

Savvi Financial Final Project

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> MISM 6214 Fall 2024 December 4, 2024



Introduction



Enhance personalized financial planning by tackling rising healthcare costs and unpredictable service usage patterns

Utilize demographic and historical data to forecast healthcare needs and inform targeted financial solutions, addressing disparities and enhancing preparedness

Examine MEPS
dataset (2022),
longitudinal data
(2018–2021) to identify
key predictors,
including
demographics,
socioeconomic, and
behavioral factors.



Outcomes-Benefits



Accurate Insights: Predictive models provide precise forecasts of client healthcare needs.



Competitive Leadership: Advanced analytics establish Savvi as an innovator in financial planning.

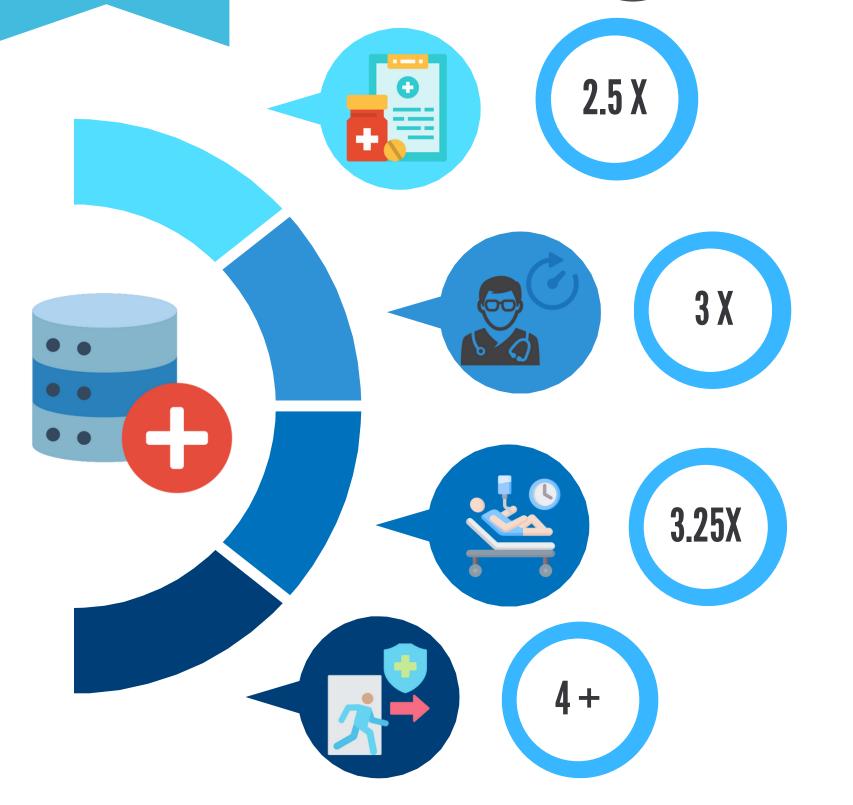


Stronger Client Relationships: Personalized solutions build trust and long-term loyalty.



Market Growth: Identifying underserved groups opens new revenue opportunities.





Prescription Usage

Emergency Room Visits

Inpatient Discharges

Outpatient Visits

On Average , Widowed Individuals used prescription drugs 2.5 times more than average individuals

Low income groups utilized emergency services 3 times more than High income individuals.

Higher discharges for lowincome groups vs. high-income groups, indicating preventative care disparities.

People Aged 65+ had 4 more Outpatient visits than the average person

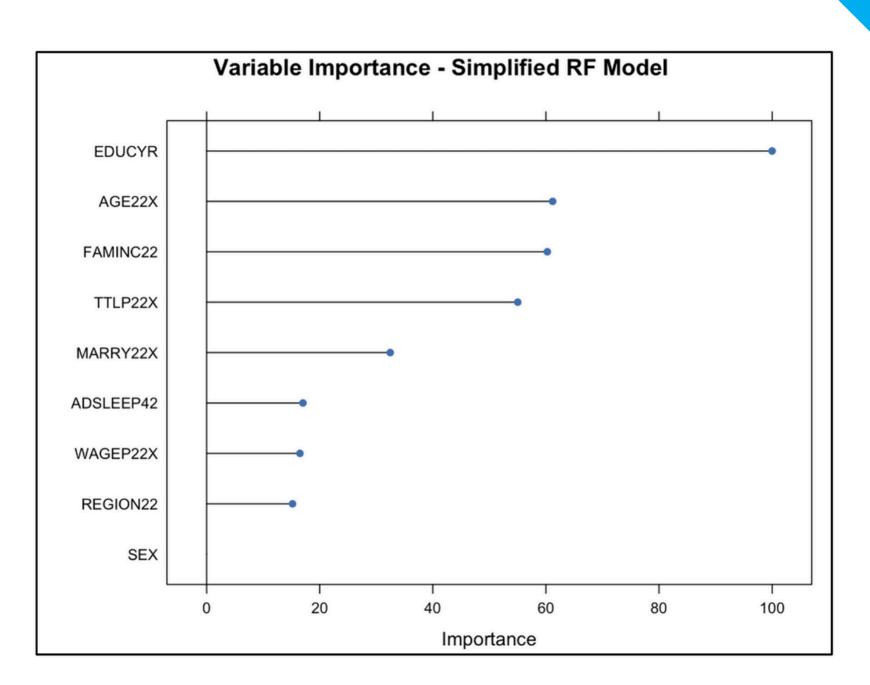


Socioeconomic Disparities:

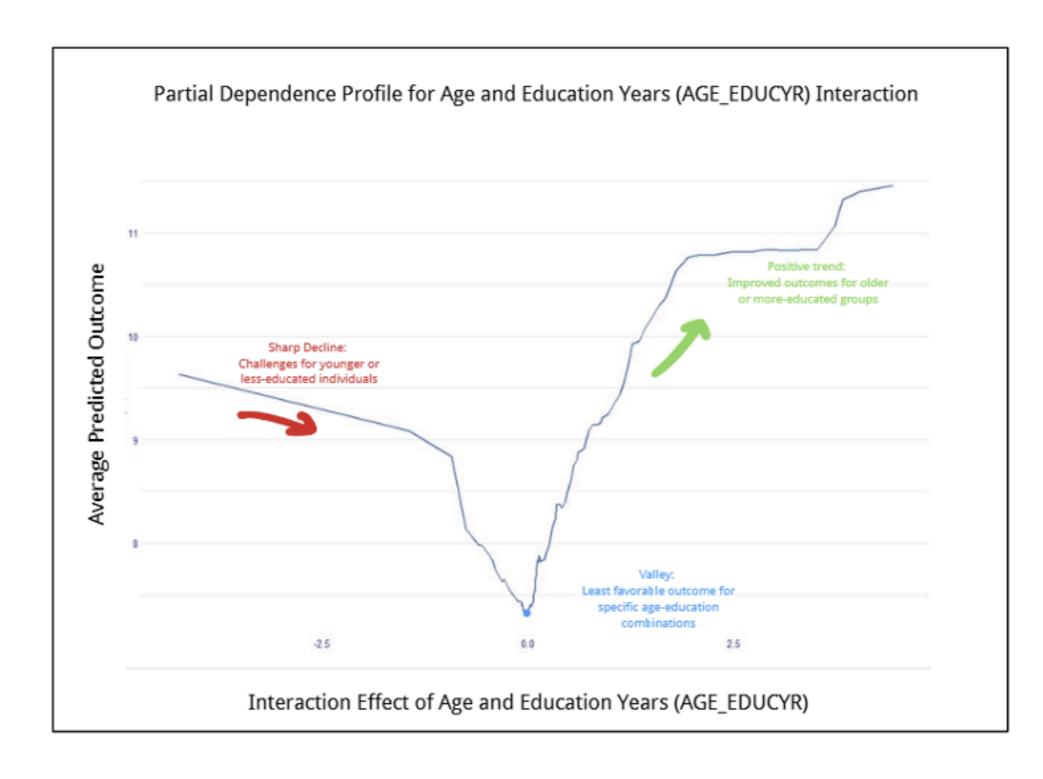
• Income and education significantly influenced healthcare utilization.

Age-Driven Healthcare Engagement:

• Older adults (65+) have the highest service utilization.

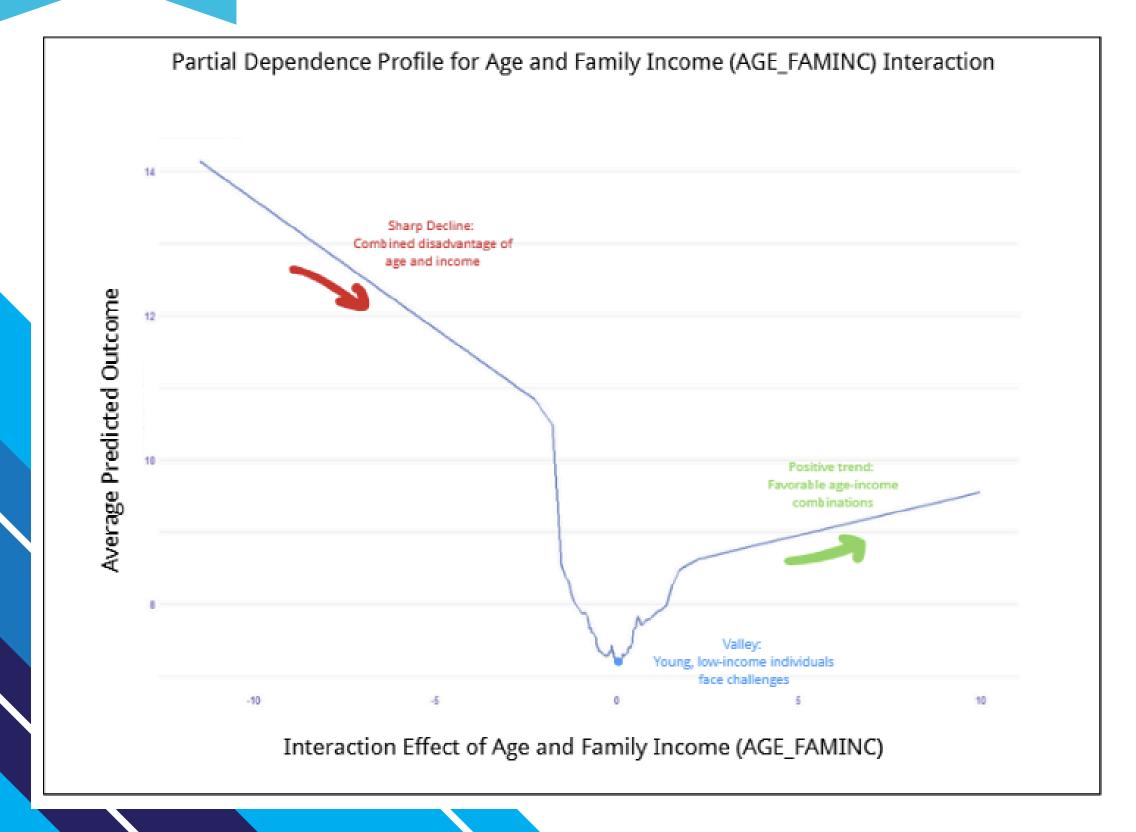






- This pdp helps reveal the combined influence of age and education on the outcome.
- Disadvantages for younger, less-educated individuals and improvements for older, educated groups.





- This pdp helps reveal the combined influence of age and family income on the outcome.
- Young, low-income groups face steep challenges, while outcomes improve with age and income.



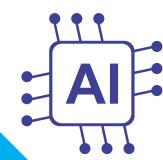
Recommendations



Develop targeted financial products for seniors and low-income families



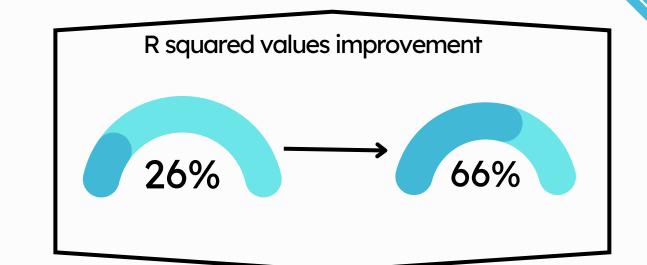
Promote wellness programs to reduce dependency on costly hearthcare services



Use AI-powered tools for personalized solutions



Actions Data Preparation





Data Cleaning

Handling Missing Data

Reserved Code Handling

Imputation (MICE)



Standardization for Continuous Variables.

One hot encoding for Categorical Variables.

Z-Scaling

SMOTE for handling Class Imbalances

Survey Weighted Analysis



Bucketing of key demographic variables
(Age Groups, Income levels)

Adding Interaction Variables
(AGE * EDUCATION)
(AGE * FAMILY INCOME)



Actions Actions Modeling Process

readr haven
readxl devtools
tidyverse pROC dplyr
ggplot naniar smotefamily
SUIVE
corrplot ranger
ROSE mice Caret
caTools
DALEX xgboost

Survey weighted

Random Forest

Data Prep
SMOTE

Survey Weighted Summary
Statistics

Correlation

Feature
Engineering
Variable Importance

ModelModelingEvaluation

R Squared F1 Scores ROC and AUC



Future Actions

Deliver culturally relevant and impactful program rollouts tailored to community needs Continuously assess programs using customer feedback and analytics, refining offerings to optimize effectiveness and ROI

Target
Identification

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Community Engagement



Evaluate and Adjust

Utilize income, ethnicity, and regional data to pinpoint vulnerable demographics Pilot Initiatives



Digital Rollout



Test interventions in high-need regions with elevated ER usage, measure impact, and refine strategies for nationwide scaling

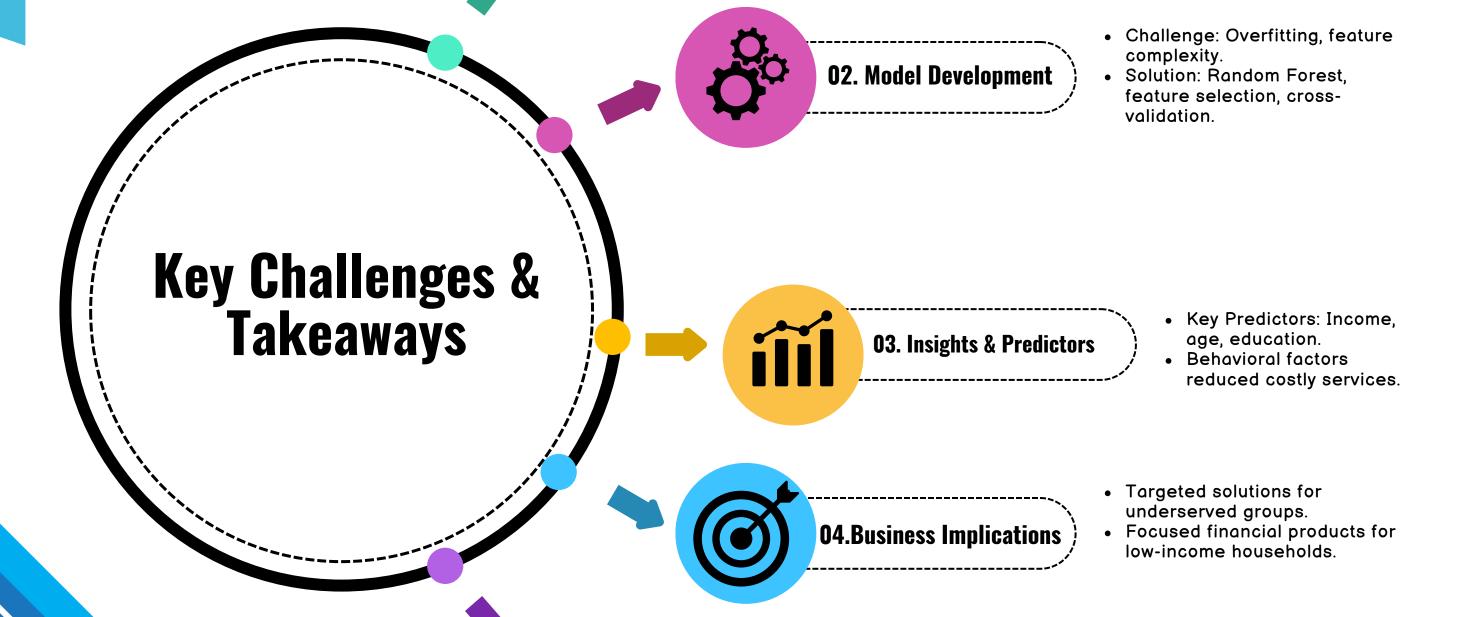
Invest in scalable tools that merge health and financial insights for hyper-personalized user experiences





01. Data Preparation

- Challenge: Large complex data, class imbalances.
- Solution: Imputation, SMOTE for balancing.





- Enhance model generalizability.
- Address unmeasured external factors.



Reflections on Technical and Analytical Lessons

Technical Reflections

Data Challenges

Handling imbalanced and incomplete data using SMOTE and imputation

Feature Engineering Value

Interaction variables and scaling improved predictive utility.

Model Selection Challenges

Balancing Random Forest accuracy with interpretability.

Computational Optimization

Efficient coding handled scale and redundancy challenges.

Survey Weighting

Applying survey weights improved generalizability.

Analytical Reflections

Key Role of Predictors

Socioeconomic factors (income, education) are key drivers.

Behavioral Metrics

Metrics like mental health reduce reliance on costly services.

Generalizability Challenges

Real-world disparities highlight the need for further validation.

Patterns in Disparities

Systemic healthcare inequities were uncovered through analysis.

Impact of Feature Engineering

Advanced features added depth and value to the models.













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