(I)

1. I does not wish the algorithm distribute different risk score in this case.
2. Yes, I can. The algorithm behaves almost the same no matter the input case given is black or white.

(II)

1. Yes, I expect the algorithm will give higher risk score to patient who is white.
2. No. There may be other factors that cause these result

(III)

1. Yes, I expect white patient will spend more on medical cost in this condition.
2. White patient spends more on medical cost when he or she has the same amount of illness. So if a white patient spends the same amount of money as a black patient, the former probably has less amount of illness than the latter, which means if they has the same amount of illness white patient will be considered to have higher risk score.
3. It is because there are some extreme cases of black patients: those who have relatively large amount of illness but spend relatively low medical cost (largely under the yellow curve). This may be traced back to some cultural difference.

Reflection Questions

We should consider the inner links between the data but not to consider them as separate things.