiparametric single-index model for estimating optimal individualized treatment strategy’, *Electron. J. Statist.* 11(1), 364–384.

Song, R., Wang, W., Zeng, D. & Kosorok, M. R. (2015), ‘Penalized q-learning for dynamic treatment regimens’, *Statistica Sinica* 25(3), 901–920.

Watkins, C. J. C. H. (1989), ‘Learning from delayed rewards’, *Ph.D. thesis, University of Cambridge, England*.

Watkins, C. J. & Dayan, P. (1992), ‘Q-learning’, *Machine learning* 8(3-4), 279–292.

White, H. (1982), ‘Maximum likelihood estimation of misspecified models’, *Econometrica* 50(1), 1–25.

Yi, G. Y. & Reid, N. (2010), ‘A note on mis-specified estimating functions’, *Statistica Sinica* pp. 1749–1769.

Zhang, B., Tsiatis, A. A., Davidian, M., Zhang, M. & Laber, E. (2012), ‘Estimating optimal treatment regimes from a classification perspective’, *Stat* 1(1), 103–114.

Zhang, B., Tsiatis, A. A., Laber, E. B. & Davidian, M. (2012), ‘A robust method for estimating optimal treatment regimes’, *Biometrics* 68(4), 1010–1018.

Zhang, B., Tsiatis, A. A., Laber, E. B. & Davidian, M. (2013), ‘Robust estimation of optimal dynamic treatment regimes for sequential treatment decisions’, *Biometrika* 100(3), 681–694.
Zhang, Y., Laber, E. B., Tsiatis, A. & Davidian, M. (2015), ‘Using decision lists to construct interpretable and parsimonious treatment regimes’, *Biometrics* **71**(4), 895–904.

Zhao, L., Tian, L., Cai, T., Claggett, B. & Wei, L.-J. (2013), ‘Effectively selecting a target population for a future comparative study’, *Journal of the American Statistical Association* **108**(502), 527–539.

Zhao, Y., Kosorok, M. R. & Zeng, D. (2009), ‘Reinforcement learning design for cancer clinical trials’, *Statistics in medicine* **28**(26), 3294–3315.

Zhao, Y., Zeng, D., Rush, A. J. & Kosorok, M. R. (2012), ‘Estimating individualized treatment rules using outcome weighted learning’, *Journal of the American Statistical Association* **107**(499), 1106–1118.

Zhao, Y., Zeng, D., Socinski, M. A. & Kosorok, M. R. (2011), ‘Reinforcement learning strategies for clinical trials in nonsmall cell lung cancer’, *Biometrics* **67**(4), 1422–1433.

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