

Subject SA1 — Health and Care Specialist Applications

EXAMINERS' REPORT

April 2009

Introduction

The attached subject report has been written by the Principal Examiner with the aim of helping candidates. The questions and comments are based around Core Reading as the interpretation of the syllabus to which the examiners are working. They have however given credit for any alternative approach or interpretation which they consider to be reasonable.

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Chairman of the Board of Examiners

July 2009

General comments

Candidates who approached the questions, especially the more substantial elements of each question, in a methodical and detailed manner were far more likely to satisfy the examiners and receive a pass in the subject. Candidates will lose marks if they do not address the question asked. There was often a lack of sufficient detail in the answers. The mark allocation for each question part gives an indication of the relative length of answer or number of points to be made to gain full marks. In general each valid point in the answer would normally attract $\frac{1}{2}$ marks with the more basic elements e.g. details in a pricing basis such as age and sex, attracting $\frac{1}{4}$ marks.

Some papers were not clearly marked at the top of each page as to which part of the question was being answered.

Marks may be lost where answers are difficult to read.

Comments on individual questions

Question 1

Scripts often contained a lot of repetition, which naturally restricted the marks awarded. Candidates could use the reading time to make a plan of their answer, or use sub-headings, to ensure their answer contains sufficient breadth.

Question 2

Answers were not always sufficiently adapted to the situation in the questions – just repeating standard bookwork without applying it to the situation described would not earn many marks on this question. It was not always appreciated that the service would be offered to all companies, and not just ones insuring with the insurer.

Question 3

This question was generally well answered, although many candidates did not provide many factors in answering part (iv).

1 (i) Impact on new business

New business volumes could fall due to fear about economy reducing propensity to buy – inclination to hoard rather than spend, increased costs of debt reducing disposable income to be spent on non-essential insurance, reduced disposable income through increased unemployment

However, fear about the future could potentially increase new business volumes

Overall the impact will be affected by the competitive position if market volumes fall then some companies will compete on price, and some won't

If budgets are tight then average premiums might be expected to fall as clients purchase only the level of cover they really need

Also new business volumes may reduce if premiums increase as a result of higher claims experience.

Mortgage business would be the worst hit, so CI would be hit worse than the other lines of business mentioned

Fall in mortgage business is likely to reduce sales at younger ages and hence average age of new business increases

Average sum assured may be affected, if changes in value of house purchases or if only the most wealthy can afford insurance at all

Most expensive and “nice to have” products will be worst hit, so volumes of IP and CI may fall significantly as likely to be seen as less essential than life only cover

However, there may be increased demand for IP e.g. from self-employed

LTC policyholders don't generally have mortgages and hence may be less hurt by the economic situation

Their financial position depends on where their money is invested:

They may have substantial cash savings, which may benefit from rising interest rates

But interest rates may also fall in a recession and if their money is in equities, they could also be suffering the effects of this

However it is more usual for most of their wealth to be locked into residential property

Immediate needs LTC is more essential and less “nice to have” so volumes will be much less affected

Group business volumes will depend on the state of companies' finances

If companies are struggling to service their debt they may not be able to afford PMI cover

Companies may even be wound up

so number of new schemes may fall

Size of schemes may be relatively unaffected, depending on the industry unless companies are laying off staff and reducing size of workforce

Companies may reduce benefit levels in order to cut costs, which would reduce new business premiums

Similarly companies would be aware that there is less need to offer high benefits to recruit and retain in a recession – again this could reduce business levels

These are all longer term effects than those for the individual business
So in the short term, there may be less effect than on the other lines of business

An exception would be any contributory schemes, which may suffer from reduced take up if the members are feeling the pinch

Mix of business may change if people move to buying through cheaper channels

New business volumes for this company may fall if they themselves get into financial trouble and confidence in them is lost

(ii) **Monitoring**

Monitor the level of new business sold by total premium income and number of policies sold or average policy size or some new business index such as annual premium plus single premium /10

- split by line of business
- split by channel
- or other splits that affect the profitability, such as if there are loss leading tranches of business

Compare the figures against last month

Total market activity and market share

For group PMI can monitor the proportion of renewals actually taken up

Complications:

Seasonality will affect the comparison so take the figures for the same month of last year

Project forward a year allowing for the trend

The data may be of poor quality (can improve this through systems improvements, suitable IT etc)

Need to strip out new business cases that subsequently cool off

New business is slow to respond to changes due to the time taken to underwrite and the time the application spends in pipeline so monitor quote activity and/or application activity and amount of enquiries

Could also investigate causes of the quotes that were not converted into sales

(iii) **Investment returns**

Expect these to reduce for many asset classes, such as equities and corporate bonds

Returns would be more volatile

If there is any investment in property, this is also likely to fall in value as highly correlated to equities and loan interest rates

Cash returns may increase because banks require liquidity, and seek cash on deposit

Also need to consider possibility that interest rates may fall if credit squeeze turns into a recession

Future inflation rates

May increase in a high interest environment
May reduce if the credit squeeze is expected to develop into a recession
For PMI hospitals may increase charges to recover lost revenue

Lapses and renewal rates

Lapses may increase, and renewal rates decrease, because people might not be able to afford the premiums if the cost of debt increases
Lapses would also increase due to mortgages/loans defaulting

Expenses

Per policy and renewal expenses may increase due to fixed elements
Investment expenses may increase, if more active trading is required in the volatile market
If values fall then investment expenses as a % of fund values may rise
Expenses could decrease if company takes cost cutting measures in a recessionary environment
Expenses could increase if need to do more underwriting and claims management (e.g. to counter potential increases in fraud)

Claim inception rates

May rise, particularly for income protection due to increased stress working in the current economic environment
and because companies try to put people on IP claims rather than make them redundant
Similarly there may be increased claim activity under PMI under the “claim while I still can” mentality
Could also increase due to lapses being largely selective
Critical illness and long term care inception rates may be relatively unaffected
For all claim types, the level of fraudulent claims is likely to increase significantly in difficult economic conditions

Recovery rates

Depend on policy wording
People may be less motivated/unable to return to work in adverse economic conditions
However, recovery rates could improve if IP claimants are worried about the safety of their jobs and/or need to return to a full salary if other savings or household income has reduced

(iv) How risk is allowed for in ICA:

The principle is to cover all the risks to which the company is exposed

- market risk
- credit risk
- morbidity risk
- mortality risk
- expense risk
- lapse risk
- third party default risk
- operational risk
- liquidity risk
- group risk
- pension scheme risk

Some can be very hard to quantify e.g. operational risks

The amount of the risk to include should be consistent with a 99.5% certainty of solvency over a one year timeframe or can use a lower confidence level over a longer timeframe if it can be demonstrated that this is of overall the same strength

Market consistent techniques should be used

This may involve stochastic modelling

Or in practice the risk could be allowed for by applying 1 in 200 shocks to the risk factors identified allowing for 1 year's worth of new business and the possibility of closure to new business and recalculate the surplus capital expected at the end of the period

Aggregation of the risks needs to be carried out, to reflect any diversification benefits this may be done using a correlation matrix approach. noting that correlations in extreme conditions can differ from those observed in "normal" circumstances

Also need to test scenarios in which a certain subset of events can interact and lead to a higher capital requirement than the basic 1 in 200 correlated calculation.

(v) **Effect on pillar 2**

Impact on realistic capital available:

Realistic liabilities might increase due to higher claims as identified in (iii)

Credit spreads:

The expected credit spread widening would reduce the market value of corporate bonds

The effect on assumed earned yields after the widening depends on the company's view of why credit spreads are expected to widen

If spreads widen as a result of increased chance of default then there would be no change to the expected future risk adjusted yield so liabilities will be unchanged

Hence the “capital available” will have reduced

If spreads widen but risk of default is assessed to be unchanged then the “liquidity premium” part of the yield has increased and corporate bond assets can be assumed to earn a higher risk-adjusted future yield so liabilities can be assessed at a higher valuation rate and hence the “available capital” position may be broadly unchanged

Effect depends on whether the company expects to hold its assets to maturity and how well the asset and liability cashflows are matched

However, some companies choose not to anticipate liquidity premia as well as default premia, in which case the position would be as above, i.e. reduced capital available

Regarding the equity falls:

If equity markets fall then this will weaken the solvency position because asset values fall but there would probably be no change to the market consistent value of liabilities (unless unit-linked)

Note that we might hold equities if we have some long term real liabilities, such as pre funded inflation linked long term care

Other impacts on capital available:

There may be other impacts if the anticipated conditions cause ripple effects on other economic indicators e.g. changes in the risk-free rate or inflation

Additional considerations for the ICA calculation:

The company also needs to consider whether its view of the future “1 in 200” risk events might have changed e.g. did it underestimate corporate bond default risk events?

Did it underestimate extreme liquidity risk events?

Correlation assumptions might also increase due to greater understanding of contagion effects

Volatility is important in pillar 2 because the calculation is based on an extreme event

The co-efficient of equity volatility could be increased in the projections

This will increase the ICA

Note that following the events, the company would need to test based on a further 1 in 200 position

This could be very onerous and may result in the company breaching its capital requirements

The regulator may decide to act to protect the industry, for example by granting waivers and temporarily reducing the onerousness of the ICA rules.

The impact will also depend on whether there has been a change in the underlying “risk-free” rate; if this has fallen then this increases the ICA

(vi) **Review benchmark asset allocation**

Principle of investment is to maximise the return taking due account of the risk involved so if risk has genuinely increased, it may be sensible to consider reviewing the benchmark

However, benchmark should be set considering matching by nature, term, currency and certainty

If equities do become volatile it would then become less easy to sell, so we may wish to sell now but if rising volatility is widely expected then this will already be factored into prices

Need to consider timing issues

If equities are going to become generally depressed, would it be worth getting out now while the going is good

If markets are generally risk averse at the moment, less risky assets may have temporarily high prices, making it a bad time to buy

The predicted economic crisis might not happen, in which case it's a bad idea to incur lots of dealing costs

Reviewing the matching strategy may be a better solution than arbitrarily moving into lower risk assets

For immediate needs products this may well be a solid block of low risk government bonds

and for PMI business which is short term, cash based assets may be appropriate

However, some business could be long term with liabilities increasing at real rates, such as pre funded long term care. This business would be better matched using equities

Also consider the effect on the reserves

If liquidity is currently an issue, it may be more important to review the liquidity position and improving the liquidity position could also improve the ICA

Carry out a full ALM study to identify the optimal asset allocation taking into account the costs of any mismatching reserve

Corporate bonds could be as risky as equities in a widening spread environment

Tax should be taken into account in setting the benchmark

Subordinated debt

Subordinated debt may be at higher risk of default than other classes, and if the finance director wishes to reduce the risk of the portfolio then this action may achieve that

However, some subordinated debt may offer healthy returns especially in the current uncertain climate

Ruling out such investments may reduce the returns achievable

A more sensible approach might be to restrict the companies that can be invested in – e.g. to BBB rated companies and above

or to restrict the percentage in any one counterparty

or even to link the amount that can be invested in a company to their credit rating.

Restrict investment managers

It is wise to ensure that investment managers don't have carte blanche, as they may look more for tactical opportunities, and think less about matching but if markets are expected to be volatile, this may be a good time for tactical investments

and if investment managers are too strictly managed, they may be unable to seek good value investments

They may be unable to dump shares that start to go into freefall

However, if the benchmark is set in order to match then, in the long term, departing from the benchmark would be dangerous

Maximum departure from the benchmark should be set as a percentage range, because as asset values move, a single point benchmark is likely to be breached and require a portfolio rebalancing.

Restricting investment managers could lead to loss of morale and loss of high quality active managers

In each case,

Need to consider any regulatory restraints

More investigation would be required before any action taken

2 (i) Advantages

The service may be a profit centre if it is possible to charge more for the administrative fees than the costs of administration

For policies taken out with the insurer it may reduce overall absence and therefore claim cost

Might give insurer information on absence incidence and lengths of sickness lasting fewer than 13 weeks

It may be possible to offer a discount to new and existing group IP policyholders who take up the service

And hence increase group IP business

The proposal would help the company to expand its business in the health arena

Using nurses to staff the unit ensures that they already have health management training

May need to introduce this service in order to keep pace with competitors

Disadvantages

The insurance company may not be able to access the data, as the service would have to be provided by a non-insurance subsidiary

It does nothing to help individual sales and may divert resources that could have been used to enhance individual sales

Difficult to cost as the insurer currently does not receive notification of sickness until the end of the deferred period hence it may no idea how many periods of absenteeism lasting fewer than 13 weeks there might be and how long they will last

The proposal involves considerable set up costs and ongoing costs due to possible high volumes of contacts for short periods
The service will use qualified health professionals with higher salary costs than normal administrative staff and with an unknown level of new business
Possible legal complications as not insurance
The service could be hard to sell given the likely high cost
Employees may not like it, reducing the insurer's reputation

(ii) **Monitoring Costing Basis**

Will need an estimate of:

- Frequency of contact
- Absence incidence
- Length of disability

Reporting Levels

Industry data e.g. from insurers' associations
Data from reinsurers
Assess the adjustment needed to relate any published data to the particular circumstances of the company, its products and target market.
Further adjustment may be needed to align different target market with that underpinning the base data.
Investigate whether need to rate by industry/location
Need to allow for expected future trends also.

Expenses

Need to forecast volumes of new business
Based on relevant data
May need to build a bottom-up model for expenses
Need to derive manpower costs and expertise required
Lengths of phone calls of different types
Cost of outbound calls/helplines
Salaries and other benefits of staff and management
IT, management systems costs
Advertising costs
Property costs/floor space/rent
Absentee costs will be split between initial absentee validation and ongoing absentee monitoring
Split costs into those that are member related and those that are per-contract.
Need to understand the extent to which specific one-off costs (e.g. establishment overheads) and expected additional costs (e.g. regulation) are to be costed against individual client company policies.
Degree of detail will depend on size of company and volume of expense information
Inflation may need to be split between manpower costs, future equipment costs and others.

Projected inflation may possibly be measured as difference between government fixed-interest and index-linked securities.
Allocation of company overheads

Estimated renewal rates based on lapse rates

Tax

Make suitable assumptions as to the insurer's current and future tax position.
The tax position might be different as the service is not insurance

Profit

Include company profit criteria, commensurate with underlying risk of venture — risk discount rate, PVFP, pay back period.
Cash flow projection results
Vary the charges to meet profit targets

Sensitivity analysis

Test the sensitivity of the final charges to adjustments in the individual assumptions and refine inputs accordingly.

Competitors' rates

Research competitors' charges

Assumptions and strategy

The values of the assumptions and the charges that they produce will reflect the company's strategy in launching into the new market:

An aggressive growth strategy may require assumptions stripped of margins.
A slow portfolio build strategy may permit more caution in the assumptions.

3 (i) Guaranteed rates

Policyholder has financial certainty and piece of mind
Easier for intermediary to explain at point of sale
May need to offer guarantees to compete with other companies who offer them
ABI Statement of Good Practice on CI improving robustness of definitions
Reviewable products have a heavier burden of demonstrating TCF
Reviewable products may cause poor reputation if premiums are increased materially on review
Easier administration
Lower selective lapsing

Reviewable rates

The company can offer the product at lower premium rates than if guaranteed
Affordability leads to financial inclusion

Increased consumer choice

Encourages innovation

Reviewable premiums can go down – happy customers

Improved definitions to avoid doubts over unfairness

The company may find that when it comes to review the rates, TCF considerations mean that it is unable to do so and thus effectively the rates are guaranteed

Easier to get reinsurance

Reduced risk of losses to the insurer and therefore lower capital requirement

(ii) Option to end contracts or reduce benefit

The policy should state clearly when the reviews will take place

Set out any minimum and maximum limits (if appropriate)

State that the review applies to tranches of business only

State that the circumstances of individual policyholders will not be taken into account

State that the premium review will be carried out in a fair and reasonable manner

Valid reasons stated in the policy

Increases can be made due to events outside the control of insurers

Reviewability should be clearly explained at point of sale

Choice between guaranteed and reviewable should be fully explained

Should ensure do not change the premium for invalid reasons

Reviews should take place when specified

How the review process will work should be fully explained

Provide a complete list of assumptions that could change

Explain how these assumptions will be used to re-calculate premiums

Base premiums using assumptions appropriate for full term

Assumptions reviewed regularly and fully documented

Assumption values for in force should be consistent with those used for new business

Practices used in the review should conform to current industry standards

Full documentation about how, when and what factors you will use to review

Explanation of what data source will be used

All customer literature will explain in plain English with no ambiguity

Reinsurance contracts and customer contracts should be perfectly aligned

Thorough staff training

Keep copies of all documentation sent to policyholders

Communicate the results of the review to policyholders, even if no change

(iii) The following are unlikely to be valid reasons:

Recouping losses incurred up to date of the review

Increasing profitability margins beyond those originally assumed

Unfairly targeting a particular group

Unfairly targeting an individual

- Errors made in original pricing assumptions
- Deliberate low initial price
- Increasing reinsurance costs, unless based on valid reasons
- One way only i.e. company will only consider increasing but never consider reducing premiums
- Changes in assumptions linked to internal company factors
- One-off adverse experience unlikely to recur

(iv) Issues to consider:

- Customer's understanding at point of sale
- Need to assess if there is adequate historical own experience in heterogeneous groups
- Interpreting reinsurer and industry experience data
- Is it possible to justify changing expectations of the future; could this have been foreseen at the outset
- Alignment of interest between insurer and reinsurer
- Materiality of reasons for review
- Size of the likely premium change
- Expected direction of premium change – the overall justification and discussion process may be more straightforward if the intention is to reduce premiums
- Time
- Costs
- Resources
- Legal opinion
- External review
- Discussed with ABI
- Discussion with FSA to explain and discuss
- Pilot the results of the review with sample customers
- Actions of other companies with reviewable products
- Likelihood and frequency of future reviews and changes
- TCF legislation
- Impact on persistency/selective lapsing
- Opportunity to use the communication with the policyholder to increase business
- Systems capability
- Impact on new business rates and volumes
- Frequency and outcomes of past reviews

END OF EXAMINERS' REPORT