

January 17, 2020

The Honorable Jon Godfread
Chair, NAIC Artificial Intelligence (EX) Working Group
The Honorable Mark Afable
Vice Chair, NAIC Artificial Intelligence (EX) Working Group
1100 Walnut Street, Suite 1500
Kansas City, MO 64106-2197

Re: Comments to NAIC Principles on Artificial Intelligence

Dear Commissioners Godfread and Afable:

Thank you for the opportunity to submit comments on the AI Working Group (working group) Draft Artificial Intelligence (AI) Principles (draft AI principles). The potential impact of AI on the insurance industry is far reaching and transformational. The National Association of Insurance Commissioners (NAIC) has a unique role in helping guide appropriate regulation in the development, use and application of AI within the insurance industry. Thank you for the opportunity, on behalf of the American Medical Association (AMA), to provide comments on these draft AI principles, which nicely encapsulate the broad issues of AI.

As a leader in health care, the AMA's focus related to AI is the potential impact of augmented intelligence on health care. Over the past few years, the AMA has developed robust policy to advance the role of AI in meeting the quadruple aim and to ensure that the evolution of AI in medicine benefits patients, physicians and the entire health care community. While our policy development is formed through the lens of health care, many issues related to AI in health care are equally applicable and relevant across industries. Our comments are intended to reflect the understanding that the goal of the draft AI principles is to serve as a guidance document of high-level overarching principles, not limited to health care. While the draft AI principles incorporate many key principles related to AI, including fairness, accountability, transparency and safety, the AMA recommends that the working group consider adding or amending language to address other key issues including privacy and bias. We also encourage the working group to strengthen the current language related to transparency. We believe these suggestions as outlined below would further improve the draft AI principles.

It is important to note that the AMA uses the term "augmented intelligence" instead of "artificial intelligence" based on the overarching principle that AI in health care is meant to further augment or enhance a human's intelligence rather than replace it.

Fair and Ethical

AI systems must safeguard individual privacy interests and preserve the security and integrity of personal information. While this is particularly important in the context of health care, it is not unique to health

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care information and is equally important across all lines of insurance. The AMA, therefore, recommends adding “privacy” to the list of laws and regulations in paragraph a. of this section.

When discussing the responsible stewardship of AI, the AMA would encourage NAIC and the work group to also address the impact of implicit or explicit bias in AI systems which can have far reaching implications and unintended consequences on the fair and ethical application of AI to entire populations. This should be of great concern within the insurance industry. The AMA, therefore, recommends adding the following underlined language to paragraph b. of this section, “The AI system should generate benefits for people that are greater than the cultural, social, and legal costs. AI systems must not be designed to **exacerbate bias**, harm or deceive people and should be implemented in a manner that minimizes negative outcomes.”

Accountable

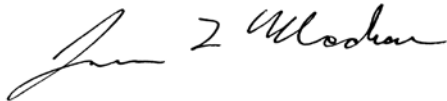
The AMA believes accountability of AI systems should be aligned so the person or entity that is most likely to understand the potential risks associated with the AI system and who is in the best position to avert or mitigate harm do so through design, development, validation and implementation. We, therefore, encourage NAIC and the work group to incorporate this principle into this document.

Transparent

Transparency is key to determining the level of risk associated with an AI system, potential bias in data, as well as the safety and efficacy of the system. The AMA, therefore, encourages NAIC and the work group to replace the word “should” with “must” in the first sentence of this section. Simply put, without full transparency, regulators will not have the ability to determine if the AI system meets the other principles on AI outlined in the document.

Once again, on behalf of the AMA I thank you for the opportunity to provide these comments. For additional background, please find attached two documents outlining AMA policy on AI in health care. If you have any questions or would like additional information please contact Kim Horvath, JD, Senior Legislative Attorney at (312) 464-4783. We look forward to working with NAIC and the work group on these principles and future work related to AI.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Madara". The signature is fluid and cursive, with a large initial "J" and "M".

James L. Madara, MD