

Current Issues In Mortality

GASS

Gordon Sharp Chairman, Continuous Mortality Investigation 4 June 2009

Agenda

- Introduction
- CMI Research
 - Life Office Mortality Investigation
 - SAPS Investigation
 - Mortality Projections
 - The CMI Library of Mortality Projections
 - The proposed CMI Mortality Projections Model
 - EU Gender Directive

Background to the CMI

- Largest single research project organised by the UK Actuarial Profession
- Collected and analysed data on mortality and morbidity for over 80 years
- Constituted independently as a research organisation
- Financed by members including life insurers, reinsurers, actuarial consultancies and others
- Life insurers and consultancies provide data
- Individual contributors' data is subject to strict confidentiality
- Aggregated data / results are released to contributors and others

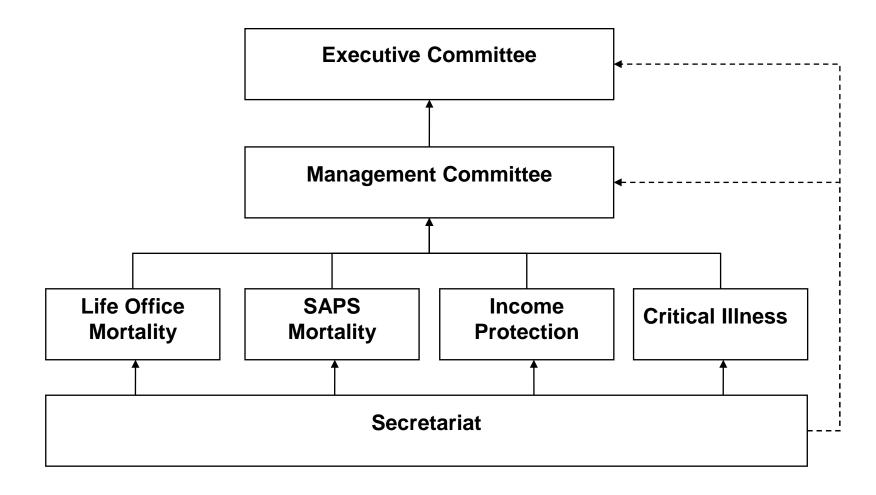
Role of the CMI

- Data collection / validation
- Regular reporting on experience
 - To each data contributor own results
 - To CMI members aggregate results
 - Published (to the Actuarial Profession) lessfrequent aggregate results
- Research
 - Data analysis methodologies
 - Models to describe experience
 - Calibration of model (i.e. graduation of rates)

Why offices contribute data

- Helps the market price and reserve rationally
- Acts as a check on own assumptions
 - Comparison with industry experience and trends
 - Small areas of experience e.g. Cause of Claim
 - Limited resources and expertise within offices
- Benefit from new research and ideas
 - CMI provides interface for exchange of ideas between academics and the commercial world
 - e.g. promote understanding and research

Structure of CMI



Life Office Mortality Investigation

- Longest running from the 1920s
- Data from UK life offices
- Assurances, annuitants & pensioners
- Smoker / Non-smoker
- Graduated mortality tables

SAPS Mortality Investigation

SAPS = Self-Administered Pension Schemes

- Data collection commenced in Jan 2003 following pilot scheme.
- Pension scheme mortality shown to be different from experience underlying insured pensioner population.
- Became formal CMI investigation in July 2006
- Produces individual analyses on all scheme data submitted
- Analyses aggregate SAPS dataset approx annually, including features of different
 - pensioner types
 - industry types
 - pension amounts bands etc.
- Produced first mortality tables based on pension scheme data

Income Protection Investigation

- Formerly known as the Permanent Health Insurance Investigation
- Data collection commenced in 1972
- Multi-State Model was introduced in 1991 (CMIR 12)
- Analyses of sickness inception and claim termination, i.e. recovery and death, rates relative to graduated rates
- First graduations published in 1991 based on data for 1975-78 (CMIR 12)
- Data for 1991-98 is being used to produce:
 - Graduations of claim termination rates, published in 2004 (WP5)
 - Graduations of sickness inception rates, currently underway

Critical Illness Investigation

- Started life in 1995 reporting to the Life Office Mortality Committee
- Initial attempts at data collection failed
- Investigation re-launched from 1998 data
- Most analysis carried out on data from 1999 and beyond
- Results have been released for 1999 to 2005 inclusive
- Key challenge currently is to produce realistic claim rates ...
- the difficulty is that we collect settled claims, but want to measure experience in terms of diagnosed claims
- Working Paper 33, published in July 2008, developed methodology and included 'adjusted results'
- Aim to produce realistic claim rates (based on 1999-2004 data)
 later in 2009

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The CMI LO Mortality investigation "00" Series base tables

- Draft tables published for consultation in:
 - Working Paper 12 (Apr 2005) assured lives
 - Working Paper 16 (Sep 2005) annuitant/pensioner
- Final tables published in:
 - Working Paper 21 (July 2006) assured lives
 - Working Paper 22 (July 2006) annuitant/pensioner
 - Working Paper 26 (Apr 2007) Early/Combined pensioner extended to younger ages
- Fully documented in CMI Report 23 (Feb 2009)

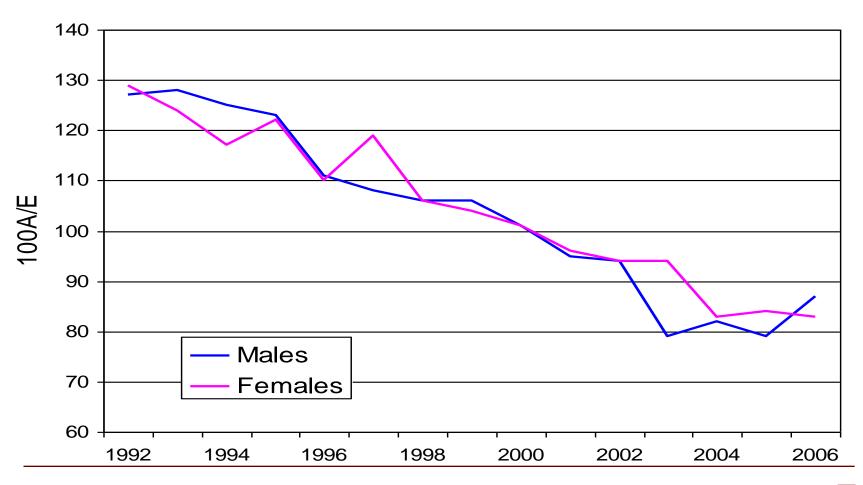


The CMI LO Mortality investigation 2003-2006 results

- Results released to members for individual years
- 2003-2006 All Office results sent to members in December
- Summary of experience will be published in CMI Report

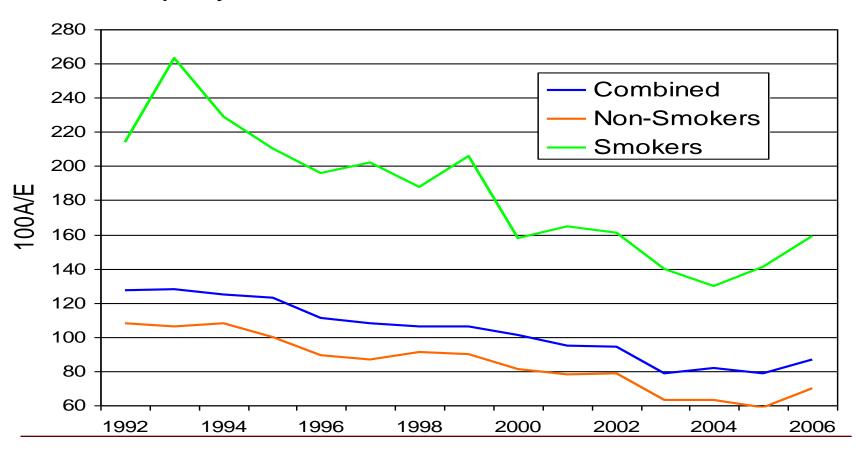
Experience subsequent to "00"

Temporary Assurances, Lives, 100A/E, E= TMC00 Sel / TFC00 Sel



Experience subsequent to "00"

Temporary Assurances, Lives, 100A/E, E= TMC00 Sel, Males



2003-2006 results

- Experience significantly lower than 1999-2002
- Improvement 2002 -> 2003 particularly pronounced for several investigations
- Deterioration in 2006 for Temporary Assurances
- Improvements in Temporary Assurances exist for nonsmokers and smokers
- Results vulnerable to changing mix of offices

The CMI LO Mortality investigation 'Per Policy' initiative

- Background
- Objectives
- Key Differences:
 - Day Count
 - Central Exposures
 - Investigation codes
 - Additional data fields

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The CMI SAPS investigation

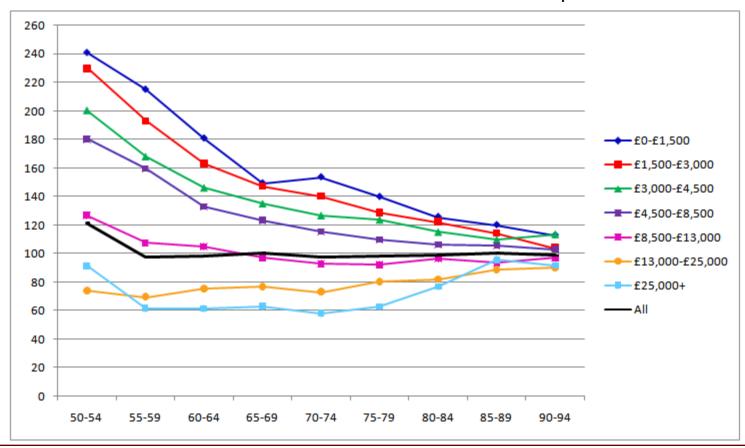
- Historically, CMI collected life insurers' data
- SAPS commenced as an unfunded working party of the Pensions Technical Support & Research Committee...
- Now the CMI SAPS Mortality Committee
- Data collected from firms of consultants (acting as Scheme Actuary)...
 - who now also contribute financially towards CMI
- 448 validated submissions with 4.5m records (to end-June 2008)
 - Over 380 schemes remainder are resubmissions
 - Generally triennial
- Richer data than life office (currently), e.g. amounts, industry type and postcode

Recent SAPS work

- S1 Table graduations
 - 20 new sets of mortality tables, approved for adoption by the UK actuarial profession
 - The tables are the first to be based on the mortality of pensioners of self-administered pension schemes.
- Experience Report on data collected to June 08

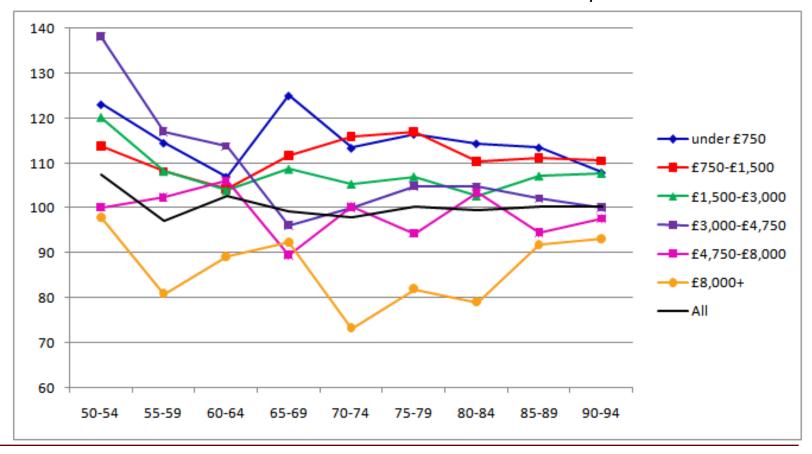
Report on data to June 2008 - Male

Chart 2: 100A/E values for Male Pensioners Amounts compared to S1PMA



Report on data to June 2008 - Female

Chart 4: 100A/E values for Female Pensioners Amounts compared to S1PFA



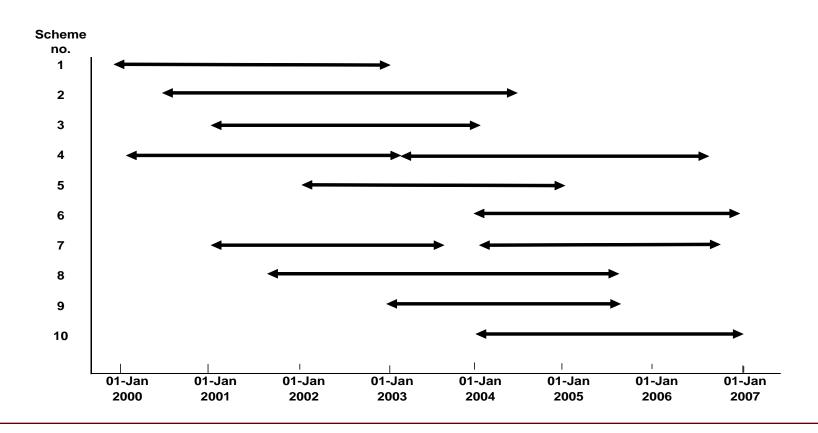
Next steps for SAPS research

- Mortality improvements within the SAPS dataset
- Analysis by Industry
- Experience Report on data collected to June 09

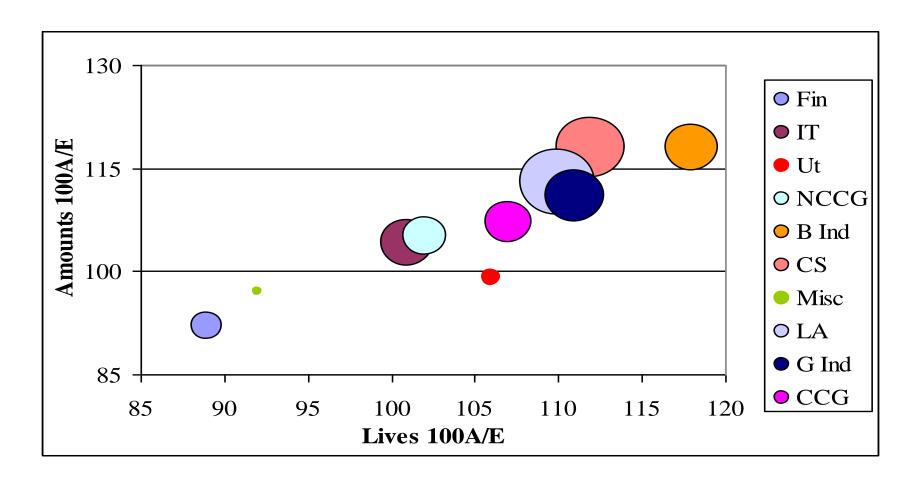
Mortality improvements

- Data from a limited period (2000-)
- Limited to older ages
- ...so unlikely to shed light on cohort features
- Triennial data submissions create heterogeneity issues

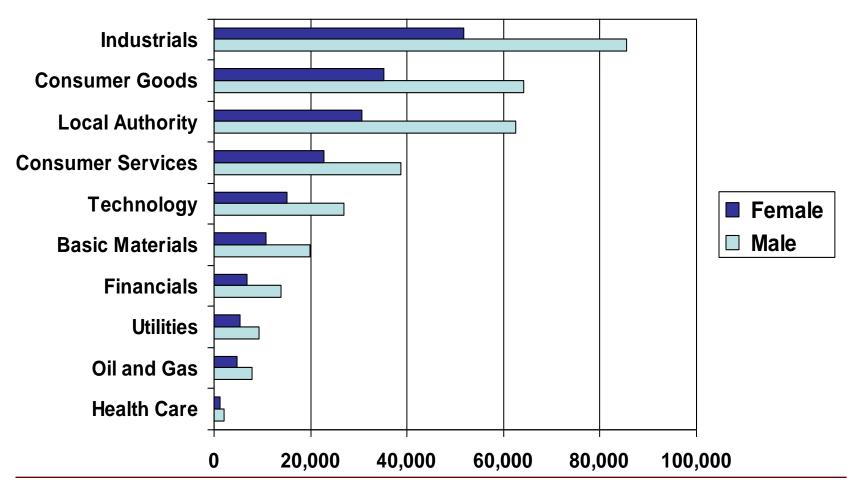
Mortality improvements



Analysis by Industry - Males



Analysis by Industry



Number of deaths at ages 50+ Calendar years 2000 to 2006



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Mortality Projections – the wider perspective

- (Pension) actuaries slow to adopt Cohort projections
- Responsibility for setting assumptions shifted to trustees/Boards
- Board for Actuarial Standards taken over responsibility for standard-setting
- Absence of projections from "00" Series left a distinct gap...
- FSA seeking to "talk up" mortality projections
- Draft library launched alongside Presidents' letter that had to stop short of setting new standards
- TPR is consulting on a trigger of Long Cohort with a minimum
- BAS announced review of mortality assumptions
- Considering producing scenarios to help evaluate projections (from the library)
- Projections will continue to be a Hot Topic!

Mortality Projections: Making the CMI's work more accessible

- CMI recognised its research was inaccessible to many actuaries
- Task Force formed to:
 - Illustrate the CMI's recent research to make it more accessible
 - Propose terminology to facilitate disclosure of mortality projections
 - Develop sets of projections which can be used as benchmarks
 - Collaborate with ECPD Board on education needs
- Membership of Task Force included life and pensions actuaries

The structure of the "Library"

- 55 "projections" in version 1.0 of the library
- 15 further "projections" in version 1.1
- Each projection can be combined with any base table
- Each sheet contains data:
 - From age 20 to 120
 - From calendar year 1992 to 2130
- Each cell is the cumulative reduction factor:

$$RF(x,t) = q_{x,t} / q_{x,0}$$

The "Library" of Mortality Projections

- Version 1.1 released in March 2009
- The library collates:
 - Existing projections ("92" Series, Cohort Projections, ONS)
 - Variations on existing projections (e.g. cohort + minimum)
 - Examples of P-spline and Lee-Carter projections
- What was it hoped the "library" would achieve?
 - Single source of "recognised" projections
 - Standardisation of terminology for these
 - NOT intended to offer guidance on choice of projection

The proposed Mortality Projections Model

- Background
 - Continuing demand for research and guidance
 - Widespread use of (variants of) Interim Cohort Projections
- Working Party established to:
 - Examine and report on latest mortality data & trends
 - Develop spreadsheet-based modeling tool

Deliverables

- An illustrative version of the CMI Model
- CMI Working Paper, covering:
 - An overview of the Model structure
 - Analysis to help inform the setting of parameter values
 - Sample projections from the Model
 - Illustrations of sensitivity of results to parameter values
 - A simple analysis and model of mortality by cause-ofdeath, as a means of sense-checking projections
- A consultation on the Model and its potential uses

Model Structure

- Project mortality improvement rates
 - Relatively simple; Accessible; Flexible
 - Not a mathematical model of mortality fitted to data
- Deterministic projection driven by user inputs
 - Current rates of mortality improvement
 - Long-run rate(s) of mortality improvement
 - Speed & pattern of convergence current to long-run
 - Split projection by age or by year-of-birth cohort
- 'Core' and 'Advanced' parameter layers

Sample Research - Conclusions

- Population data
 - Clearly shows 2 major features of mortality improvement
 - Persistent year-of-birth cohort peaks and troughs
 - A general increase across a wide age range
- CMI data
 - Lower data volumes reduce clarity of observations
 - Unable to distinguish between concurrent features?
 - So much more difficult to interpret trends and estimate mortality improvement rates from sub-population data

Next Steps

- Timescale
 - Expected issue date?
- Consultation Exercise
 - Consultation meetings ?
 - Expected close date ?
 - Please do consider the Model and Working Paper and participate in the Consultation Exercise

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EU Equality Directive

- EU directive requires equal treatment between men and women, including insurance premiums for new policies
- UK government has used an option under the directive to allow insurers to set differential premium rates as long as there is publicly-available data to support differences
- The use of gender as a factor in the calculation of premiums or benefits for insurance or related financial services products should not result in differences in the premiums or benefits of individuals
- However, where gender is a determining factor in the assessment of risk based on relevant and accurate actuarial and statistical data then proportionate differences in individual premiums or benefits are allowed
- This is subject to accurate data relevant to the use of gender as a determining actuarial factor being compiled, published and regularly updated

EU Equality Directive: UK implementation

- Regulations came into effect for new contracts from 5th April 2008
- The Treasury published guidance in March 2008
- Guidance includes minimum content, form and frequency of data to be published for each main policy type
- Data form:
 - Intelligible to someone who is not an insurance expert
 - Table, graph or chart with appropriate explanations
 - Source of data and period to which it relates
 - Technical terms must be explained
- Data may be published by insurers on an individual or joint basis or collated by a third party
- Source and accuracy must be attested to

EU Equality Directive: Collective data publication

- Life assurance and annuities
- Critical illness) CMI
- Income protection
- Motor insuranceABI
- Private medical insurance

 ABI
- Other types of policies & new policies ?

Published data: life assurance and annuities

Ratio of male mortality to female mortality 2003-2006 Most CMI life office mortality investigations combined

Age band	Ratio	Age band	Ratio
26-30	248%	56-60	145%
31-35	215%	61-65	163%
36-40	156%	66-70	165%
41-45	137%	71-75	154%
46-50	128%	76-80	142%
51-55	139%	81-85	137%



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