

Mortality and Longevity Seminar 2012
Peter Telford and Joseph Lu



Making sense of the highly uncertain Longevity uncertainty

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What kind of uncertainty?

Rules for a well-behaved risk

- | | | |
|----------------------------------|---|-----------------------|
| • Diversifiable within portfolio | ➔ | Small fluctuations |
| • Relevant past experience | ➔ | Small basis risk |
| • Risk segments understood | ➔ | Limited heterogeneity |
| • Aligned interests | ➔ | Little anti-selection |
| • Causation understood | ➔ | Few surprises |
| • Generally accepted model | ➔ | No winner's curse |

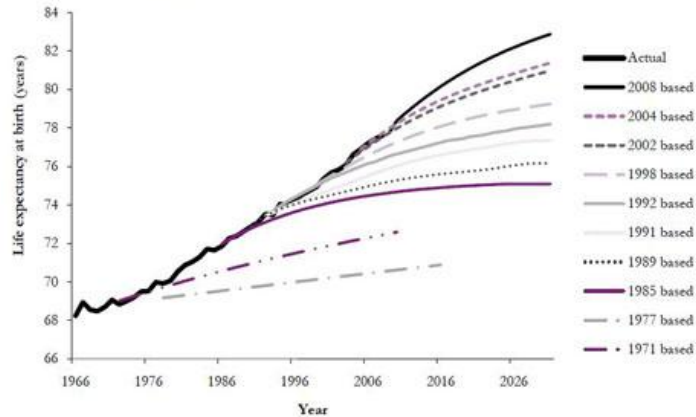
Longevity breaks all the rules

- Hence the wrong kind of uncertainty

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Best estimate keeps on moving

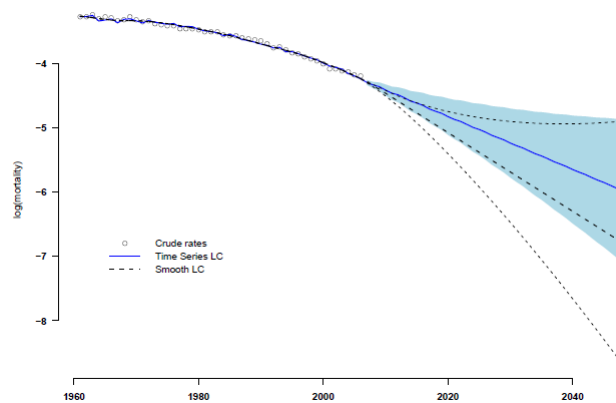
Source: IPSPC analysis drawing on C Shaw, 2007 and ONS, 2008 population projections.



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High dispersion between models



Different projections from the same data set illustrating model risk. Both models are part of the Lee-Carter family, with the only difference being whether a time series or a penalty is used for projection. The data set is for males in England and Wales. (Richards and Currie 2009)

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Users and uses of models

Long term decision makers

- Buy or sell annuity
- Offer or modify employee benefits
- Acquire or divest business
- Longevity positions are taken for their run-off value
- Most positions could be closed out, at least in theory

Short term controllers

- Prudential regulation
- Accounting and reporting
- Planning, risk management and financing
- Applied regularly to existing positions
- Often involves a close-out assumption

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What kind of model?

Long term (run-off)

- Aligned with buy/sell/hold decisions
- Focus on “more likely” outcomes – e.g. quartiles
- Actuary in real time
- Risk that the model is wrong in hindsight – i.e. the “unknown unknowns”

Short term (1 year)

- Aligned with control processes and requirements
- Focus on “less likely” outcomes – e.g. 99.5%
- Actuary in a box
- Risk that the model needs to change

Long term and short term models are difficult to compare

- Equivalent points of distributions are not well-defined

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What kind of inputs?

Bringing longevity within the rules

- Build relevant past experience – or apply controls for basis risk
- Understand segmentation – health, employment, socio-economic status, ...
- Understand causation – medicine, lifestyle, environment, ...
- Seek convergence of models – but differentiation based on the quality of risk science is appropriate

Issues that models can't fix

- Non-diversifiable risk
- Non-aligned interests

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Solvency II internal model for longevity risk

Model requirements

- Six tests: use, statistical quality, calibration, P&L attribution, validation, documentation
 - Be capable of deployment into decision making
 - Cover all material risks
- Transparent and open to challenge
 - Allow users to engage with the approach, design, and calibration of risks, not just the answers
- Consistent with balance sheet processes
 - S.II tests the movement in balance sheet over 1 year

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Case study

- Base Mortality
 - Conventional A/E of life table
 - Discuss other possibilities
- Future Mortality
 - Market practice using CMI Model
 - Discuss other approaches

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Example Longevity Risk Assessment Framework

Steps	Activity	Example
1	Identify Key Risk Categories	Base and Future Mortality
2	Identify Sub-components	Future Mortality: -Initial mortality rates -Long-term rates etc.
3	Identify Sources	Data, Randomness, Model, Judgement, Drivers for mortality change (?)
4	Determine best estimate	
5	Determine one-year change distributions for each source in step 3	
6	Determine relationship between distributions	
7	Combine distributions	
8	Validation	

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Base Mortality Case Study: Steps 1 & 2

- Case study
 - Base Mortality
 - Ultimate A/E of life table

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Base Mortality Step 3: Sources of risks

- BAS (2008) identified the following sources of uncertainty
 - Random fluctuation
 - Data
 - Model/parameters
 - Decision – Judgement

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Base Mortality Step 4

- Step 4: Determine best estimate
 - Perform goodness-of-fit to choose life table
 - Perform mortality investigation to obtain Actual vs Expected (A/E) adjustment to life table
 - Model late reported deaths

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Base Mortality Step 5

- Step 5: Determine one-year change distribution for sources of risk:
 - **Random risk** depends on number of pensioners and concentration of benefits.
 - **Risk that data** is not complete, accurate or relevant.
 - **Risk of model** is inadequate, e.g. exposure calculation or late reported deaths.
 - Justify any judgement

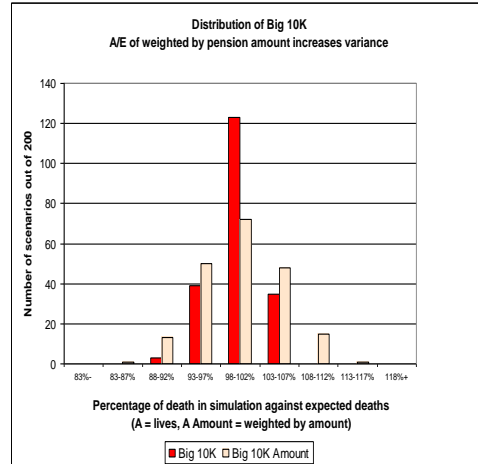
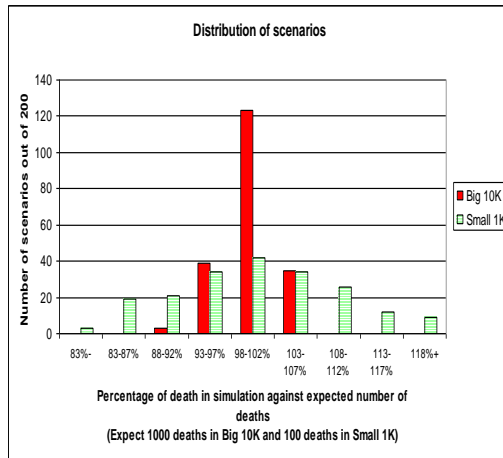
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Base Mortality Case Study: Example of distribution of risk of random fluctuation

Experience of 10K pensioners is more certain than 1K

Experience of equal pension distribution (red) is more certain than concentrated (10% people owning 50% pension)



Base Mortality Case Study: Example of distribution of other sources of risk

Data risk

- Use historical experience of data changes and errors
- Likely to have sparse experience
- Judgement required for distribution if material
- Careful that no double counting in operational risk

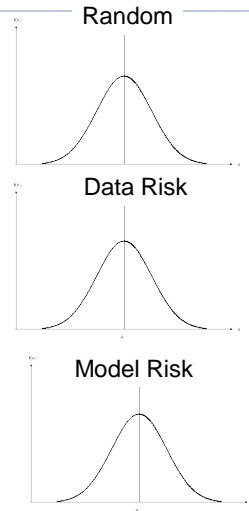
Model Risk

- e.g. Modelling for IBNR
- Use historical experience of method changes
- Likely to have sparse experience
- Judgement required for distribution if material
- Otherwise demonstrate immateriality

Base Mortality Case Study: Step 6

Step 6: Derive relationships between distributions

- Distributions of risks:
 - Random fluctuation
 - Data
 - Model
- Assume relationships:
 - Independent?
 - Correlated?
 - If correlated, how?



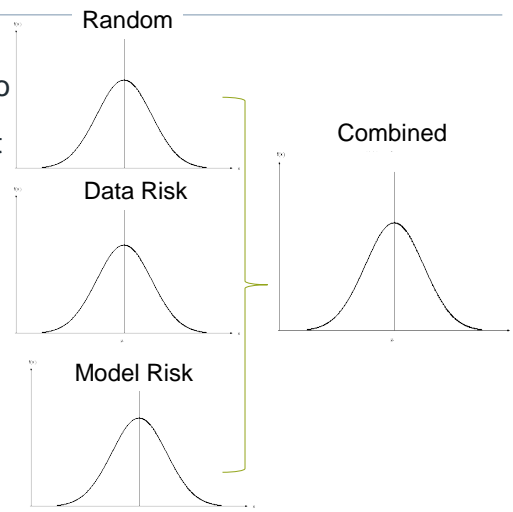
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Base Mortality Case Study: Steps 7 & 8

Step 7: Combine risks

- It may be practically desirable to combine all distributions to give one distribution with adjustment for A/E
- Combine through simulation or mathematical formulae
- More straight forward if distributions are independently Normal.



Step 8: Validation

- Validate decisions or judgement

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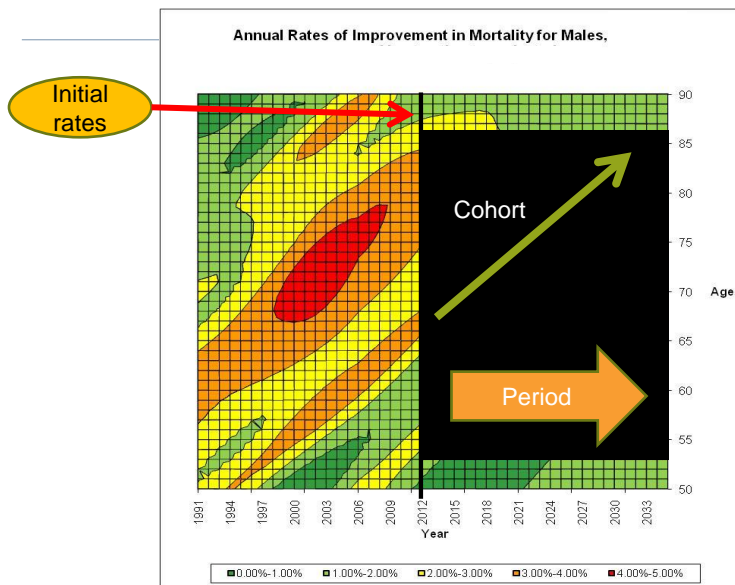
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Future Mortality: Steps 1 & 2

- Case study
 - Future Mortality Trend (CMI Model)
 - Initial mortality improvement rates
 - Period Component
 - Initial mortality improvement
 - Convergence pattern
 - Long-term rates
 - Cohort Component
 - Initial mortality improvement
 - Convergence pattern
- Other methods
 - Extrapolative model
 - Lee-Carter (variants)
 - P-Spline
 - CBD etc.
 - Explanatory models
 - Smokers Model
 - Disease Based
 - Health policy
 - Combination Models
 - Cause of death
 - Other

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CMI Model Projects Annual Rates of Mortality Improvement: Initial, Cohort Period Components



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Step 3: Sources of risks

- BAS (2008) identified the following sources of uncertainty
 - Random fluctuation
 - Data
 - Model/parameters
 - Decision – Judgement
- Potential drivers for future longevity
 - Behavioural or lifestyle changes, e.g. smoking
 - Risk factors change, e.g. blood pressure, obesity
 - Public policies
 - Medical interventions
 - Epidemics

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Step 3: Identify sources of risks

Risk description	Risks
Initial Rates	<p><u>Data risk</u> Risk that the annuitants that we insure exhibit different experience to that implied by the ONS England & Wales population</p> <p><u>Model risk</u> Risk that the model for smoothing the ONS England & Wales mortality data is inappropriate.</p> <p><u>Random fluctuation</u> Covers the impact of random fluctuation in the mortality trend experience observed in the ONS England & Wales mortality trend data</p>
Long term improvement rate	<p><u>Parameter & model risk</u> Risk that the underlying assumptions made within the underlying model, e.g. Explanatory or Cause of Death Model, are inappropriate and result in an inappropriate long term rate</p>
Period convergence	<p><u>Model risk</u> Risk that the emerging information changes the shape of the convergence function.</p>
Cohort convergence	<p><u>Model risk</u> Risk that the emerging information changes the shape of the convergence function.</p>

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Future Mortality Case Study

Step 4: Determine best estimate

- Case study: CMI Model
 - Decide initial mortality improvement
 - Period Component:
 - Initial rates
 - Convergence pattern
 - Long-term rate
 - Cohort Component
 - Initial rates
 - Convergence pattern
- Other methods
 - Extrapolative model
 - Lee-Carter (variants)
 - P-Spline
 - CBD etc.
 - Explanatory models
 - Smokers Model
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 - Health policy
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 - Cause of death
 - Other

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Future Mortality Case Study

Step 5: Determine one-year probability distribution

- Case study: CMI Model
 - Decide initial mortality improvement
 - Period Component:
 - Initial rates
 - Convergence pattern
 - Long-term rate
 - Cohort Component
 - Initial rates
 - Convergence pattern
- Other methods
 - Convert run-off to one-year
 - Determine 99.5th percentile run-off
 - Convert to one-year by reading 90-95th percentile, assuming independence or not
 - Thought to be a convention
 - But difficult to explain to management
 - Extrapolative model
 - Simulate one-year projections
 - Use historical and that 1 additional year's of projected data to project all future mortality
 - Derive distribution of value
 - But may be problematic if the best estimate is not derived from Extrapolative model.

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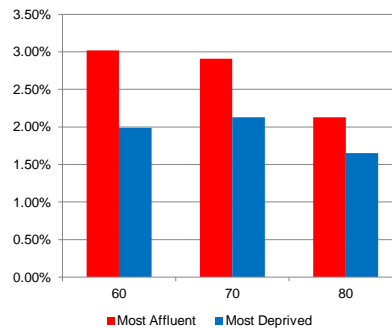
Base Mortality Case Study: Example of distribution of sources of risk

Data risk

Risk that the annuitants that we insure exhibit different experience to that implied by the ONS England & Wales population

Most affluent fifth have experienced faster mortality improvement than the least affluent fifth

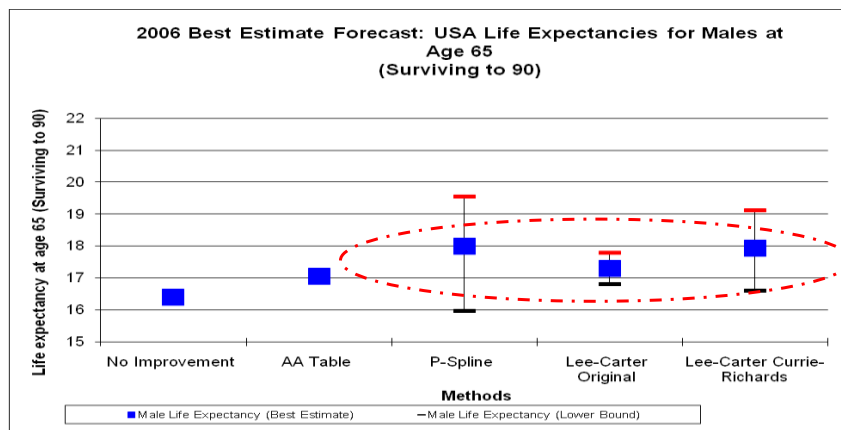
Men's annual rate of mortality improvement in England (1982-2006)



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Extrapolative Model Risk: Same input, different output

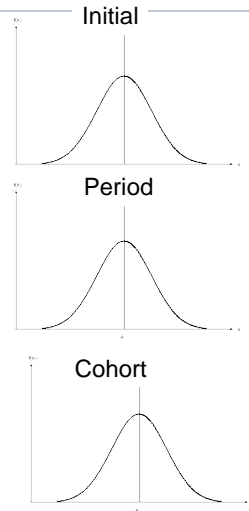


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Base Mortality Case Study: Step 6

Step 6: Derive relationships between distributions

- Distributions of risks:
 - Initial mortality improvement
 - Period component
 - Cohort component
 - Other?
- Assume relationships:
 - Independent?
 - Correlated?
 - If correlated, how?



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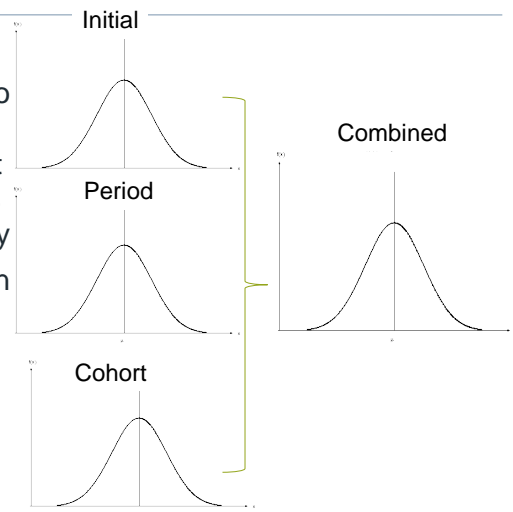
Base Mortality Case Study: Steps 7 & 8

Step 7: Combine risks

- It may be practically desirable to combine all distributions to give one distribution with adjustment for a common currency such as long-term rate or life expectancy
- Combine risk through simulation or mathematical formula

Step 8: Validation

- Validate decisions or judgement



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Conclusions

“We demand rigidly defined areas of doubt and uncertainty!”

- Considerable progress in making longevity risk more tractable
- Some of the uncertainty is inherent, and resistant to risk science
- Long-term and short-term models both have important roles
- Solvency II appears to suit a short-term model that randomises the assumption setting process

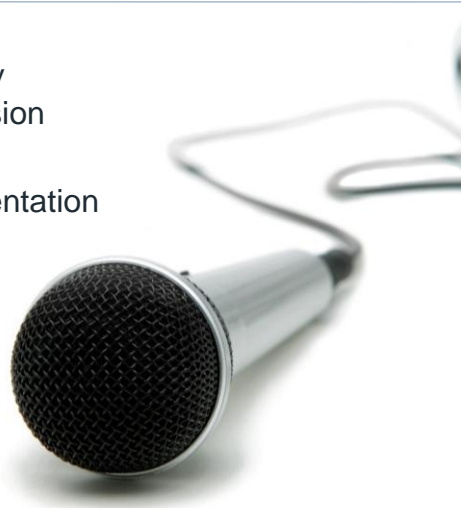
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