



Wearables in life insurance

The evidence, emerging developments and potential applications

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23 November 2017

Agenda

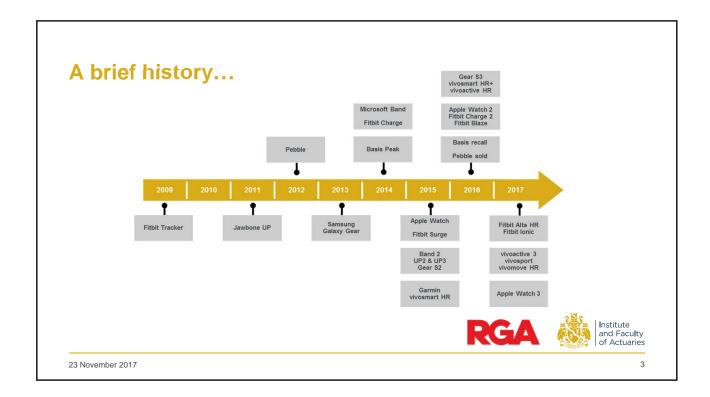
- · Examples of wearable metrics in life insurance today
- The science behind these metrics
- Other metrics from mainstream devices
- Emerging developments
- Insurance applications
- The Four Rs

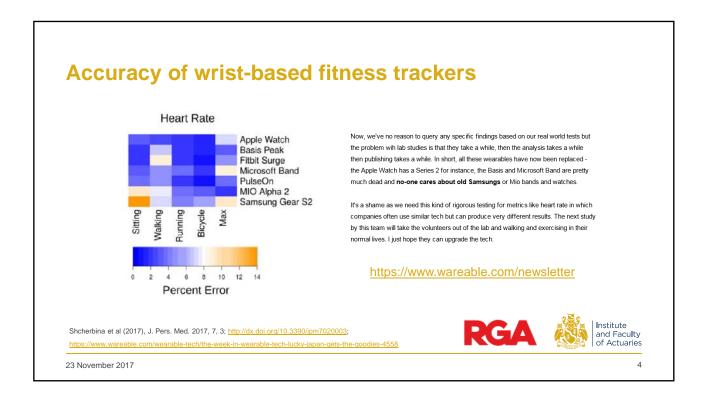
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Institute and Faculty of Actuaries

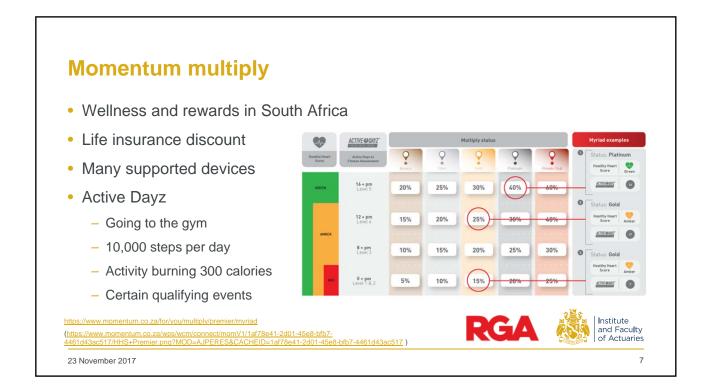


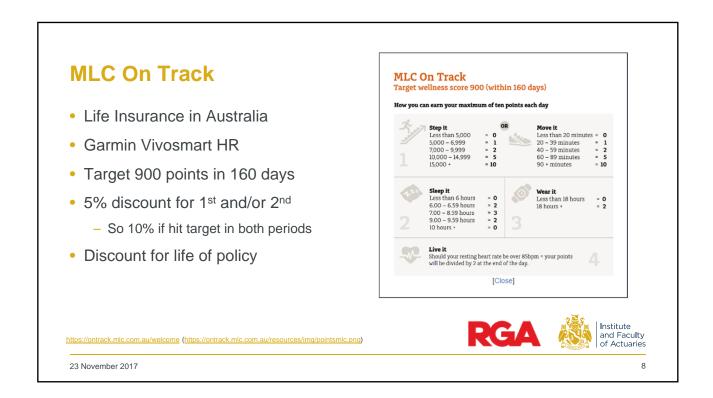


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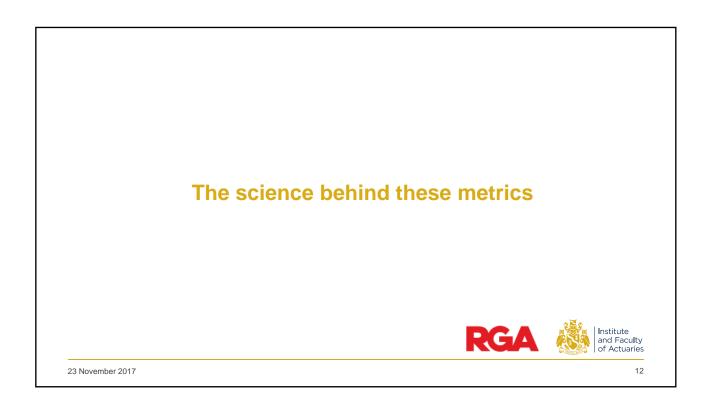




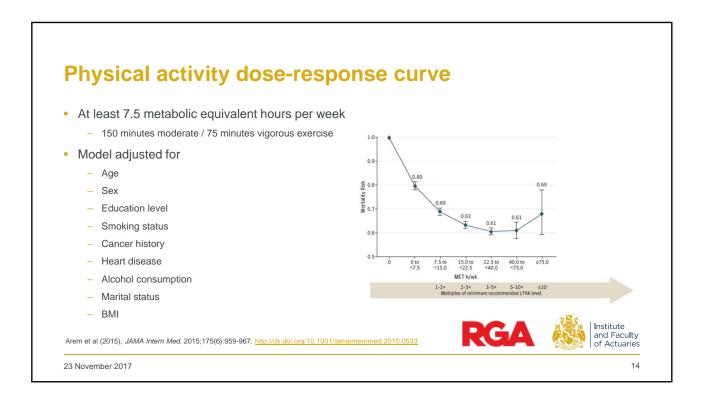


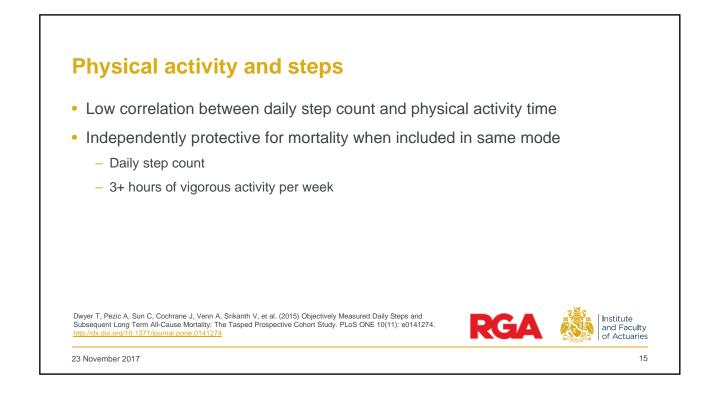
Vitality					
 Wellness and rewards in UK 					
Life insurance		NONZE STATUS	SULER STATUS	1600	2400
 Upfront discount with annual incr 	ease	POINTS STATUS	POINTS	• 1600 POINTS • 010 STATE	POINTS POINTS
 Many supported devices 					
 Vitality activity points 	Select	2%	1%	0%	-1%*
 Steps per day 	Healthy	3%	2%	1%	0%
 Gym visits 	Everyday	4%	3%	2%	1%
 Activity as % of max HR 					
 Activity at calories per hour 				-2 - 5-	Institute and Faculty

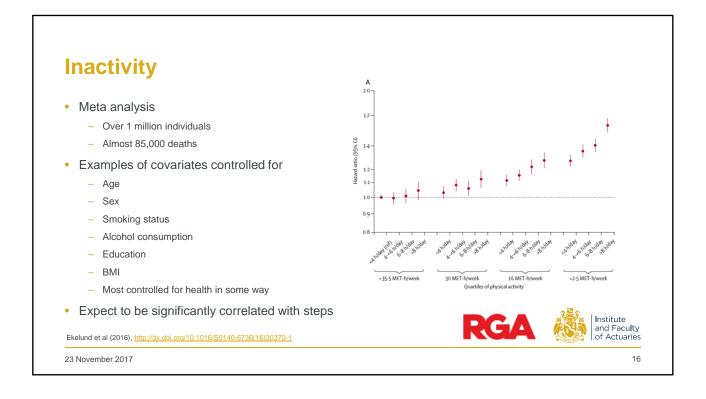
Steps		
 Activity 		
 Inactivity 		
 Resting heart rate 		
• Sleep		

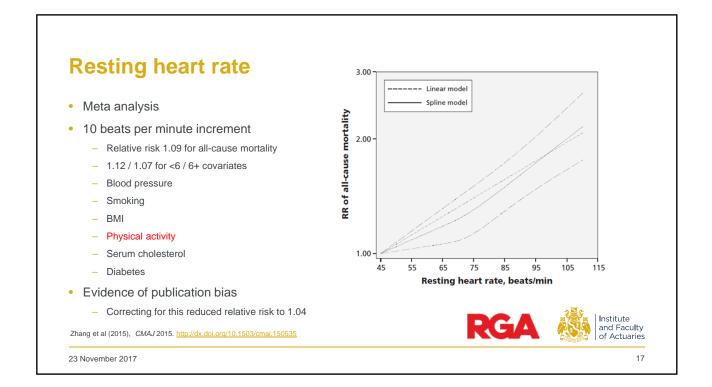


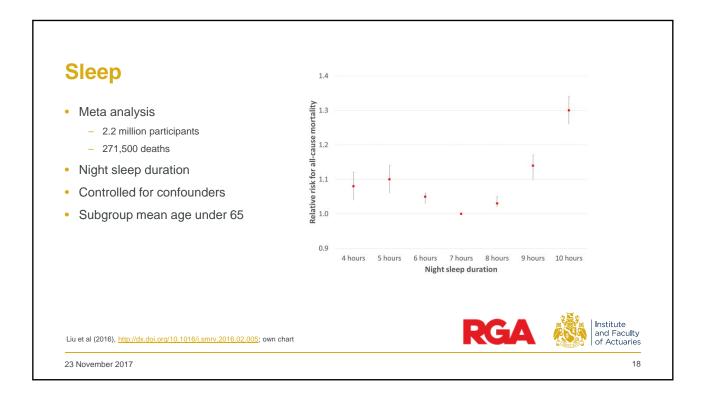
Ave	erage daily steps at baseline				
All-	cause mortality adjusted hazard ratio	0.94 per 1,000 increas	se in steps		
• Adj	usted for				
	Age Sex	Baseline steps	Increase	Adjusted hazard ratio	
-	Biiii	7,000	-	-	
_	Energy intake Smoking status	8,000	1,000	0.94	
_	Alcohol consumption	10,000	3,000	0.83	
_	Education				



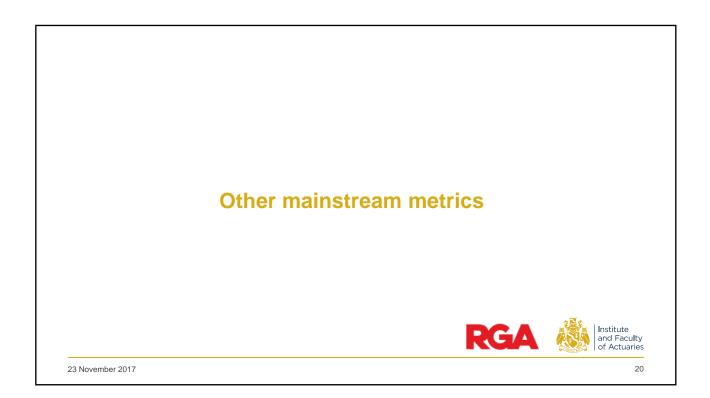


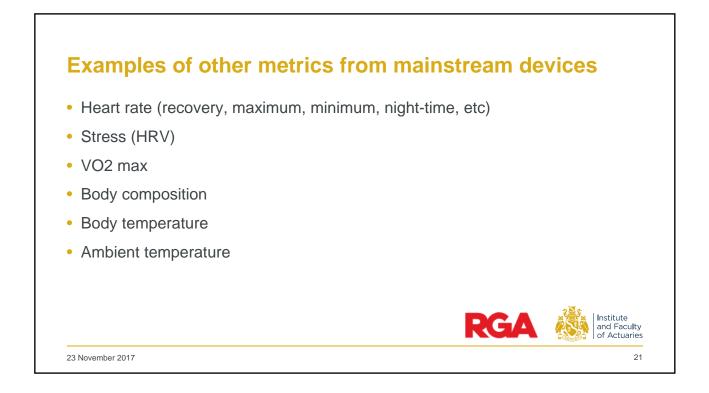






	Standard	Preferred	Relative mortality
Steps	7,000	10,000	0.83
Activity	0-1x	1-2x	0.86
Inactivity	8+ hrs	6-8 hrs	1.00*
Resting heart rate	70 bpm	60 bpm	0.96
Sleep	6 hrs	7 hrs	0.95
			0.65





 Maximum rate at which oxygen can be used 	during exercise)			
 Indication of cardiorespiratory fitness 	Males below age 60				
 Model adjusted for 	2.4				
– Age	2				
- Smoking	Adjusted hazard ratio				
 Alcohol consumption 	1.6				
 Marital status 	1.4				
 Family history of disease 	P 1.2		•		
 Education 	1	•			
	0.8	>100%	85-100%	<85%	
		Estimated CRF as a pe	ercentage of age-pred	licted CRF	





