The Risk of a Personalized Insurance Industry

Krissy Gianforte MIDS w231, Fall 2018

The Purpose of Insurance

Insurance is designed to mitigate risk

Spreads the chance of an accident among a broad population

Also spreads the expense of care

Rates are set for general groups

By employer, by large demographic groups

Exists for many industries, including health, property, automobile, etc.







Car insurance rates are set for age groups, based on statistics

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Customers can volunteer self-reported data to get a reduced rate

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Student Away at School Discount - share your student status and school location

"Drive Safe" program - share driving metrics tracked by On-Star or smartphone

"How you drive determines how much discount you may receive"

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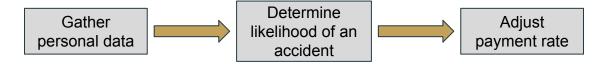
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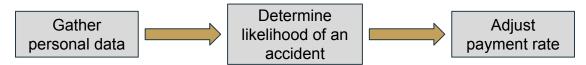
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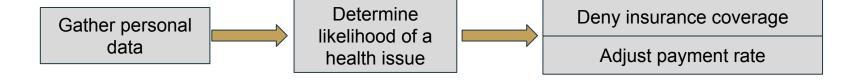


These programs are generally accepted by customers

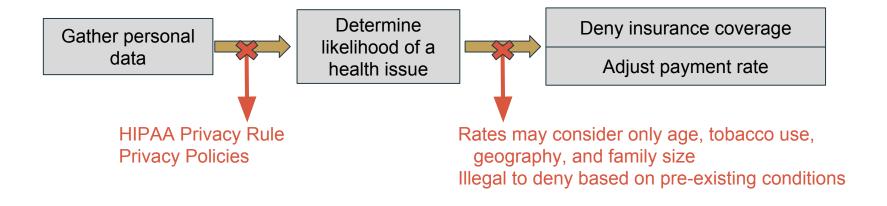
Opt-in Not deeply personal information

In driver's control (and everyone thinks they're a good driver...)

Apply This Model to Medical Insurance?

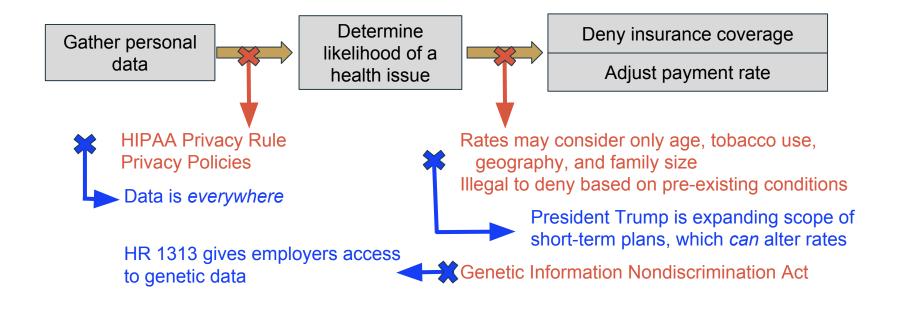


Medical Insurance Is Protected by Law



Genetic Information Nondiscrimination Act

Or Is It...?



Insurers Are Turning to Data

Fitness band tracking data - discounts and incentives for hitting step goals

Currently reported by employers in the aggregate

Insurers are exploring options to come directly to customers



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Woman recently changed her name → therapy services for marriage or divorce

Plus-size clothing purchases → dietary services or cardiac care

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Extrapolation from "non-medical" data - predicting health risk from obscure factors

Type of car owned, investments, neighborhood, relatives living in the area, etc

These factors are less directly linked to outcomes, but also less shielded by law

Sentiment analysis of Tweets - more optimistic tweeters have reduced risk of heart disease Swiss Re is incorporating this information into insurance rates



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Facebook posts

Life events - pregnancy, travel, work stress...

Hobbies - running marathons, drinking...

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Account creation

Different platforms tend towards different demographics, hobbies, priorities, and mental states

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Contextual Integrity:

"...locate contexts, explicate entrenched informational norms, evaluate disruptive flows, and evaluate these flows against norms based on general ethical and political principles as well as context-specific purposes and values."

What's Next? Other Web Data

Alexa home recordings

Habits, movement patterns, search requests - all potentially predictive of health

Food Diary App Data

Nutrition and weight information - *certainly* related to health outcomes

Amazon purchases

Magazine subscriptions

Website visits and articles read

Indicate hobbies and interests

Not concretely linked to health outcomes,
but certainly correlated

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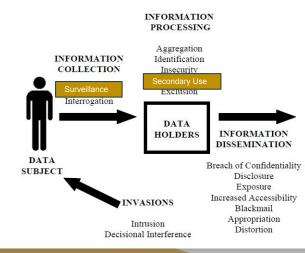
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DNA testing services (23andMe) - Ancestry & Health Reports

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5+ reports

Genetic Health Risk reports*

BRCA1/BRCA2 (Selected Variants)

Genetic risk based on a limited set of variants for breast, ovarian and other cancers

3 variants in the BRCA1 and BRCA2 genes; relevant for Ashkenazi Jewish descent

Age-Related Macular Degeneration Genetic risk for a form of adult-onset vision loss

2 variants in the ARMS2 and CFH genes; relevant for European descent

Alpha-1 Antitrypsin Deficiency Genetic risk for lung and liver disease 2 variants in the SERPINA1 gene; relevant for European descent

Celiac Disease Genetic risk for gluten-related autoimmune disorder

2 variants near the HLA-DQB1 and HLA-DQA1 genes; relevant for European descent G6PD Deficiency

Genetic risk for a form of anemia

1 variant in the G6PD gene; relevant for

African descent

Hereditary Hemochromatosis (HFE-Related)
Genetic risk for iron overload
2 variants in the HFE gene; relevant for
European descent

Hereditary Thrombophilia Genetic risk for harmful blood clots 2 variants in the F2 and F5 genes; relevant for

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Late-Onset Alzheimer's Disease Genetic risk for a form of dementia 1 variant in the APOE gene; variant found and studied in many ethnicities

Parkinson's Disease Genetic risk for a form of movement impairment 2 variants in the LRRK2 and GBA genes; relevant for European, Ashkenazi Jewish,

North African Berber descent

DNA testing services (23andMe) - Ancestry & Health Reports



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Genetic Health Risk reports*



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Wellness reports

Alcohol Flush Reaction
Caffeine Consumption
Deep Sleep
Genetic Weight
Lactose Intolerance
Muscle Composition
Saturated Fat and Weight
Sleep Movement

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Genetic Health Risk reports*



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Wellness reports



25+ traits

Traits reports

Ability to Match Musical Pitch Asparagus Odor Detection

Back Hair (available for men only)
Bald Spot (available for men only)

Bitter Taste

Cheek Dimples

Cilantro Taste Aversion

Cleft Chin Earlobe Type

Early Hair Loss (available for men only)

Earwax Type

Eye Color

Fear of Heights

Finger Length Ratio

Freckles

Hair Photobleaching (hair lightening from the

Hair Texture

Hair Thickness

Light or Dark Hair

Misophonia (hatred of the sound of chewing)

Mosquito Bite Frequency

Newborn Hair

Photic Sneeze Reflex

Red Hair

Skin Pigmentation

Sweet vs. Salty

Toe Length Ratio

Unibrow

Wake-Up Time

Widow's Peak

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40+ reports

Carrier Status reports*

RSACS

1 variant in the SACS gene; relevant for French Canadian descent

Agenesis of the Corpus Callosum with Peripheral Neuropathy

1 variant in the SLC12A6 gene; relevant for French Canadian descent

Autosomal Recessive Polycystic Kidney Disease

3 variants in the PKHD1 gene

Beta Thalassemia and Related Hemoglobinopathies

10 variants in the HBB gene; relevant for Sardinian, Cypriot, Italian/Sicilian, Greek descent

Bloom Syndrome

1 variant in the BLM gene; relevant for Ashkenazi Jewish descent

Canavan Disease

3 variants in the ASPA gene; relevant for Ashkenazi Jewish descent

Congenital Disorder of Glycosylation Type 1a (PMM2-CDG)

2 variants in the PMM2 gene; relevant for Danish descent

Cystic Fibrosis

29 variants in the CFTR gene; relevant for Ashkenazi Jewish, European, Hispanic/Latino descent

> D-Bifunctional Protein Deficiency 2 variants in the HSD17B4 gene

Dihydrolipoamide Dehydrogenase Deficiency

1 variant in the DLD gene; relevant for Ashkenazi Jewish descent

Familial Dysautonomia

1 variant in the IKBKAP gene; relevant for Ashkenazi Jewish descent

Familial Hyperinsulinism (ABCC8-Related) 3 variants in the ABCC8 gene; relevant for Ashkenazi Jewish descent

Fanconi Anemia Group C 3 variants in the FANCC gene; relevant for Ashkenazi Jewish descent

GRACILE Syndrome

1 variant in the BCS1L gene; relevant for Finnish descent

Gaucher Disease Type 1

3 variants in the GBA gene; relevant for Ashkenazi Jewish descent Glycogen Storage Disease Type Ia 1 variant in the G6PC gene; relevant for Ashkenazi Jewish descent

Glycogen Storage Disease Type Ib 2 variants in the SLC37A4 gene

Hereditary Fructose Intolerance
4 variants in the ALDOB gene; relevant for
European descent

Herlitz Junctional Epidermolysis Bullosa (LAMB3-Related) 3 variants in the LAMB3 gene

Leigh Syndrome, French Canadian Type
1 variant in the LRPPRC gene; relevant for

French Canadian descent

Limb-Girdle Muscular Dystrophy Type 2D

1 variant in the SGCA gene

Limb-Girdle Muscular Dystrophy Type 2E

1 variant in the SGCB gene; relevant for

Amish descent

Limb-Girdle Muscular Dystrophy Type 2I 1 variant in the FKRP gene

MCAD Deficiency 4 variants in the ACADM gene; relevant for

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The 23 and Me PGS test uses qualitative genotyping to detect select clinically relevant variants in the genomic DNA of adults from saliva for the purpose of reporting and interpreting genetic health risks and reporting carrier status. It is not intended to diagnose any disease. Your ethnicity may affect the relevance of each report and how your genetic health risk results are interpreted. Each genetic health risk results are interpreted. Each genetic health risk report describes if a person has variants associated with a higher risk of developing a disease, but does not describe a person's overall risk of developing the disease. The test is not intended to tell you anything about your current state of health, or to be used to make medical decisions, including whether or not you should take an edication, how much of a medication you should take, or determine any test substantial to the status reports can be used to determine carrier status, but cannot determine if you have two copies of any genetic variant. These carrier reports are not intended to tell you anything about your risk for developing a disease in the future, the health of your fetus, or your newborn childs' risk of developing a particular disease alse in life. For certain conditions, we provide a single report that includes information on both carrier status and genetic health risk. Warnings & Limitations: The 23 and Me PGS Genetic Health Risk Report for BRCA1/BRCA2 (Selected Variants) is indicated for reporting of the 1856/eld, and 538/10s. Variants in the BRCA1 gene. The report describes if a woman is at increased risk of developing breast cancer or may be at increased risk of developing prostate cancer. The three variants included in this report are most common in people of Ashkenazi Jewish descent and do not represent the majority of BRCA1/BRCA2 variants in the general population. This report does not include variants in other genes linked to hereditary cancer and the absence of variants included in this report does not rule out the presence of

but the caveat is in small print, and customers certainly extrapolate!

Should customers be allowed to **voluntarily share their DNA information**?

Desirable if it shows low risk of health issues

Analogous to sharing driving metrics that show safe driving, right?

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- → Insurers may begin over-pricing services, then offering "rewards" to those that share Not technically penalizing those that don't share
- → DNA information and health survey answers reflect relatives' data

 The submitter doesn't have a right to breach their privacy

Companies are purchasing access to 23andMe's database

GlaxoSmithKline, Pfizer, Genentech - supposedly for drug design

Partnerships with 14 large-scale health industry companies

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Privacy Policy takes little care over data sharing across companies

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Accurate - Risk of confounding relatives, household members, or even the family pet!

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Over-personalization negates the purpose of insurance

If rates are customized to each individual, the risk/expense-sharing concept is broken Borders on discrimination

Recommendations & Warnings

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Laws must stay ahead of data generation - but that is no easy task

Regulations must be made to protect the *intent* of insurance

Prohibit discrimination and coercion in any form

rather than trying to anticipate specific pieces of data that may be harmful