

Critical Illness Pricing: Can Prices get any Lower? Matthew Smith, Pacific Life Re

14 May 201



Critical Illness Pricing Can Prices get any lower?

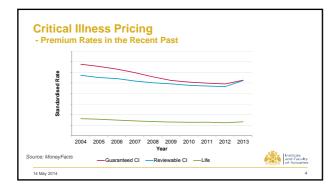


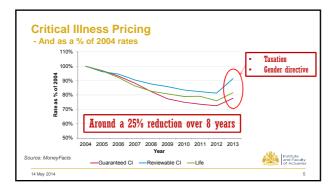
Themes...

- How critical illness pricing compares with term assurance
- · Historic changes in attitude to critical illness pricing
- Potential drivers to tumbling CI prices
- Are we missing anything. Definition creep, trend risk and more...
- · Lessons from around the Globe

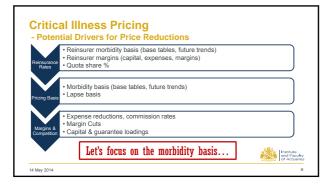
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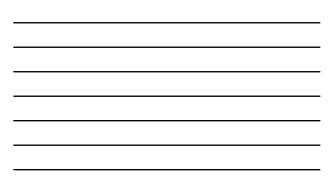
Institute and Faculty of Actuaries

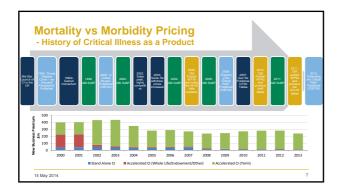




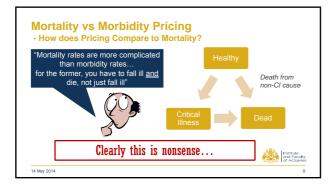




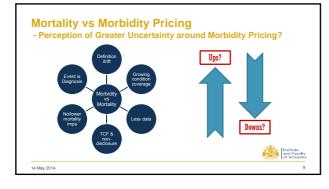


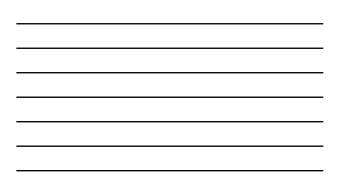










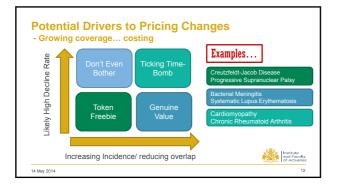








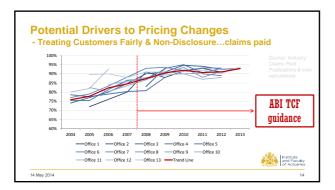


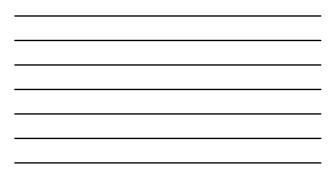


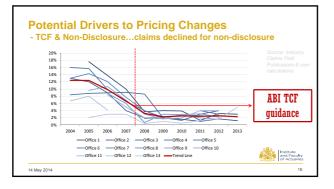


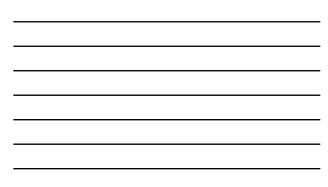


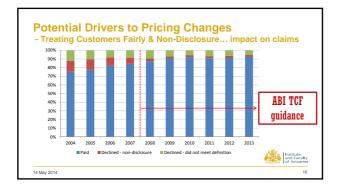






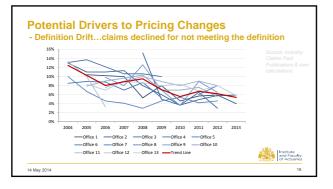


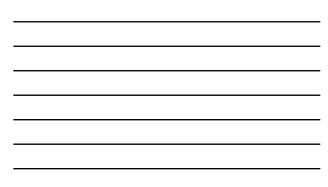






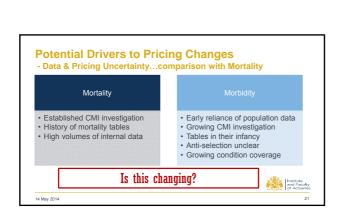




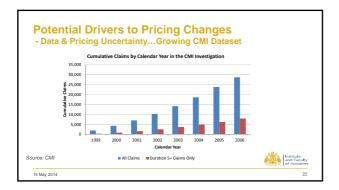


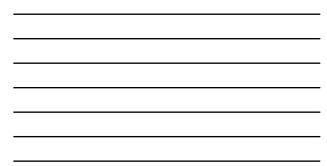
Case Study	% Paid Where definition failed	
MI – Infero basal hypokinesis	100%	
MI - Mildly impaired systolic function	75%	
Dilated cardiomyopathy - controlled well	56%	Increasing
Sub-arachnoid – no sequelae	55%	
Acoustic neuroma with surgery	45%	Severity
Possible MS (some kind of neurological disorder)	40%	
One episode definite MS - full recovery	27%	
Inoperable Glioma – no symptoms	25%	k

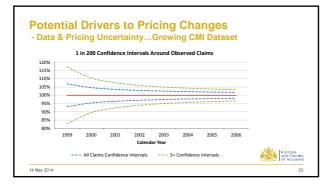




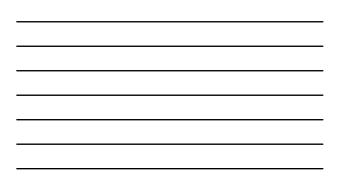






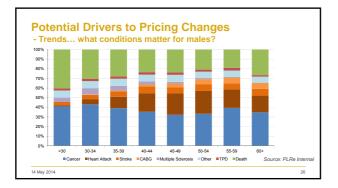


Mix of products, underwriting years	Relevance to prospective experience is not clear Continually evolving		
CMI methodology not perfect			
Select shape	Limited ultimate claims, and particularly difficult to quantify given above		
Age shape	Credibility is limited at the table extremes and experience for minor conditions yet to emerge		
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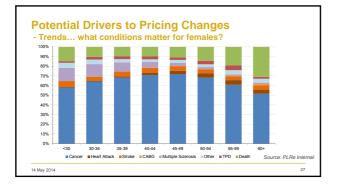




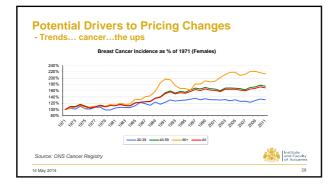




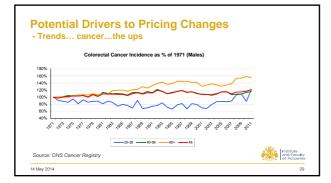




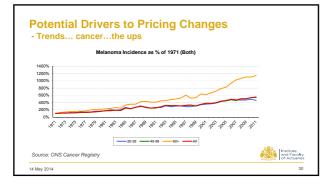




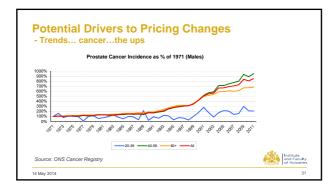




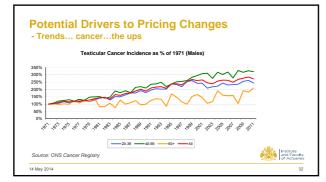




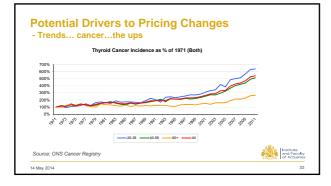


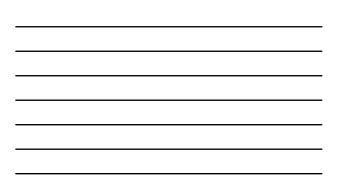


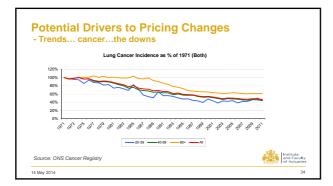




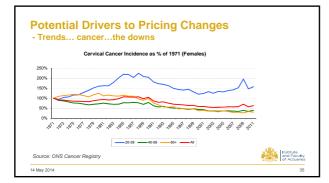




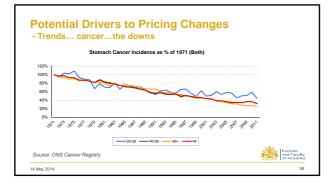


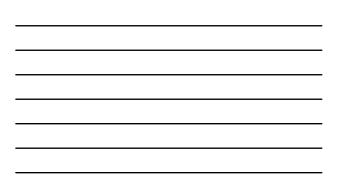


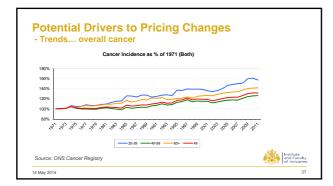




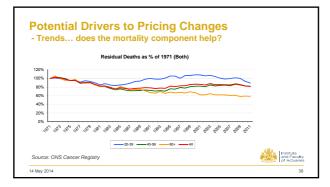














Condition	Trends	
Heart Attack	▼/►	
Stroke	▼/▶	
Coronary Artery Bypass-grafts		

