

Moral Hazard in Health Insurance: Modelling the Behaviour of the Insured and the Optimal Contract

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ASTIN
Non-Life Insurance

About the speaker



Costin Oarda

- Qualified Actuary of the French and Swiss Associations of Actuaries (IA & SAA)
- Reserving Actuary, CSS Insurance
- Research on Moral Hazard Problem (Health Insurance)



CSS Insurance

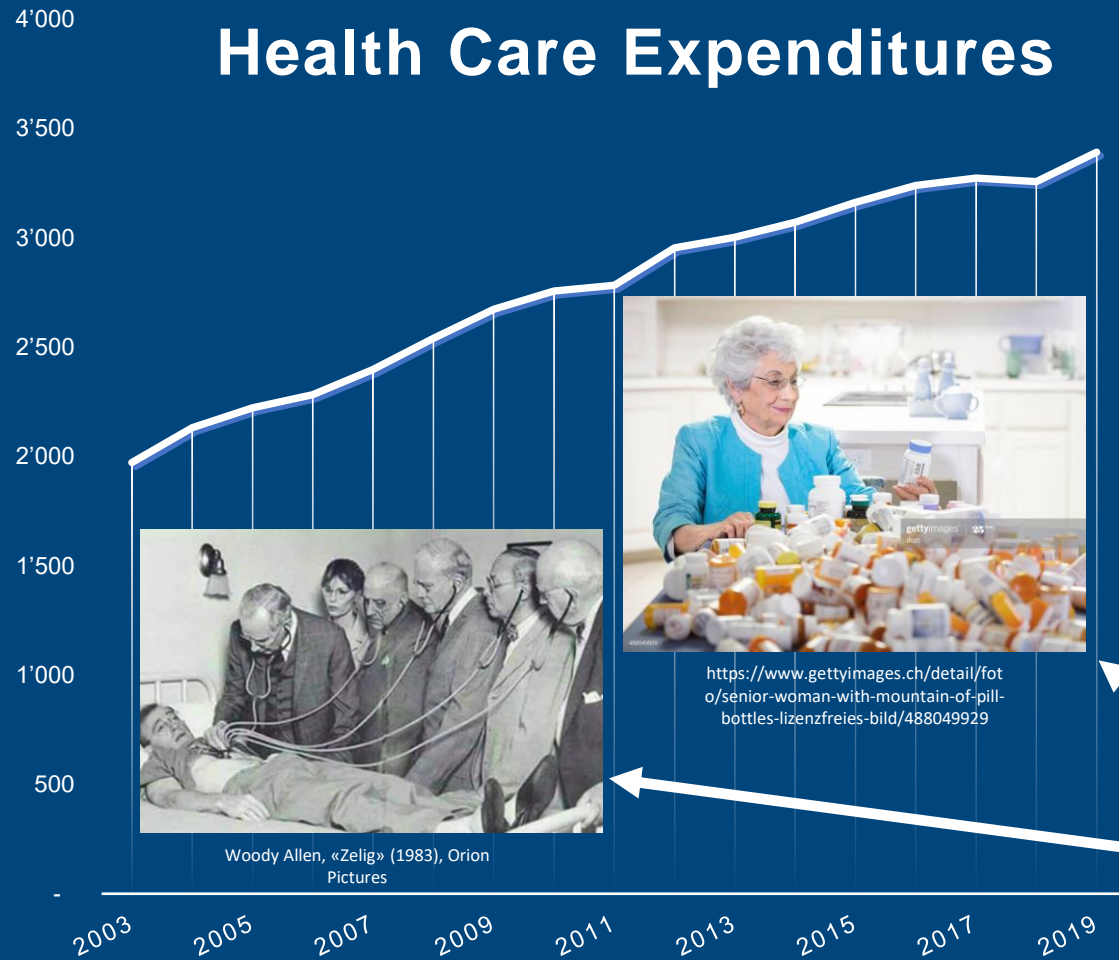
- Market leader in health insurance in Switzerland
- 1.6 million policyholders (31.12.2020)
- 6.5 billions in premiums earned (2020)

1. Introduction

1. Introduction

Moral Hazard in Health Insurance

Health Care Expenditures

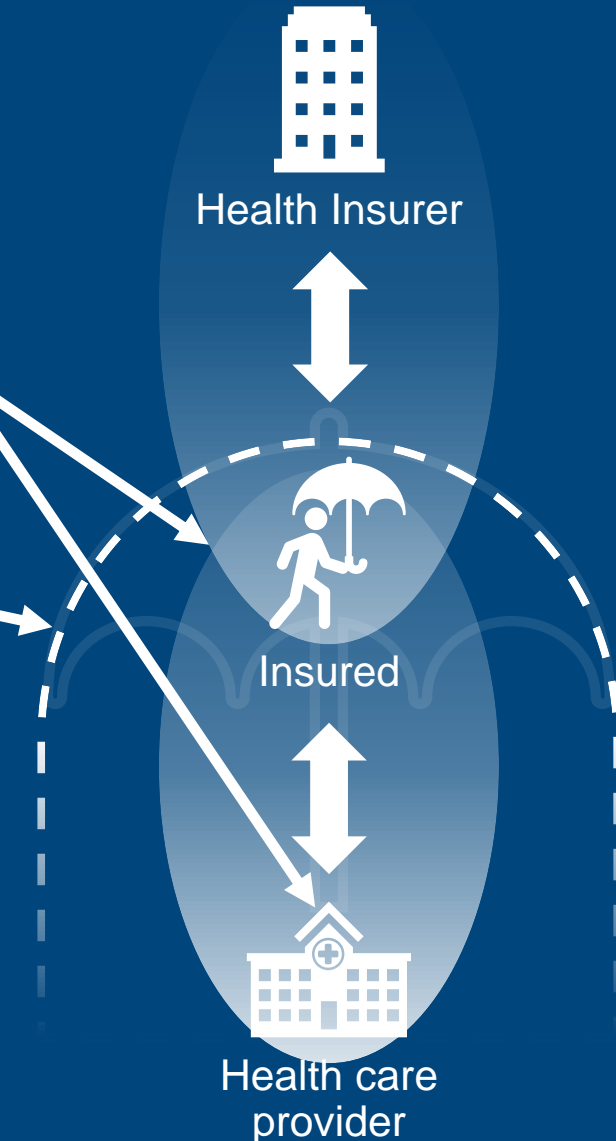


Moral Hazard Problem

1. Information asymmetry

2. Inefficient incentives in the health system

3. Non-self-responsible behaviour / inefficiency



1. Introduction

Moral Hazard in Health Insurance

Moral Hazard: a solution?

Behavioural Model

Optimal Contract
Resolution
Algorithm

1. Introduction

Insurance Contract, a Risk Transfer

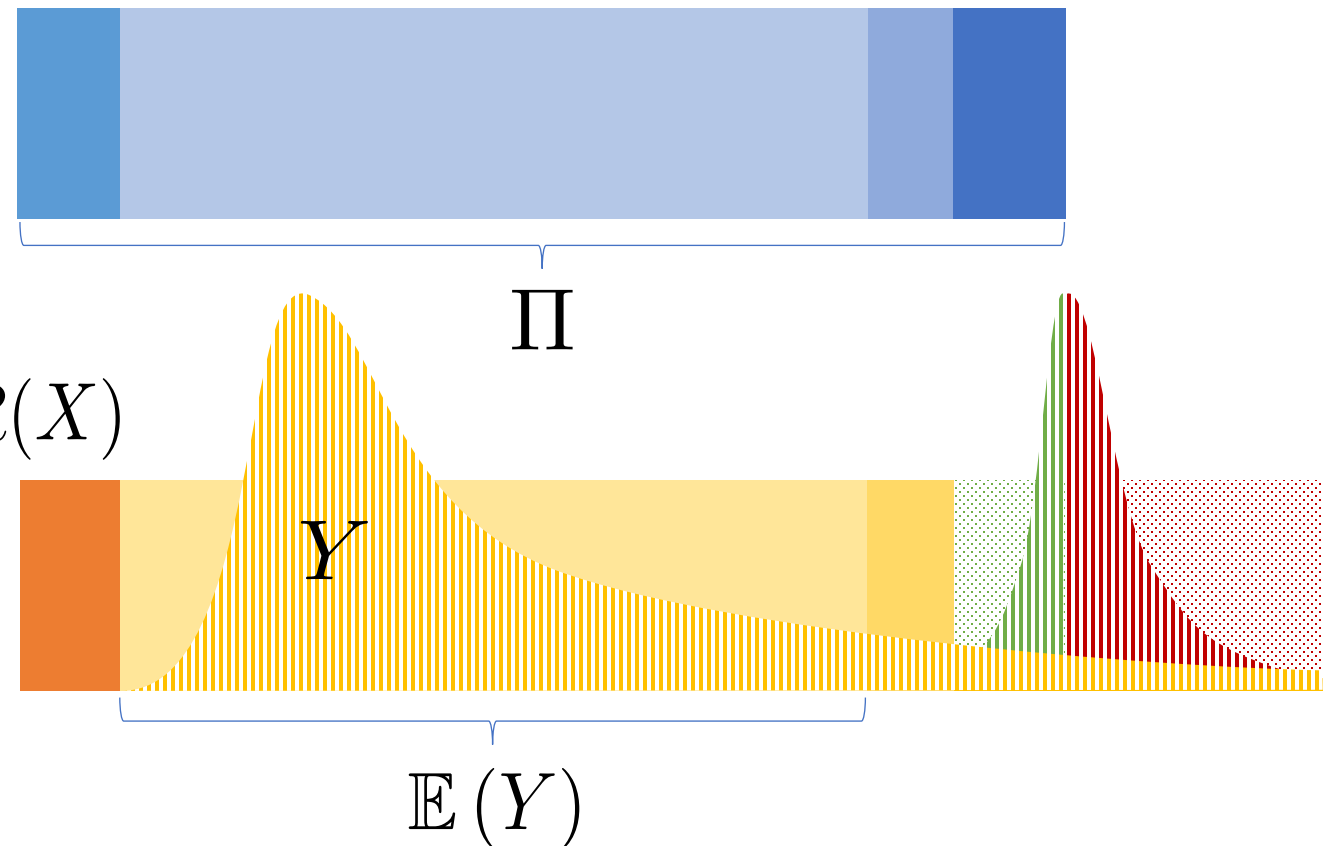
Insurance contract (Π, R) for the risk transfer $X|F_{\text{obs}}, F_{\text{inobs}}, E$

■ Insured's liability

- Premium Π

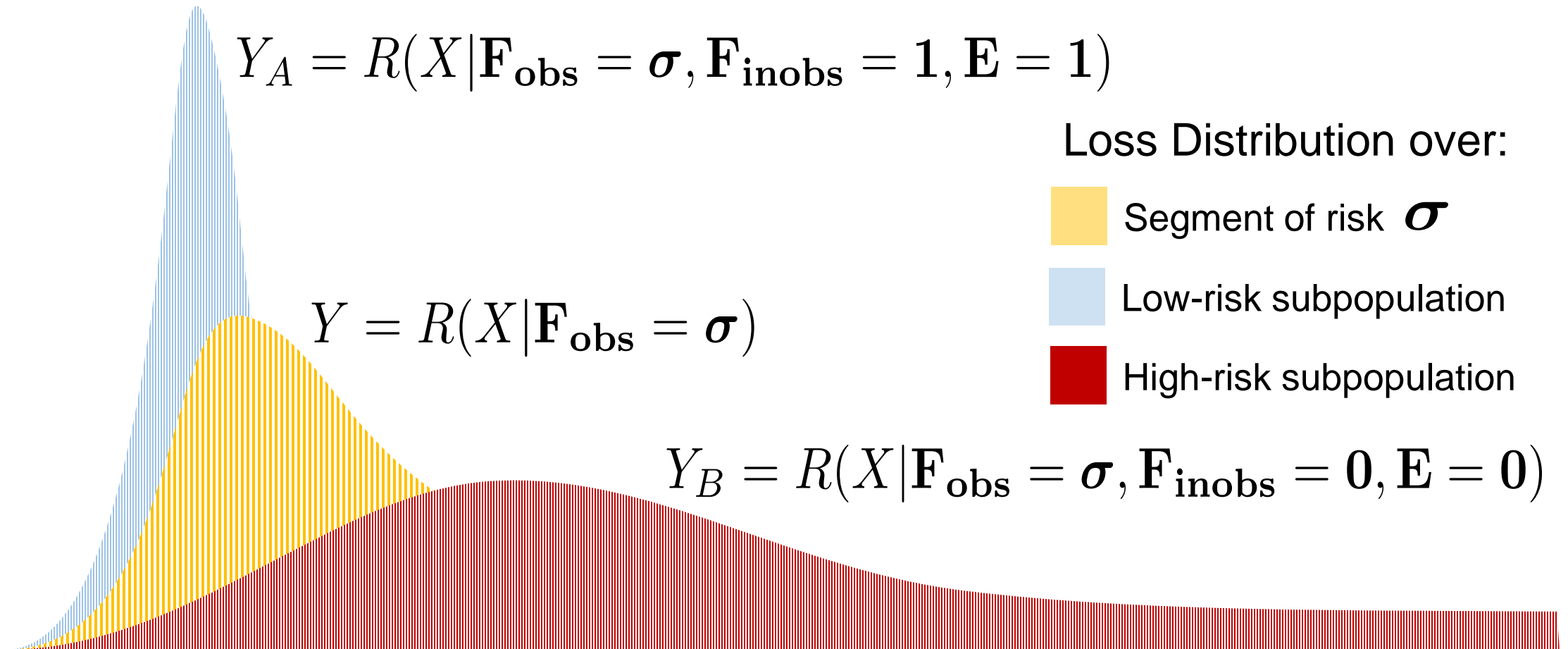
■ Insurer's liability

- Administrative costs
- Aggregate claim $Y = R(X)$
 - Pure premium $\mathbb{E}(Y)$
 - Cost of Capital
- Insurer's Profit
- Insurer's Deficit



1. Introduction

Impact of Contract Design on Loss Distribution



1. Introduction

Dealing with the Moral Hazard Problem

The Research Problem

- Is it possible to model the behaviour of an insured linked to a complementary health insurance portfolio by quantifying his level of effort to reduce his risk exposure during the life of the contract?
- If so, how can we model the optimal contract in the presence of moral hazard?

2. Methods

2. Methods

Some Notations and Concepts

- Contracts $(\Pi, R_{\Lambda, \Psi})$ are with reimbursement functions $R_{\Lambda, \Psi}$ with two parameters
 - Coverage Ceiling Λ
 - Deductible Ψ
- Output x (of risk X) is a signal from effort \mathbf{e} to limit the risk
- Wealth $W_{\Pi, R_{\Lambda, \Psi}}(x)$
- Utility of wealth $u(W_{\Pi, R_{\Lambda, \Psi}}(x))$
- Cost of effort $c(\mathbf{e})$

2. Methods

Expected Utility of the Insurer and the Insured

- Insurer's expected profit V

$$V_{\Pi, R_{\Lambda}, \Psi}(\mathbf{e}) = \Pi - \mathbb{E}(R_{\Lambda, \Psi}(X) | \mathbf{E} = \mathbf{e})$$

- Insured's expected utility U

$$U_{f_{X|\mathbf{E}}, \Pi, R_{\Lambda}, \Psi}(\mathbf{e}) = U_{f_{X|\mathbf{E}}, \Pi, R_{\Lambda}, \Psi}^{\text{Wealth}}(\mathbf{e}) - c(\mathbf{e})$$

Where the expected utility of wealth is defined by

$$U_{f_{X|\mathbf{E}}, \Pi, R_{\Lambda}, \Psi}^{\text{Wealth}}(\mathbf{e}) = \int_{\mathbb{R}_-} u(W_{\Pi, R_{\Lambda}, \Psi}(x)) f_{X|\mathbf{E}}(x|\mathbf{e}) dx$$

2. Methods

Optimal Contract Model

- Optimal Contract Model under moral hazard

$$\begin{aligned} & \max_{(\Pi, \Lambda, \Psi, \mathbf{e}_{\text{CPI}}) \in (\mathbb{R}_+)^3 \times [0, 1]^J} V_{\Pi, \Lambda, \Psi}(\mathbf{e}_{\text{CPI}}) \\ & \text{subject to } \begin{cases} \mathbf{e}_{\text{CPI}} = \operatorname{argmax}_{\mathbf{e} \in [0, 1]^J} U_{\Pi, \Lambda, \Psi}(\mathbf{e}) \\ U_{\Pi, \Lambda, \Psi}(\mathbf{e}_{\text{CPI}}) \geq \underline{U} \end{cases} \end{aligned}$$

- Problem solving contracts $(\Pi_*, R_{\Lambda_*, \Psi_*})$ are the optimal contracts

2. Methods

Behavioural Model

Construction of Effort Indicators

- Data Mining
- Segmentation
- Generalized Linear Mixed Model
 - Frequency
 - Intensity
- Transformation of the negative of the residual into the standard uniform distribution $E \sim \mathcal{U}(0; 1)$

2. Methods

Optimal Contract Resolution Algorithm

■ Preparation

- Design the theoretical model and modelling framework
- Implement in SAS & R
 - Behavioural Model
 - Optimal Contract Resolution Algorithm
- Estimating parametric copulas of (X, E) and the conditional density $f_{X|E}$

■ Initialization

- Calibrate the utility function (risk aversion)
- Calibrate the cost of effort (participation and incentive constraints)

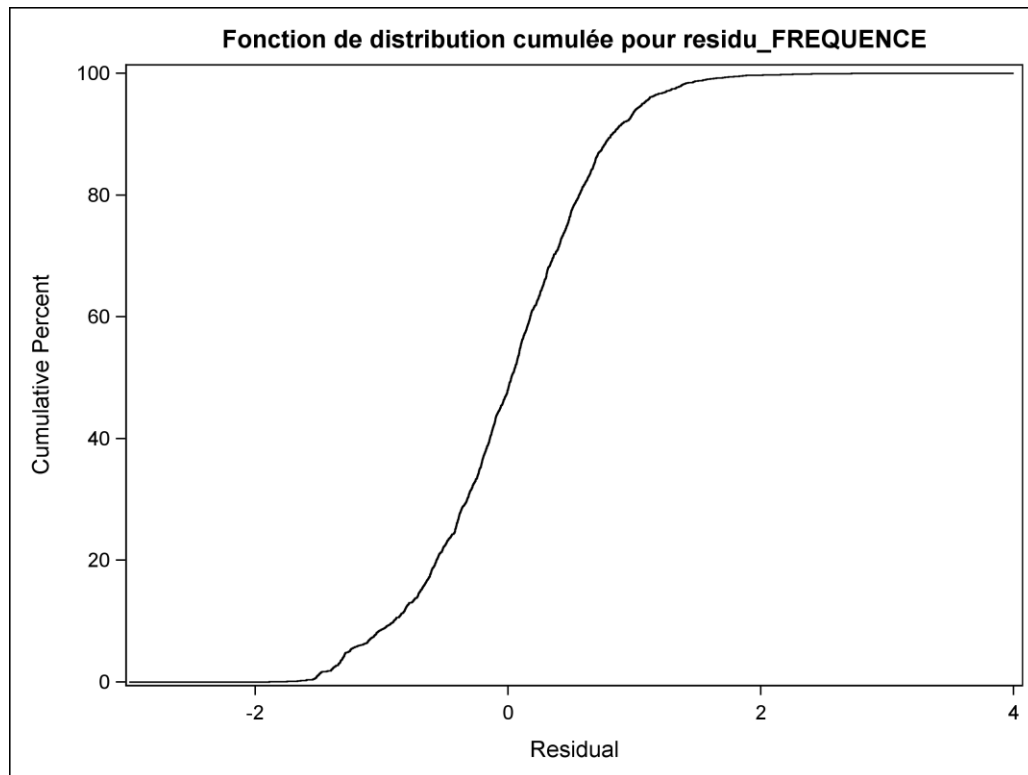
■ Resolution

3. Results

3. Results

Behavioural Model (Frequency)

Residual Distribution (Frequency Model) over the Insured Segment



Construction of the Effort Indicator in Frequency

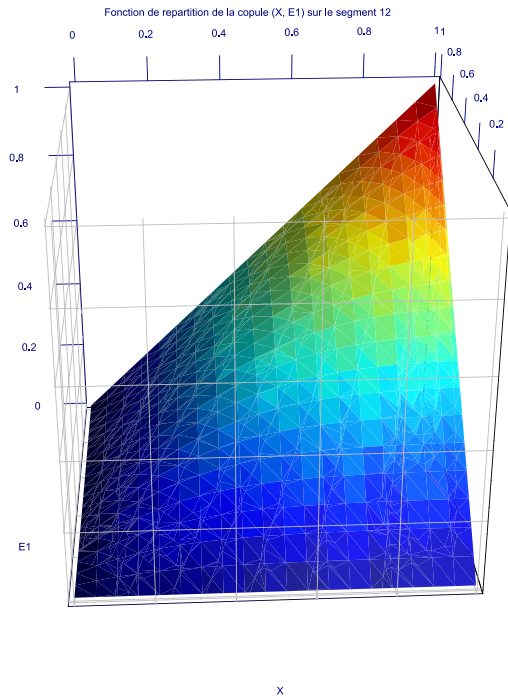
- Generalized Linear Mixed Model
- Transformation of the negative of the residual into the standard uniform distribution $E \sim \mathcal{U}(0; 1)$
- Effort indicator for $i = 4627$:

$$e = 0.42$$

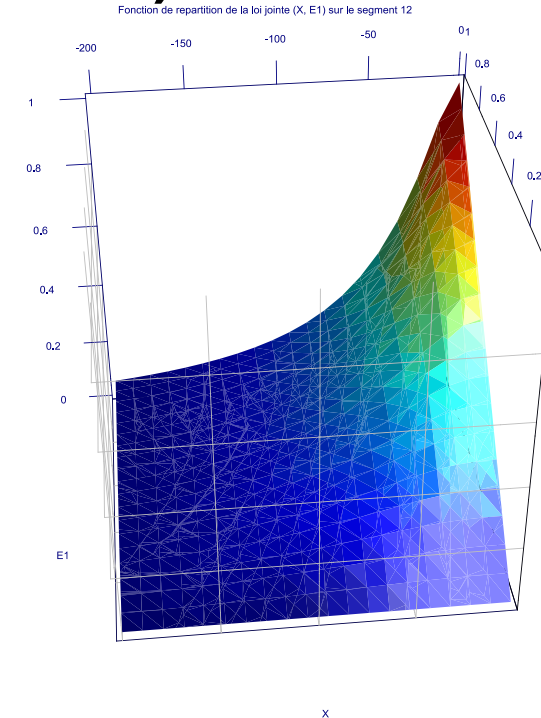
3. Results

Parametric Copula Estimation

Cumulative Distribution Function
of the Copula (X, E1)
(Segment 12)



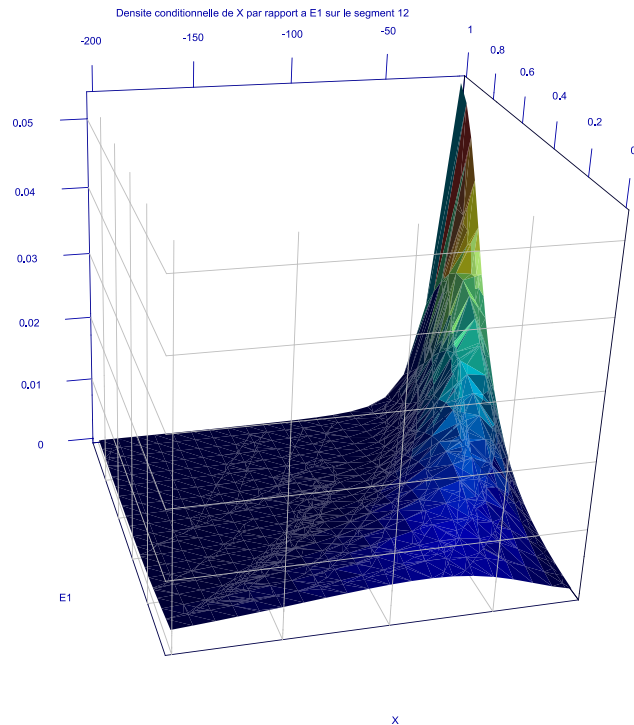
Cumulative Distribution Function
of the Joined Distribution (X, E1)
(Segment 12)



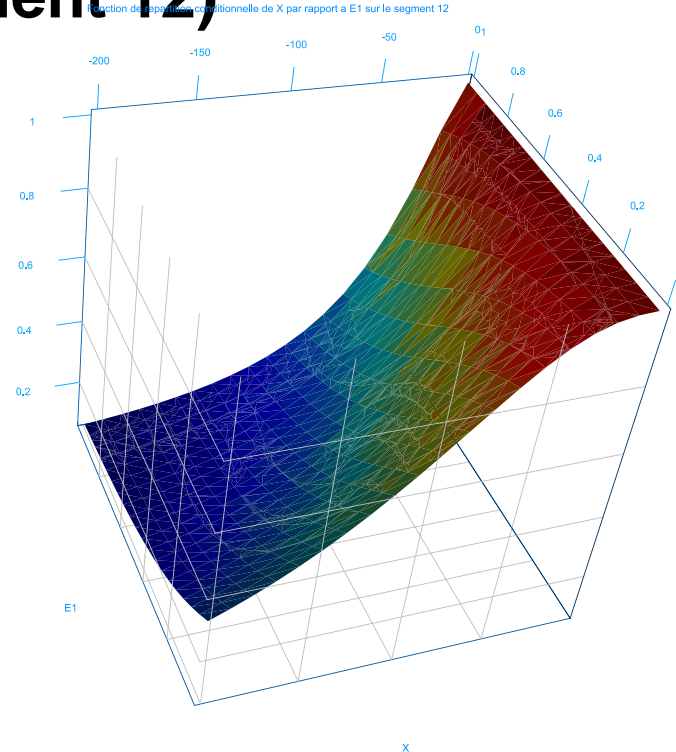
3. Results

Conditional density estimation

Conditional Density Function of Output X Given the Effort E1 (Segment 12)

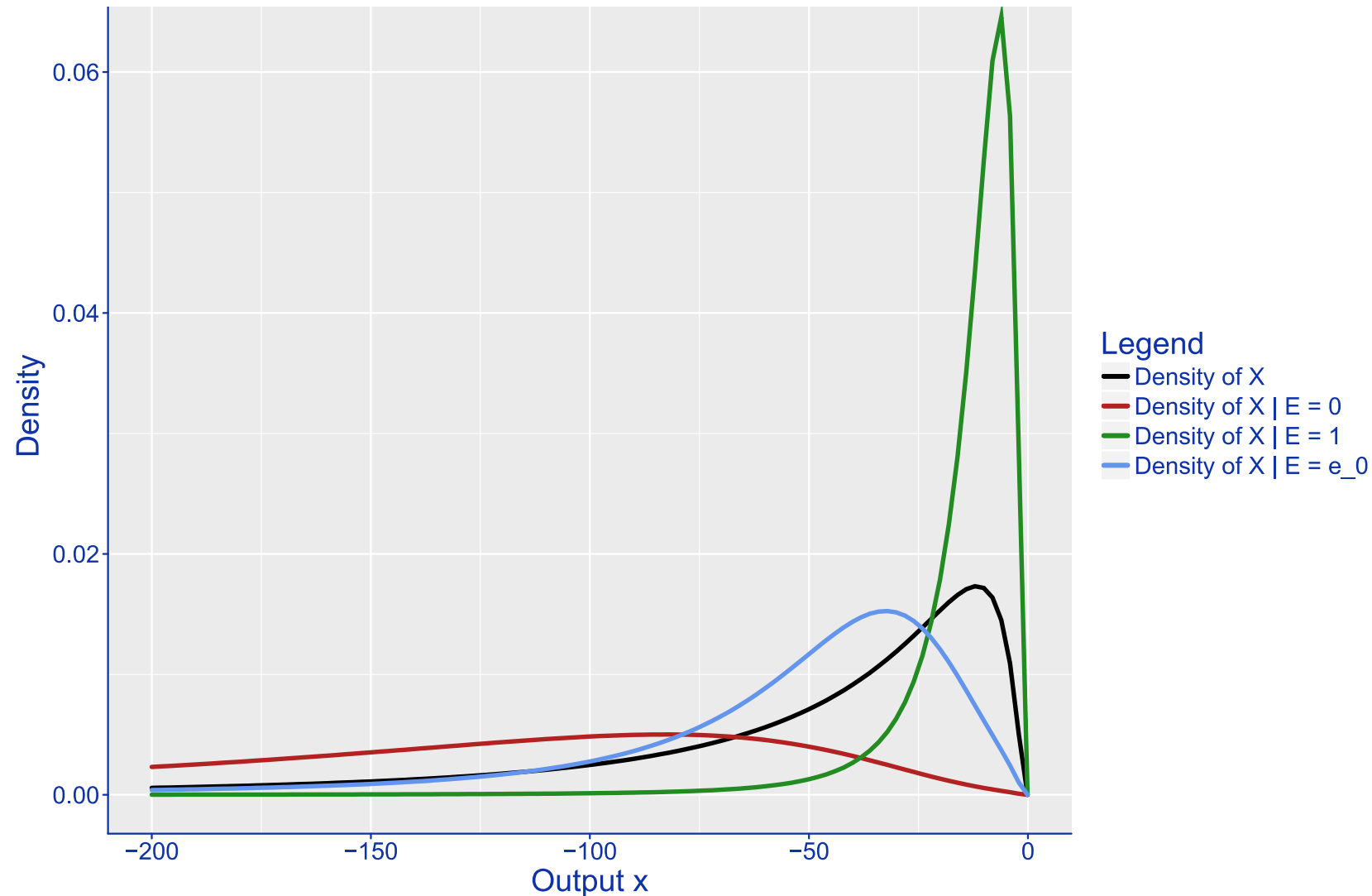


Cumulative Distribution Function of Output X Given the Effort E1 (Segment 12)



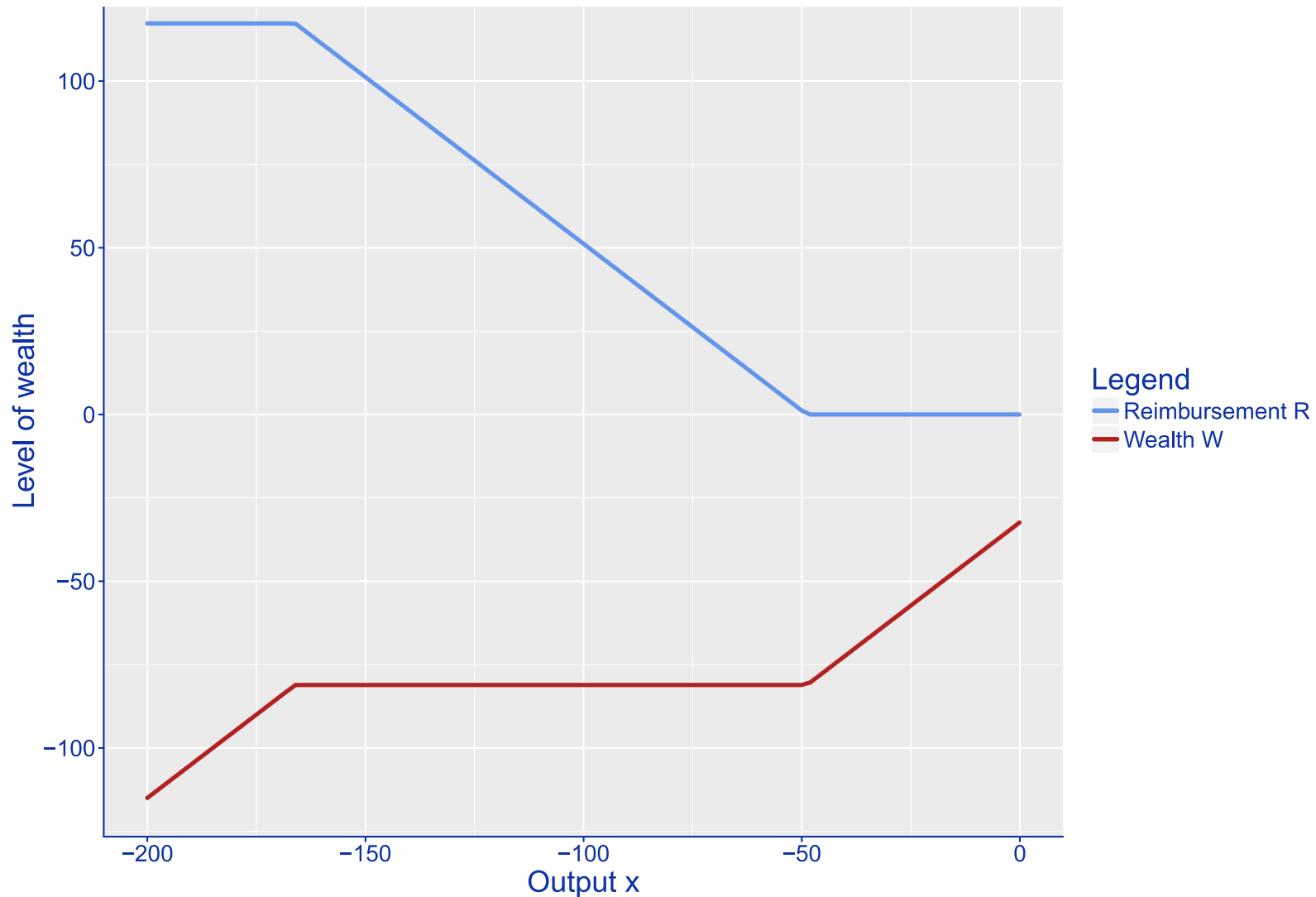
3. Results

Influence of Effort on the Distribution of Risk X



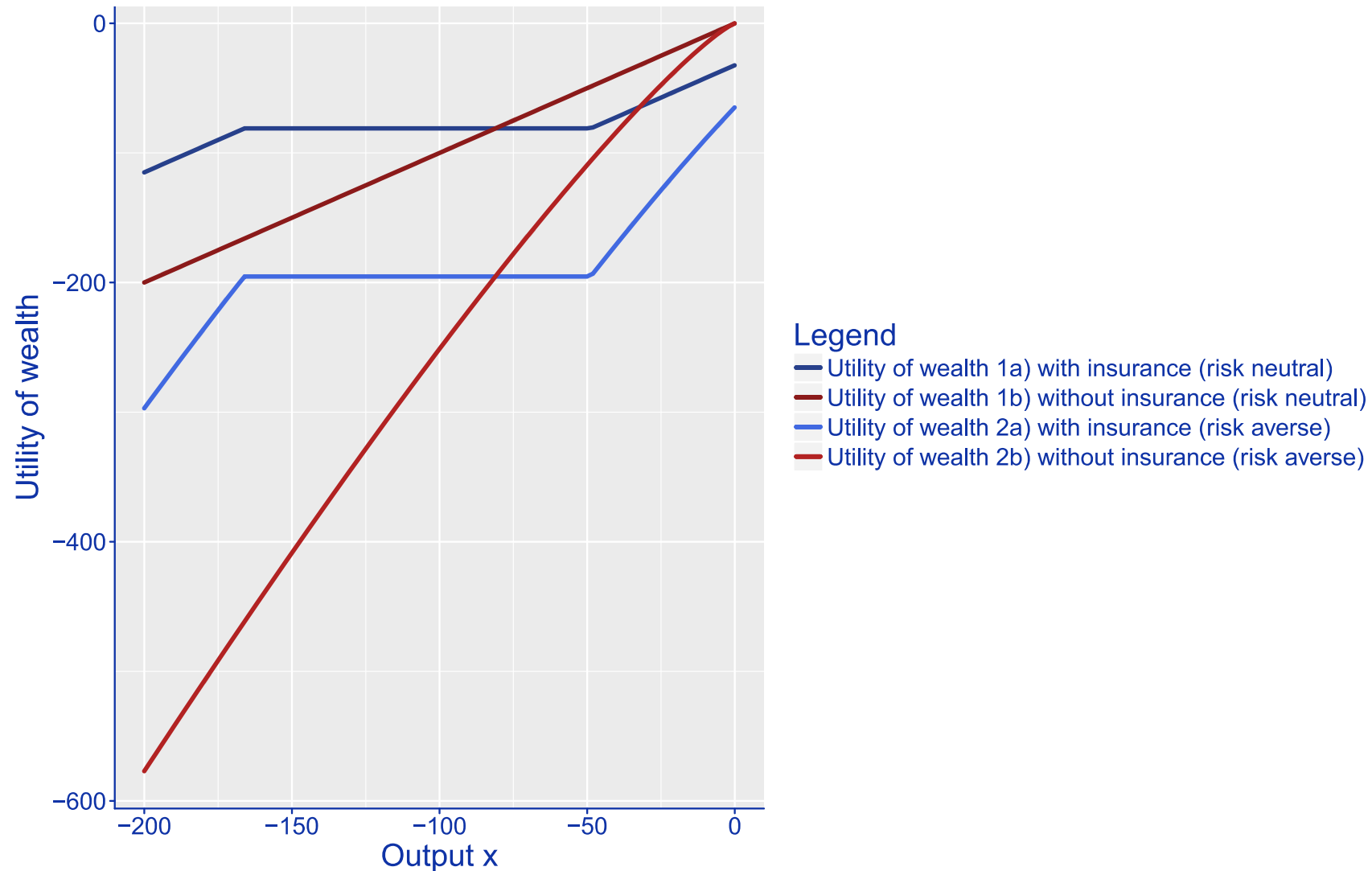
3. Results

Influence of Reimbursement on Wealth



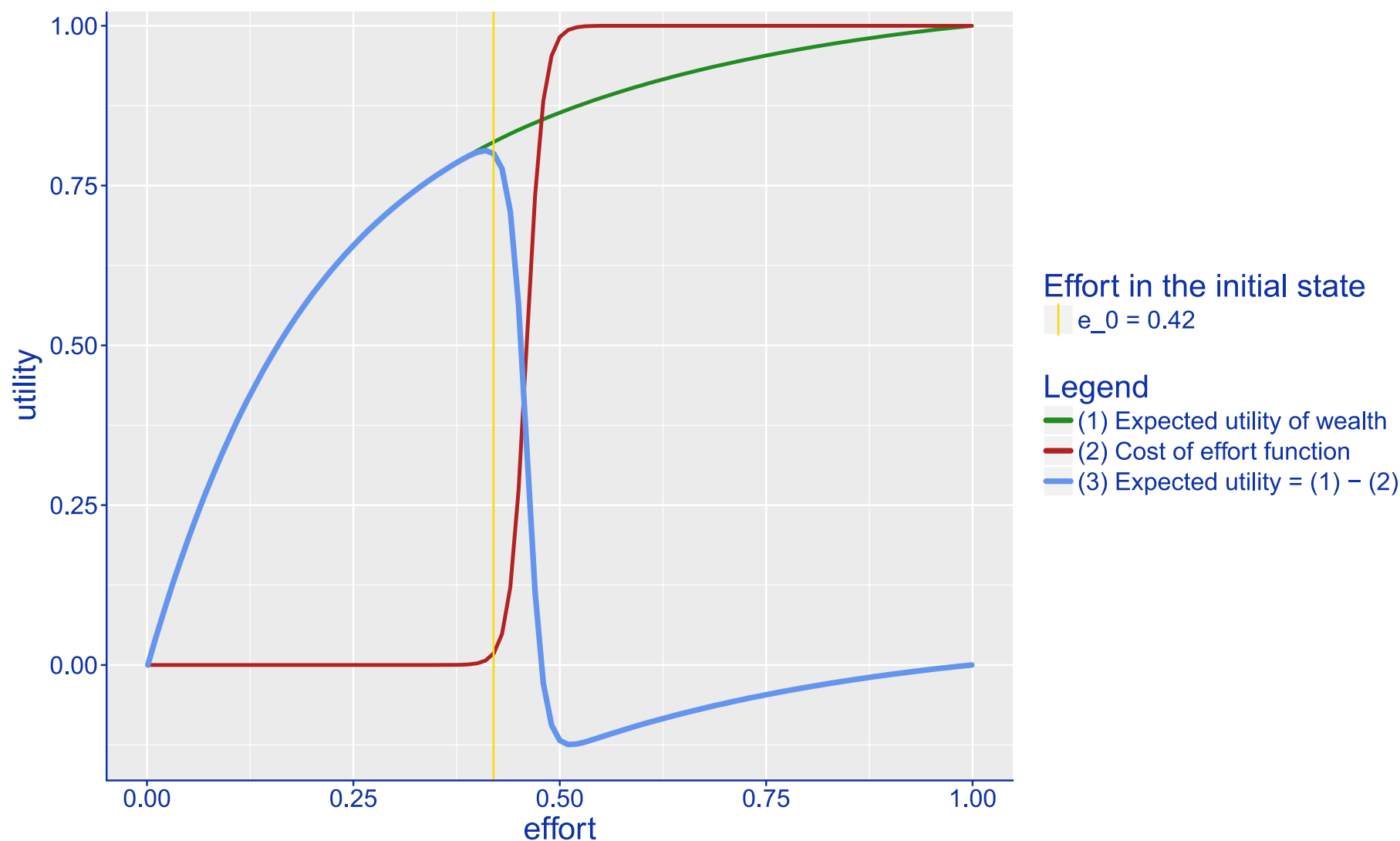
3. Results

Utility of Wealth and Risk Aversion



3. Results

Initializing the Algorithm: Calibrating the Model



3. Results

Optimal Contract Resolution Algorithm

- The Optimal Contract Resolution Algorithm converged
- We obtained the optimal contract (optimal premium and reimbursement function) for each insured
- With the new contract design, the expected annual profit of the insurer increases up to 320% (in a monopolistic market)

4. Conclusion

4. Conclusion

- Innovative approach
 - Operational application of Contract Theory to Health Insurance
 - Behavioural Model
 - Optimal Contract Resolution Algorithm
- Next challenges of the Optimal Contract Resolution Algorithm
 - Health Capital of the insured
 - Moral hazard of the health care provider
 - Competitive situation

Thank you for your attention

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