

#### SOA Mortality and Longevity Research

LARRY STERN, FSA, MAAA Mortality & Longevity Program Steering Committee Member November 7, 2019

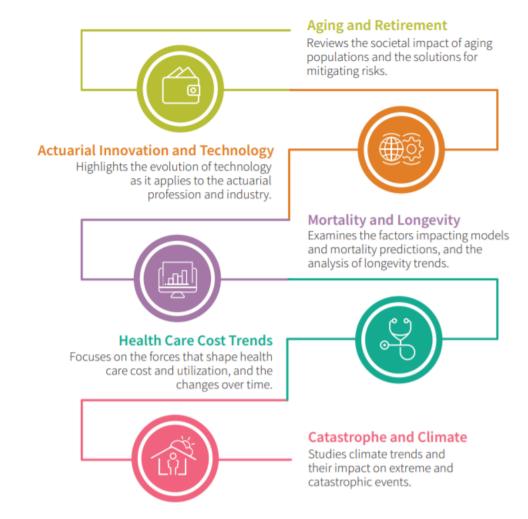


#### **SOA Research Overview**

- History of SOA Research
- Broad across Actuarial Practice Research, Experience Studies and Academic Research Programs
- Strategic Initiative to increase focus on key Actuarial Research areas in to Strategic Research Programs



#### SOA Strategic Research Programs





3

Mortality and Longevity



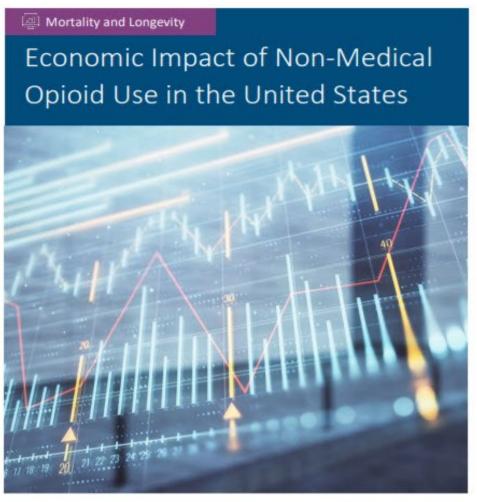


## Mortality and Longevity

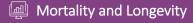
Examines the factors impacting models and mortality predictions, and the analysis of longevity trends.



## Inaugural Research Project







#### Opioid Report Media - Good Morning America



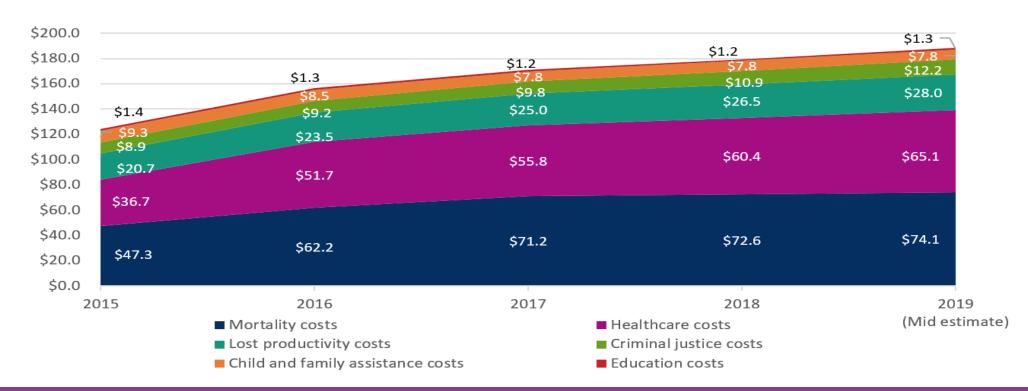
#### Economic Impact of Non-Medical Opioid Use

| https://www.soa.org/resources/research- |           |      |
|---|-----------|------|
| reports/2019/econ-impact-non-medical-   |           |      |
| opioid-use/                             | 2015-2018 | 2019 |
| Mortality Cost                          | 253       | 74   |
| HealthCare Cost                         | 205       | 65   |
| Loss Productivity Cost                  | 96        | 28   |
| Criminal Justice Costs                  | 39        | 12   |
| Child and Family Assistance Costs       | 33        | 8    |
| Education Costs                         | 5         | 1    |
| Total                                   | 631       | 188  |



#### Economic Impact of Non-Medical Opioid Use

FIGURE 2: TRENDS IN TOTAL COSTS BY CATEGORY, 2015-2019 (BILLIONS)





#### Public Interest Mortality Research

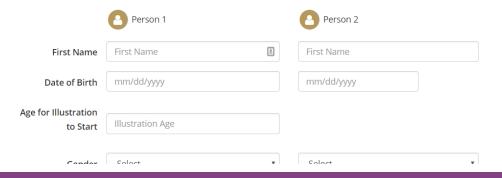
- Update to Actuaries Longevity Illustrator
- Joint project between AAA and SOA
- http://www.longevity illustrator.org/



#### **Enter Your Information**

In the chart below, under "Person 1," enter your name and date of birth. If you want the illustrations to start later than blank and the illustrations will start at your nearest current age. Also enter your gender, whether you smoke and your at the same information (except for the age at which the calculations are to start) in the "Person 2" column. The age for you time the illustrations will start. If you are single or do not wish to use the joint-life features in the program, leave the "Person 2" column.

You can always come back to this page to see how a change in what you enter affects the subsequent answers. In fact, change when you enter different ages and/or health statuses.

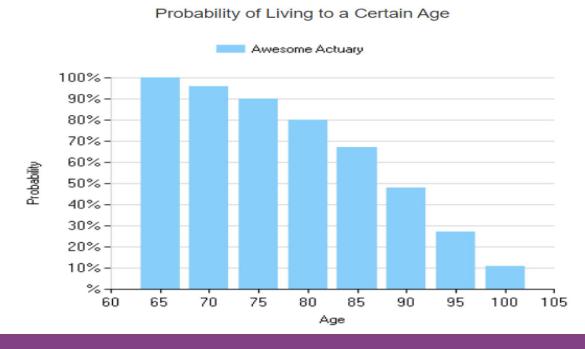




#### Public Interest Mortality Research

http://www.longevityillustrator.org/

| Age | Awesome Actuary |
|-----|-----------------|
| 65  | 100%            |
| 70  | 96%             |
| 75  | 90%             |
| 80  | 80%             |
| 85  | 67%             |
| 90  | 48%             |
| 95  | 27%             |
| 100 | 11%             |





#### Future Public Interest Research - 2019

- Public Perception of Longevity
  - Survey of pre and post retiree populations
  - Examines how realistic individuals are about their estimates
  - Examines variations in perception across socioeconomic and demographic categories
  - December 2019 release



#### Future Public Interest Research - 2020

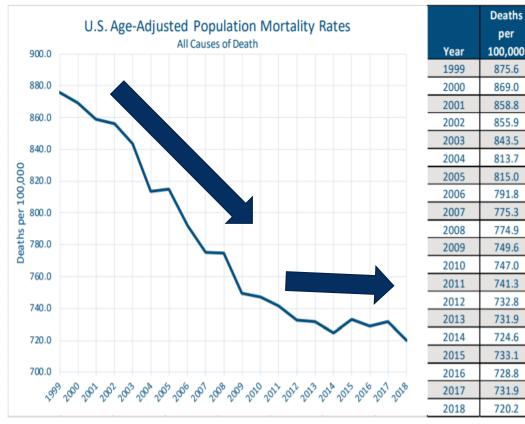
- Women's Longevity Trends
- Obesity Trends
- Contest Workable Innovations for Living Longer (WILL)



- U.S. Population Analysis
- Drivers of Mortality/Mortality Improvement
- Mortality Improvement Modeling Expansion



- Recent U.S. Trends of slowing / declining mortality improvement
- August 2019:
  - U.S. Population
     Mortality Observations Preview of 2018
     Experience





Year over

Change

n/a

-0.8%

-1.2%

-0.3%

-1.4%

-3.5%

0.2%

-2.8%

-2.1%

-0.1%

-3.3%

-0.3%

-0.8%

-1.1%

-0.1%

-1.0%

1.2%

-0.6%

0.4%

-1.6%

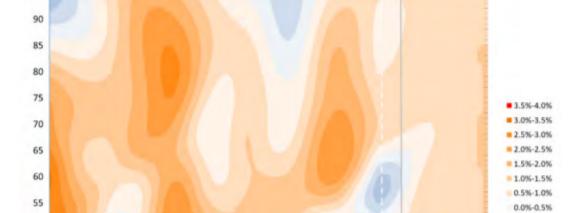
- Pulls on mortality improvement across many different causes of death
- January 2019:
  - U.S. Population Mortality Observations - Updated with 2017 Experience

#### 2017 U.S. POPULATION MORTALITY BY COD

| Cause of Death       | Deaths    | %     | Age-Adjusted One Year<br>Change | Attribution to All CODs* |  |
|----------------------|-----------|-------|---------------------------------|--------------------------|--|
| Heart Disease        | 647,457   | 23.0% | 0.2%                            | 0.1%                     |  |
| Cancer               | 599,108   | 21.3% | 2.1%                            | 0.5%                     |  |
| Alzheimer's/Dementia | 239,585   | 8.5%  | -1.3%                           | -0.1%                    |  |
| Accidents            | 169,936   | 6.0%  | -4.1%                           | -0.3%                    |  |
| Pulmonary            | 160,201   | 5.7%  | -1.0%                           | -0.1%                    |  |
| Stroke               | 146,383   | 5.2%  | -0.8%                           | 0.0%                     |  |
| Diabetes             | 83,564    | 3.0%  | -2.1%                           | -0.1%                    |  |
| Suicide              | 47,173    | 1.7%  | -3.9%                           | -0.1%                    |  |
| Liver                | 41,743    | 1.5%  | -1.4%                           | 0.0%                     |  |
| Assault              | 19,510    | 0.7%  | -0.2%                           | 0.0%                     |  |
| Other                | 658,843   | 23.4% | -1.5%                           | -0.3%                    |  |
| All COD              | 2,813,503 | 100%  | -0.4%                           | -0.4%                    |  |



- Moving from "just recording" to analyzing and using as a source of modeling and forecasting
- Look at Drivers of Mortality Improvement and expansion of Mortality Improvement Modeling



MP-2018; Females



2030

-0.5%-0.0%

-1.0%-0.5% -1.5%-1.0%

50

45

40

1951

1960

1970

1980

1990

2000

2010

2020

 Differences in population and insured mortality improvement trends

Pobrilation

Individual Life

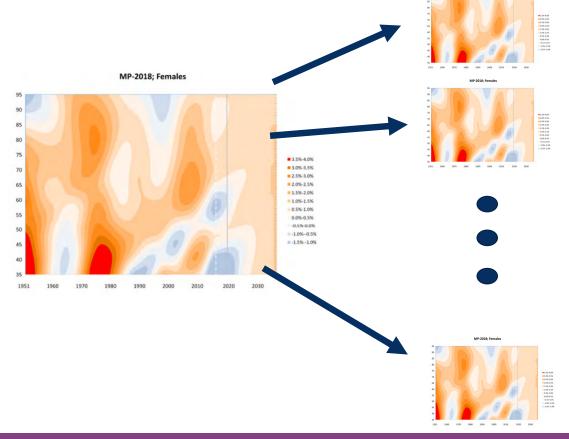
| Cause of Death Category     | 2010  | 2011  | 2012  | 2013  | 2014  | 2015  |
|-----------------------------|-------|-------|-------|-------|-------|-------|
| Circulatory System Diseases | 32.3% | 31.6% | 31.4% | 31.3% | 31.2% | 31.3% |
| Neoplasms                   | 24.2% | 23.9% | 23.8% | 23.4% | 23.4% | 22.9% |
| Other                       | 12.5% | 13.1% | 13.7% | 13.8% | 13.5% | 12.9% |
| Respiratory System Diseases | 7.7%  | 7.9%  | 7.8%  | 8.0%  | 7.8%  | 8.0%  |
| Alzheimer's Disease         | 3.4%  | 3.4%  | 3.3%  | 3.3%  | 3.6%  | 4.1%  |
| Endocrine Diseases          | 3.0%  | 3.1%  | 3.1%  | 3.1%  | 3.1%  | 3.2%  |
| External Causes             | 2.9%  | 2.9%  | 2.9%  | 2.9%  | 3.0%  | 3.0%  |
| Infectious Diseases         | 2.7%  | 2.8%  | 2.7%  | 2.7%  | 2.7%  | 2.7%  |
| Influenza and Pneumonia     | 2.1%  | 2.2%  | 2.0%  | 2.2%  | 2.1%  | 2.1%  |
| Cause of Death Category     | 2010  | 2011  | 2012  | 2013  | 2014  | 2015  |
| Neoplasms                   | 39.8% | 40.9% | 39.0% | 38.7% | 37.5% | 37.4% |
| Circulatory System Diseases | 23.6% | 22.8% | 23.0% | 24.0% | 23.0% | 23.2% |
| External Causes             | 16.8% | 14.5% | 10.6% | 10.0% | 11.1% | 10.3% |
| Respiratory System Diseases | 3.1%  | 3.2%  | 4.1%  | 4.5%  | 4.9%  | 5.7%  |
| Suicide                     | 4.8%  | 4.4%  | 4.5%  | 4.2%  | 4.1%  | 4.1%  |
| Motor Vehicle Accidents     | 3.4%  | 3.0%  | 2.9%  | 2.5%  | 2.2%  | 2.5%  |
| Nervous System Diseases     | 1.1%  | 2.2%  | 2.8%  | 2.9%  | 3.0%  | 3.2%  |
| Digestive System Diseases   | 2.2%  | 2.1%  | 2.7%  | 2.7%  | 2.7%  | 2.9%  |
| Other                       | 0.7%  | 1.4%  | 2.7%  | 2.6%  | 2.7%  | 2.7%  |
|                             |       |       |       |       |       |       |

Recent Mortality Trends by Cause of Death; April 2017; SCOR Global Life Americas



Consistent Mortality
 Framework

 Decomposition of US Population into subcategories



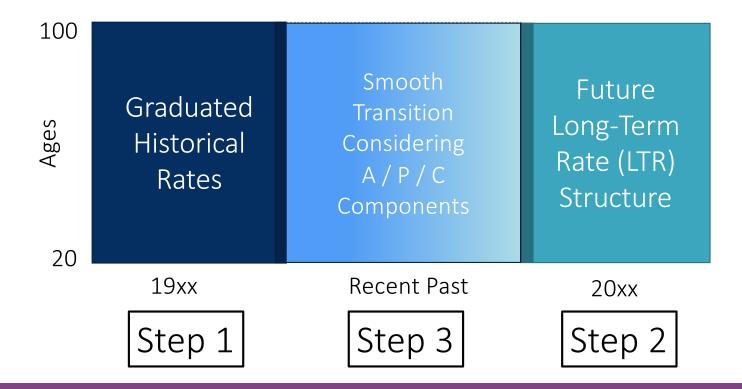


#### Consistent Mortality Framework

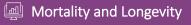
- The purpose of this project is to develop a tool for practicing actuaries to model mortality improvement similar to the approaches used by RPEC and CMI
  - Life insurance
  - Annuities
  - Retirement



#### Consistent Framework...RPEC Methodology







#### Consistent Mortality Framework - Tool

- The MP2018 calculation process uses historical Social Security mortality data to estimate the initial improvement rates
- For insured data, initial attempt was to use historical SOA mortality experience for NS and SM categories
  - Not enough data to achieve credible results
  - Has led to the project to decompose US population data into socioeconomic categories to "mimic" insured data

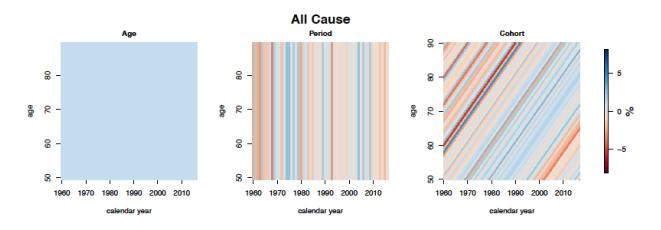


#### Decompose US Population Project

- Start with county-level mortality information
- Work to find ways to associate each county in each year with some form of socioeconomic score
- Use the score to group the counties into some form of deprivation/propensity/socioeconomic ranking
- Create mortality estimations for each year for each decile
- Ensure when aggregating back across deciles, result reasonably estimates the full population mortality



- Analysis of Historical U.S. Population Mortality Improvement Drivers (Bajekal, Haberman, Villegas and Zhou)
- Determination as visualization of Age, Period and Cohort effects; All Cause and Cause of Death





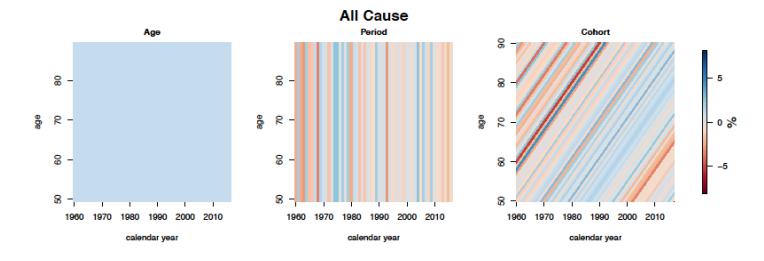
#### Analysis of Historical U.S. Population Mortality

- By Causes broad and granular
  - Circulatory Disease (3)
  - Digestive System (3)
  - External Causes (3)
  - Neoplasms (7)
  - Other (6)
  - Respiratory Diseases (3)



#### Analysis of Historical U.S. Population Mortality

 Horizontal patterns are age effect; vertical patterns are period effect; and diagonal patterns are cohort effects





- Balance of Quantitative and Qualitative Analysis: SOA Expert Panel
- <a href="https://www.soa.org/globalassets/assets/files/resources/research-report/2019/drivers-of-us-mortality-improvement.pdf">https://www.soa.org/globalassets/assets/files/resources/research-report/2019/drivers-of-us-mortality-improvement.pdf</a>
- Most important drivers
  - Individual behaviors
  - SES / Inequality
  - Social Policy
  - Environmental Issues









- Mortality improvement insurance company practice survey
  - Assumptions insurers/reinsurers are using for future mortality improvement for life insurance and annuities
  - How insurers/reinsurers future mortality improvement assumptions might vary assumptions by product, birth cohort, gender or other characteristics
  - Similarities and differences:
    - US vs Canada v UK; Insurers vs. Reinsurers; Life vs. Annuities; Pricing vs. Financial Projections



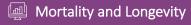
# Mortality Improvement Trend - Independent Analysis

#### **Background and Purpose**

Mortality improvement is an important assumption for projecting future liability cashflows and has a material financial impact on a company. Mortality improvement is a hot topic in the industry and companies show significant interest in understanding the key factors that differentiate mortality improvement. The focus of this research is to gain a better understanding of the following main drivers of mortality improvement:

- Socioeconomic level (Marital status, occupation, income, education)
- Gender
- Attained age
- Geographical and Demographical differences
- Cause of death
- Calendar year
- Birth-year cohort





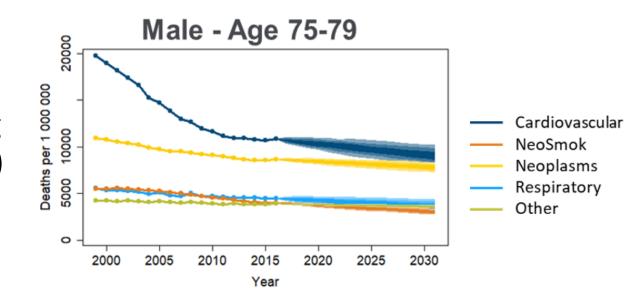
#### Mortality Modeling Research

- Modeling, Measurement, and Management of Longevity Risk (IFoA/CIA/SOA)
- Support further development and enhancement of USMDB and HMD



#### Mortality Modeling Research

 Modeling and Forecasting Cause of Death (Milliman)





#### Experience Studies – In Progress

- Individual Life Waiver of Premium Incidence and Termination and Group Life WOP Termination Valuation Tables
- Individual Life Post Level Term Mortality and Lapse
- Deferred Annuities
- Fixed Index Guaranteed Living Benefits Utilization
- Structured Settlements Mortality
- Private Pension Plans Mortality



#### Experience Studies – Accelerated Underwriting

- Survey underway
- What data might be available for a mortality study
- Looks at:
  - Structure of accelerated underwriting programs
  - How programs are monitored
  - How accelerated underwritten business is performing relative to expectations
- Targeting end of year release





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#### Conclusion

- Mortality and Longevity Research Program is broad covering many topic areas for both a traditional actuarial audience and the public at large.
- Mortality Improvement continues to be an area of emphasis for the program
- More granular US population analysis is planned to provide insights for the insured population.
- As well as, continuing to examine insured population.



## QUESTIONS?



