

# Intermediate Track I

---

## **Considerations in Evaluating Changing Conditions**

2012 CLRS

September 5-7, 2012

Denver, CO

# Introduction

---

- Must go beyond rote application of basic techniques to produce a meaningful reserve estimates.
- Additional considerations and diagnostic tools offer perspective in the effort to understanding risks and uncertainties.
- Communication among operating units is essential.
- Subsequent Intermediate Tracks will provide additional insights and techniques useful in addressing several of these issues.

# Considerations

---

- Aging of Claims
- Loss Adjustment Expenses
- Operations
- Limits and Deductibles
- Interpolation/Extrapolation
- Changing Indications

# Considerations

---

- **Aging of Claims**

1. **Average Closed Value** is not the same as **Average Open Value**
2. **Early Reported Claims** are not the same as **Late Reported Claims**

- Loss adjustment expense
- Operations
- Limits and Deductibles
- Interpolation/Extrapolation
- Changing Indications

# Consideration #1

---

**The average value of claims closed is often a poor estimator of the ultimate average settlement value of claims still open.**

# Consideration #1 (cont.)

## Accident Year 2003

<u>Calendar Date</u>	<u>Cumulative Paid on Closed Claims</u>		<u>Number of Closed Claims</u>		<u>Average Settlement Value</u>
	\$	% of Ultimate	No.	% of Ultimate	\$
12-03	\$50,000,000	25%	1,000	50%	\$50,000
12-04	100,000,000	50%	1,500	75%	66,667
12-05	150,000,000	75%	1,800	90%	83,333
*	*	*	*	*	*
*	*	*	*	*	*
*	*	*	*	*	*
12/11 (Ult)	200,000,000	100%	2,000	100%	100,000

**Why might this frequently be true?**

# Consideration #1 (cont.)

---

- Claims that close early are smaller
- For example in Workers' Compensation:
  - » The cases that close quickly are usually for minor injuries, and may involve just medical-only costs.
  - » The cases open for a long period represent severe injuries and may include:
    - Major Medical Expenses
    - Lifetime Pension Benefits

# Consideration #2

---

**The average costs for late reported claims may differ materially from those reported earlier.**



# Consideration #2 (cont.)

---

**Reason: Often, late reported claims have a very different nature than those reported early.**

## (1) General Liability: Product Liability vs “Slip & Fall”

- » Product Liability cases are often reported later
- » Product cases are often complex, requiring expert testimony and lengthy litigation
- » Product cases reported very late may involve latent injury or cumulative exposure, cases which are difficult to define in terms of date of loss, party at fault, number of occurrences, and type or extent of injuries

# Consideration #2 (cont.)

---

## (2) Workers' Compensation:

Most Workers' Compensation cases are reported within the first 18 months. However, when there are late reported claims they often involve occupational diseases (e.g. carpal tunnel), rather than trauma that is quickly identified and assignable to a single accident date and/or policy.

# Considerations

- Aging of Claims

- Loss adjustment expense

3. The ratio of **Paid Defense & Cost Containment (DCC)** to **Paid Loss** increases over time
4. **Segregate** into Components

- Operations

- Limits and Deductibles

- Interpolation/extrapolation

- Changing Indications

# Consideration #3

---

**For an accident year, the ultimate ratio of DCC to loss may be materially higher than has been true for payments to date.**

# Consideration #3 (cont.)

---

## Reasons:

- 1) Cases open for lengthy periods often involve costly litigation.
- 2) Legal payments are occasionally disbursed later than loss payments.

# Consideration #3 (cont.)

## Industry Schedule P Data Other Liability & Products Liability Net Payments Through 12/31/10 (millions)

Accident <u>Year</u>	Age <u>(months)</u>	Cumulative Paid Losses <u>(1)</u>	Cumulative Paid DCC <u>(2)</u>	Ratio <u>(3)=(2)/(1)</u>
2006	60	13,116	3,134	23.9%
2007	48	11,974	2,581	21.6%
2008	36	9,300	1,852	19.9%
2009	24	5,281	1,099	20.8%
2010	12	1,657	209	12.6%

\* Includes both claims-made and occurrence

Source: AM Best Company, Aggregates and Averages

# Consideration #3 (cont.)

---

- This pattern by company can be influenced by many factors, such as the mode of payment of legal bills, which may vary by company between:
  - » Interim Case Billing
  - » End of Case Billing
- Other influences can include:
  - » Geographical Differences
  - » Use of Staff Counsel vs. Outside Counsel
  - » Classes of Business
  - » Primary vs. Excess Contracts

# Consideration #4

---

**Where DCC costs are volatile, it may be useful to split it into components such as:**

- » **Attorney Fees (External or Internal)**
- » **Other Legal**
- » **Expert Witnesses**
- » **Medical Audits/Reviews**



# Consideration #4 (cont.)

---

## Reasons:

- (1) Legal expense are typically the fastest growing component of DCC, with a growth rate exceeding trends in loss costs.
- (2) Many companies have attempted cost savings steps such as:
  - » Use of staff counsel, rather than independent attorneys, in some situations
  - » Use of companies which audit legal bills
  - » More vigorous defense (which may slow payment patterns on loss side)
  - » Initiating contact with the claimant sooner

# Considerations

- Aging of Claims
- Loss adjustment expense

- **Operations**

- 5. Rate adequacy** can impact reserving
- 6. Positive Development** does not mean a **Claim Department problem**
- 7. Operational changes** affect reserving

- Limits and Deductibles
- Interpolation/Extrapolation
- Changing Indications

# Consideration #5

---

**Expected Loss Ratios based on prior years' experience, used in reserving, must be adjusted for any material changes in rate adequacy.**

# Consideration #5 (cont.)

If adjustments are not made, severe distortions can result:

Accident Year	Earned Premium	Paid Losses	2008 Loss Ratio	Reserves Using 2008 Loss Ratio	Ratio of Actual Rates to Adequate Rates	Actual Loss Ratio	Reserves Using Actual Loss Ratio
(1)	(2)	(3)	(4)	(5)=(2)x(4)-(3)	(6)	(7)=(4) / (6)	(8)=(2)x(7)-(3)
2009	10,000	5,000	50%	0	1.0	50%	0
2010	9,000	2,700	50%	1,800	0.9	56%	2,300
2011	8,000	800	50%	3,200	0.8	63%	4,200
<b>Total</b>		<b>8,500</b>		<b>5,000</b>			<b>6,500</b>
<b>Error = \$1,500</b>							

# Consideration #5 (cont.)

Think about it!

From another angle...

Accident Year	Earned Premium	Paid Losses	2008 Loss Ratio	Ultimates Using 2008 Loss Ratio	Ratio of Actual Rates to Adequate Rates	Adjusted Loss Ratio	Ultimates Using Actual Loss Ratio
(1)	(2)	(3)	(4)	(5)=(2)x(4)	(6)	(7)=(4) / (6)	(8)=(2)x(7)-(3)
2009	10,000	5,000	50%	5,000	1.0	50%	5,000
2010	9,000	2,700	50%	4,500	0.9	56%	5,000
2011	8,000	800	50%	4,000	0.8	63%	5,000
Total		8,500		<b>13,500</b>			<b>15,000</b>

If rates are changing,  
but exposure is not ...,

What do you expect to happen with ultimate losses?

# Consideration #5 (cont.)

---

- Premium can be affected by increased competition and efforts to retain market share
  - » filed rate decreases
  - » increased use of flexible discounts
  - » accounts moved to “preferred” status
- Need to talk to your colleagues to understand what is happening in the marketplace
  - » underwriters
  - » marketing
  - » field office staff
  - » pricing actuaries

# Consideration #6

---

**Upward case development does not necessarily demonstrate something “needs fixing” in the Claims Department.**

# Consideration #6 (cont.)

## Resulting Development (Illustration):

ESTIMATE AT 12 MONTHS			STATUS 3 YEARS LATER	
<u>Claims</u>	<u>Average \$</u>	<u>Total</u>	<u>Average \$</u>	<u>Total</u>
1-97	\$10,000	\$970,000	\$10,000	\$970,000
<u>98-100</u>	<u>10,000</u>	<u>30,000</u>	<u>500,000</u>	<u>1,500,000</u>
TOTAL		\$1,000,000		\$2,470,000

LDF = 2.47

**The Point:** Loss development can arise from the natural emergence of facts within the context of a company's reserving philosophy



# Consideration #7

---

**Internal company changes can dramatically affect patterns in reserving data, and distort the result of basic reserving methodologies.**

# Consideration #7 (cont.)

For example, suppose the company changed TPA's 12 months ago, and now has the following triangles:

<b>Paid Losses</b>					
<u>Acc Yr.</u>	<u>12 Mos.</u>	<u>24 Mos.</u>	<u>36 Mos.</u>	<u>48 Mos.</u>	<u>60 Mos.</u>
2007	100	150	180	198	208
2008	100	150	180	198	
2009	100	150	180		
2010	100	150			
2011	100				

<b>Reported Losses</b>					
<u>Acc Yr.</u>	<u>12 Mos.</u>	<u>24 Mos.</u>	<u>36 Mos.</u>	<u>48 Mos.</u>	<u>60 Mos.</u>
2007	125	167	189	202	208
2008	125	167	189	206	
2009	125	167	194		
2010	125	177			
2011	133				

# Consideration #7 (cont.)

	<b>Paid to Reported Ratios</b>				
<u>Acc Yr.</u>	<u>12 Mos.</u>	<u>24 Mos.</u>	<u>36 Mos.</u>	<u>48 Mos.</u>	<u>60 Mos.</u>
2007	0.80	0.90	0.95	0.98	1.00
2008	0.80	0.90	0.95	<b>.096</b>	
2009	0.80	0.90	<b>.093</b>		
2010	0.80	<b>.085</b>			
2011	<b>.075</b>				

Paid to Reported Ratios are an example of a diagnostic tool which can be used to check for:

- » Case reserve strengthening (this example)
- » Case reserve weakening
- » Change in rate of payment

Later sessions will discuss methods, such as the Berquist & Sherman approach, to correct for these kinds of changes.

# Considerations

---

- Aging of Claims
- Loss adjustment expense
- Operations

- **Limits and Deductibles**

- 8. **Higher limits** mean more future development

- 9. **Higher deductibles** (attachment points) mean more future development

- Interpolation/Extrapolation
- Changing Indications

# Consideration #8

---

When reinsurance retentions and/or policy limits are higher, the portion of ultimate losses that are reported at each given maturity tends to be lower.

# Consideration #8 (cont.)

## ILLUSTRATION:

<u>One Claim</u>	<u>Dollars Reported as of:</u>		
	<u>12 Months</u>	<u>24 Months</u>	<u>36 Months (Ult.)</u>
Loss Limited to \$100,000	\$50,000	\$100,000	\$100,000
Loss Limited to \$500,000	50,000	300,000	500,000
Unlimited Loss	50,000	300,000	1,000,000

	<u>% of Ultimate Losses Reported as of:</u>		
	<u>12 Months</u>	<u>24 Months</u>	<u>36 Months (Ult.)</u>
Loss Limited to \$100,000	50%	100%	100%
Loss Limited to \$500,000	10%	60%	100%
Unlimited Loss	5%	30%	100%

# Consideration #9

---

When attachment points are higher for reinsurance, excess, umbrella or self-insured coverages, then the percentage of ultimate dollars that is reported at each given maturity tends to be lower.

# Consideration #9 (cont.)

## ILLUSTRATION:

<u>One Claim</u>	<u>Dollars Reported as of:</u>		
	<u>12 Months</u>	<u>24 Months</u>	<u>36 Months (Ult.)</u>
1st Dollar Coverage	\$50,000	\$300,000	\$1,000,000
Losses in excess of \$100,000	0	200,000	900,000
Losses in excess of \$500,000	0	0	500,000

  

	<u>% of Ultimate Losses Reported as of:</u>		
	<u>12 Months</u>	<u>24 Months</u>	<u>36 Months (Ult.)</u>
1st Dollar Coverage	5%	30%	100%
Losses in excess of \$100,000	0%	22%	100%
Losses in excess of \$500,000	0%	0%	100%



# Considerations

---

- Aging of Claims
- Loss adjustment expense
- Operations
- Limits and Deductibles

- **Interpolation/Extrapolation**

- 10. Incomplete accident years** can be deceiving

- 11. Tail development** is important

- **Changing Indications**

# Consideration #10

---

**Estimating ultimate losses for an incomplete accident year requires special adjustments.**

# Consideration #10 (cont.)

## Reported losses through Q3 2012

Accident

<u>Year</u>	<u>9 mos.</u>	<u>21 mos.</u>	<u>33 mos.</u>	<u>45 mos.</u>	<u>57 mos. (ult.)</u>
2008	100,000	250,000	300,000	315,000	315,000
2009	100,000	250,000	300,000	315,000	
2010	120,000	300,000	360,000		
2011	110,000	275,000			
2012	130,000				

## Age to Age Factors

Accident

<u>Year</u>	<u>9-21</u>	<u>21-33</u>	<u>33-45</u>	<u>45-57</u>
2008	2.50	1.20	1.05	1.00
2009	2.50	1.20	1.05	
2010	2.50	1.20		
2011	2.50			

Cumulative Factor to Ultimate	3.15	1.26	1.05	1.00
----------------------------------	------	------	------	------

# Consideration #10 (cont.)

## Required IBNR as of Q3 2012

Accident <u>Year</u>	(1) Reported as of <u>Q3 2012</u>	(2) Factor to <u>Ultimate</u>	(3)=(1)*(2) Estimated Ultimate <u>Losses</u>	(4)=(3)-(1) Required IBNR as of <u>Q3 2012</u>
2008	315,000	1.00	315,000	0
2009	315,000	1.00	315,000	0
2010	360,000	1.05	378,000	18,000
2011	275,000	1.26	346,500	71,500
2012	130,000	3.15	409,500	279,500

**IS THIS CORRECT?**



# Consideration #10 (cont.)

---

Estimating ultimate losses for an incomplete accident year requires special adjustments.

The latest year needs to be reduced by 0.75 for the incomplete policy period. Future claims for the final quarter need to be excluded.

# Consideration #11

---

**“Tail Development” can have a dramatic effect on reserve needs.**

# Consideration #11 (cont.)

---

## Some examples of when development occurs beyond 10 years

- Products
  - Complex issues (Who's liable? How to prove injury was caused by product? Date of loss?)
  - Occupational Disease
- Workers' Compensation
  - Life pension cases, with escalation clauses in some states' benefit structures
  - Medical costs on life pension cases
- Medical Malpractice
  - Child injured at delivery reaches legal age
  - Delayed manifestation, with subsequent complex issues

# Consideration #11 (cont.)

---

## Techniques To Derive Tail Factors

1. Examine broader data sources

e.g. ISO, NCCI, RAA, AM Best

(Caution: Learn the limitations of such data)

2. Curve Fitting

3. Generalized Bondy Method



# Consideration #11 (cont.) - Broader Data Sources

## How Much Tail Can There Be?

Development in Reinsured Layers  
Selected Cumulative Age to Ultimate Factors

Source: RAA data

Line of Business	15 Years to Ultimate	25 Years to Ultimate
WC Treaty	1.582	1.149
GL Treaty	1.234	1.030
AL Treaty	1.021	1.000

# Considerations

---

- Aging of Claims
- Loss adjustment expense
- Operations
- Limits and Deductibles
- Interpolation/Extrapolation

- **Changing Indications**

12. Indications can change for a variety of reasons - ask why!

# Consideration #12

---

## **Why do indications change?**

- » **Actual losses emergence differs from expected.**
- » **Assumptions and/or methods change.**

# Consideration #12 (cont.)

## Last Year's Review Reported Losses at 12/2010

<u>AY</u>	<u>12 Mos.</u>	<u>24 Mos.</u>	<u>36 Mos.</u>	<u>48 Mos.</u>
2007	125	167	189	202
2008	125	167	189	
2009	125	167		
2010	125			

## Age to Age Factors

<u>AY</u>	<u>12-24</u>	<u>24-36</u>	<u>36-48</u>	
2007	1.34	1.13	1.07	
2008	1.34	1.13		
2009	1.34			
Selected	1.34	1.13	1.07	Tail
Factor to Ultimate	1.62	1.21	1.07	1.00

# Consideration #12 (cont.)

<u>AY</u>	Reported Losses <u>at 12/2010</u>	Factor to <u>Ultimate</u>	Estimated <u>Ultimate</u>
2007	202	1.00	202
2008	189	1.07	202
2009	167	1.21	202
2010	125	1.62	202

Easy ... right!

# Consideration #12 (cont.)

---

12 months later the actuary returns:

“Bad news, boss...

We have to take a big hit to cover deterioration in the prior years.”

Will this be a pleasant discussion?

What happened????

# Consideration #12 (cont.)

<u>AY</u>	<u>Reported Losses at 12/2011</u>	<u>Factor to Ultimate</u>	<u>Estimated Ultimate</u>	<u>Estimate Last Year</u>	<u>Impact</u>
2007	208	1.00	208	202	6
2008	206	1.03	212	202	10
2009	194	1.11	216	202	14
2010	177	1.28	226	202	24

Total Prior Year impact: 54  
Increase in 4-year ultimate 6.7%

# Consideration #12 (cont.)

## This Year's Review Reported Losses at 12/2011

<u>AY</u>	<u>12 Mos.</u>	<u>24 Mos.</u>	<u>36 Mos.</u>	<u>48 Mos.</u>	<u>60 Mos.</u>
2007	125	167	189	202	208
2008	125	167	189	206	
2009	125	167	194		
2010	125	177			
2011	133				

## Age to Age Factors

<u>AY</u>	<u>12-24</u>	<u>24-36</u>	<u>36-48</u>	<u>48-60</u>	
2007	1.34	1.13	1.07	1.03	
2008	1.34	1.13	1.09		
2009	1.34	1.16			
2010	1.42				
					Tail
Prior selected	1.34	1.13	1.07	1.00	1.00
Selected	1.40	1.15	1.08	1.03	1.00
Factor to Ultimate	1.79	1.28	1.11	1.03	1.00



# Consideration #12 (cont.)

---

Did the actuary miss the boat last year?

Did the actuary overreact this year?

What if factors (development assumptions) remained unchanged?

# Consideration #12 (cont.)

If assumptions remained unchanged?

<u>AY</u>	<u>Reported Losses at 12/2011</u>	<u>Retain Prior Factor</u>	<u>Estimated Ultimate</u>	<u>Estimate Last Year</u>	<u>Impact</u>
2007	208	1.00	208	202	6
2008	206	1.00	206	202	4
2009	194	1.07	207	202	5
2010	177	1.21	214	202	12

Total Prior Year impact: 27  
Increase in 4-year ultimate 3.4%

# Consideration #12 (cont.)

---

- Part of the impact is due to actual losses emerging different from what was expected.
- Should development assumptions change?
  - » If so, that accounts for the remaining impact.

# Conclusions

---

*It is seldom sufficient to simply manipulate the numbers. The actuary must actively seek a thorough understanding of...*

- **...the loss and claims process**
- **...the business and the exposures involved**
  - » **underwriting**
  - » **pricing**
  - » **reinsurance**
- **...techniques and models to deal with the available data**

# Conclusions

---

*If professional colleagues are to rely on actuarial advice, they will expect meaningful interpretation of the indications, and the risks and uncertainties in changing estimates.*

# Looking Ahead

---

**Session II**

**Investigating and Detecting  
Change**

**Session III**

**Case Studies**