Workshop 5: Large Account Pricing

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Presenter: Joshua Taub, FCAS

CAS Ratemaking and Product Management Seminar March 19, 2018 Chicago, IL

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Agenda

- Who I am
- 2 Intro to Large Accounts
- 3 Experience Rating
- Schedule Rating
- Retrospective Rating



Teaching CAS Exams 5 & 8 for The Infinite Actuary



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- Graduated from UCSB, now on Actuarial Advisory Board

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Photo Credit: www.dts-nachrichtenagentur.de

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In our case, none of these

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What does significant mean?

- Big enough for an insured's own loss experience to have some credibility in predicting their own future losses.
- Generally: the more premium, the more credibility

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- Varying degrees of risk aversion

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 - Experience Rating
 - Schedule Rating

Question #1

You are the Chief Risk Officer for a large corporation, and you are deciding on how to manage the risks your company faces. You have 2 goals:

- You want to retain a moderate amount of risk.
- 2 You want an insurer to handle all claims.

Which option do you choose?

- LDD
- ② Excess
- Retro
- Conventional Policy

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Choice between 1 and 3 depends on the plan parameters of each.

Experience Rating

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- Safety Incentive: A financial incentive to prevent and mitigate accidents.
- **Enhance Competition**: More insurers willing to write business if better chance of profit.

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Experience rating credibility is inversely related to the strength of the classification plan.

Two insurers are competitors in writing personal auto insurance.

- Insurer #1 only has rating factors for age of driver, miles driven, and # of prior claims.
- Insurer #2 only has rating factors for age of driver, miles driven, territory, credit score, and # of prior claims.

Which insurer's prior claim surcharges are likely to be more credible?

- Insurer #1
- 2 Insurer #2

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Which insurer's prior claim surcharges are likely to be more credible?

- Insurer #1 This one has more experience rating credibility
- Insurer #2 This has the stronger class plan

There are 2 main categories of Experience Rating Plans:

No-Split Plans: There is no subdivision of losses.

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• Single-Split:
$$A_p = \begin{cases} A & \text{if } A \leqslant C \\ C & \text{if } A > C \end{cases}$$
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Multi-Split:

$$A_p = I + (1 - d)I + (1 - d)^2I + ... + (1 - d)^N(A - N \times I)$$

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Split plan formula is re-written:

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The ELRs and D-ratios are adjusted for these, so expected losses are on same basis as actual losses used.

For a given risk, the losses entering the workers compensation experience rating formula are as follows.

Claim Number	Indemnity Loss	Medical Loss	Total Loss
1	\$2,000	\$4,000	\$6,000
2	\$0	\$2,800	\$2,800
3	\$10,000	\$8,000	\$18,000
4	\$0	\$12,000	\$12,000

Additionally, the following information is given for this risk.

Expected Primary Losses: \$13,000
Expected Excess Losses: \$50,000
Ballast: 100,000
Weight: 0.20

Assume that there is a single split point of \$5,000 between primary and excess.

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A_e §1.000

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Ballast: $100,000 \quad Mod = \frac{12,340 + 0.20(16,100) + (1 - 0.20)(50,000) + 100,000}{(13,000 + 50,000) + 100,000}$

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Expected Excess Losses: \$50,000

Ballast: $100,000 \quad \textit{Mod} = \frac{12,340 + 0.20(16,100) + (1 - 0.20)(50,000) + 100,000}{(13,000 + 50,000) + 100,000}$

Weight: $0.20 \ \textit{Mod} = 0.95$

Assume that there is a single split point of \$5,000 between primary and excess.

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The plan also caps the basic limits Loss + ALAE for each historical claim at a Maximum Single Loss (MSL).

No-Split plan formula is re-written:

$$Mod = Z \times \frac{AER - EER}{EER}$$

AER = Actual Experience Ratio EER = Expected Experience Ratio

$$Mod = Z \times \frac{AER-EER}{EER}$$

 $\textit{EER} = \frac{\textit{Expected ultimate basic limits losses and ALAE limited by the MSL}}{\textit{Expected ultimate basic limits losses and ALAE NOT limited by the MSL}}$

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 $AER = \frac{\text{Actual basic limits losses and ALAE to date limited by the MSL} + \text{Expected Development}}{\text{Expected ultimate basic limits losses and ALAE NOT limited by the MSL}}$

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Same denominator for AER and EER.

The denominator is known as the Company Subject Loss Cost (CSLC).

First calculated for each year of experience and each subline (Premises/Operations and Products/Completed Ops).

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$$CSLC_{y,sl} = BLEL_{sl} \times DeTrend_{y,sl}$$

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$$\textit{CSLC} = \sum_{y=1}^{3} \sum_{\textit{sl}} \textit{CSLC}_{\textit{y,sl}}$$

 $\textit{AER} = \frac{\textit{Actual basic limits losses and ALAE to date limited by the MSL} + \textit{Expected Development}}{\textit{CSLC}}$

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Given the following information for a commercial general liability risk, calculate the experience (Credit)/Debit based on the ISO CGL Experience Rating Plan. Show all work.

Actual Losses in the experience period valued as of March 31, 2006:

Claim	Loss	ALAE
1	\$1,000	\$200
2	1,500	200
3	5,000	800
4	6,000	1,000
5	12,000	1,800
6	23,000	2,200
7	120,000	40,000

Expected Unreported Losses and ALAE @ March 31, 2006 = \$45,000 Company Subject Basic Limits Loss and ALAE costs = \$250,000

Basic Limit = \$100,000 MSL = \$150,000 Expected Experience Ratio = 0.9 Credibility = 0.6

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,	1,800
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Basic Loss Min(Basic Loss+ALAE,MSL)

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5,000

Min(Basic Loss+ALAE,MSL) 1,200 1,700 5,800

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```
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Expected Experience Ratio = 0.9 AER = \frac{194,700 + 45,000}{250,000} = 0.9588

Credibility = 0.6
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```
Basic Limit = $100,000 Mod = Z \times \frac{AER-EER}{EER} = 0.6 \times \frac{0.9588-0.9}{0.9} MSL = $150,000 Expected Experience Ratio = 0.9 AER = \frac{194,700+45,000}{250,000} = 0.9588 Credibility = 0.6
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NCCI vs ISO

Component	ISO Experience Rating Plan	NCCI Experience Rating Plan
Experience period	Typically 3 years, lagged 1 year	Same as ISO
Experience Mod	Add 1 to get a factor	Already in factor form
Credibility	Up to 100% (of limited loss experience)	Less than 100%
Plan type	No-split plan	Single-split plan
ALAE	Included in Mod calculation	Not included in mod calculation
Trending of losses	No trending of actual loss, de-trend expected loss	Same as ISO
Loss development	Compares ultimate losses	Compares undeveloped losses
Loss limits	Basic limits and MSL	SAL

Schedule Rating

Allows underwriters to subjectively adjust premium for individual risks based on risk characteristics not otherwise reflected in rate calculation.

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Schedule rating should avoid considering any risk characteristics that are already fully reflected in experience rating.

ISO Commercial General Liability Plan categories:

• Location: Exposure inside and outside. Up to 10% credit or debit.

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The credits and debits by risk characteristic are summed, and then capped at $\pm 25\%$, so the maximum schedule debit is 1.25, and the maximum schedule credit is 0.75.

An insurer has been tracking the claims experience of a very large construction company for the three years the construction company has been insured by this insurer. The construction company will implement a new safety program starting in the upcoming year.

(a) Determine whether the insurer should use experience rating, schedule rating, or both to rate the construction company for the upcoming policy period. Briefly explain your answer.

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BOTH. Experience rating will reflect the actual experience over the last few years, and schedule rating will reflect the expected impact of the new safety program.

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- (b) Assuming no additional changes, determine whether the insurer should use experience rating, schedule rating, or both to rate the construction company five years from now. Briefly explain your answer.

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- (b) Assuming no additional changes, determine whether the insurer should use experience rating, schedule rating, or both to rate the construction company five years from now. Briefly explain your answer.
 - Only experience rating. Since the safety program would now be fully reflected in the insured's experience, the experience rating will pick up the impact of the safety program. Using schedule rating to reflect the safety program would double count the impact of the program.

Retrospective Rating

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Initial premium is collected at start of policy term.

Adjustments to premium starting around 6 months after term, and every 12 months thereafter as losses develop.

May be many years before policy premium is finalized.

Expected Premium = Expected Loss + Expected Expenses

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Retro hypothetical - Premium fully dependent on actual loss:

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Value proposition for insured (example numbers):

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Value proposition for insured (example numbers):

Pay an extra \$1,000 and guarantee your premium ≤ \$10,000.

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Retros have maximum and minimum premiums.

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Expected Expenses \leqslant Actual Premium $\leqslant \infty$

Value proposition for insured (example numbers):

Pay an extra \$1,000 and guarantee your premium ≤ \$10,000.

 $1,000 + Expected Expenses \leqslant Actual Premium \leqslant 10,000$

Now, insured is protected if Actual Loss + Expenses > \$10,000.

Retros have maximum and minimum premiums.

The cost to have max/min premium is the **net insurance charge**.

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Actual Premium = Min(Actual Loss + Insurance Charge + Expected Expenses; \$10,000)

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Note these are **NOT** coverage limits!

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Case 2: With per occurrence limit in retro premium calculation (Table L approach).

- Replace A with actual limited loss
- Replace I with net insurance charge including occurrence limit charge

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The reported losses during the policy period evaluated as of June 30, 2012 are as follows:

<u>Claim</u>	Reported Losses
#1	\$300,000
#2	\$200,000
#3	\$100.000

The provisions for this retrospective rating plan are as follows:

Minimum retrospective premium ratio	50%
Maximum retrospective premium ratio	150%
Loss Conversion Factor	1.2
Per Accident Loss Limitation	\$150,000
Expense Allowance Excluding Tax Multiplier	25%
Expected Loss Ratio	60%
Tax Multiplier	1.05
Net Insurance Charge	44.6%
Standard Premium	\$540,000

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 $R = [\$359,208 + (1.2)(\$400,000)] \times 1.05$

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$$b = 0.6652 \times $540,000 = $359,208$$

$$B = [$359,208 + (1.2)($400,000] \times 1.05$$

$$B = $881.168$$

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$$b = 0.6652 \times $540,000 = $359,208$$

$$R = [$359,208 + (1.2)($400,000)] \times 1.05$$

$$R = $881,168$$
Win Premium = $50\% \times $540,000 = $270,000$

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#3	\$100,000	\$100,000
		\$400,000

The provisions for this retrospective rating plan are as follows:

Minimum retrospective premium ratio 50% Maximum retrospective premium ratio 150% Loss Conversion Factor 1.2 \$150,000 Per Accident Loss Limitation Expense Allowance Excluding Tax Multiplier 25% Expected Loss Ratio 60% Tax Multiplier 1.05 Net Insurance Charge 44.6% Standard Premium \$540,000 R = (b + CA)T

b = e - (C - 1)E[A] + CI

(b/P) = 25% - (1.2 - 1)60% + (1.2)(44.6%) (b/P) = 0.6652 $b = 0.6652 \times $540,000 = $359,208$ $R = [$359,208 + (1.2)($400,000)] \times 1.05$ R = \$881,168Min Premium = $50\% \times $540,000 = $270,000$ Max Premium = $150\% \times $540,000 = $810,000$

- (a) Calculate the retrospective premium as of June 30, 2012.
- (b) Discuss what could cause the retrospective premium in part (a) above to change for the insured between June 30, 2012 and the tenth adjustment.

An employer negotiated a workers compensation retrospective policy with an insurer, effective from January 1, 2011 to December 31, 2011. The first adjustment of the retrospective premium occurs six months after the end of the policy period and annually thereafter until the tenth adjustment.

The reported losses during the policy period evaluated as of June 30, 2012 are as follows:

Claim	Reported Losses	Actual Limited Losses
#1	\$300,000	\$150,000
#2	\$200,000	\$150,000
#3	\$100,000	\$100,000
		\$400,000

The provisions for this retrospective rating plan are as follows:

Minimum retrospective premium ratio	50%
Maximum retrospective premium ratio	150%
Loss Conversion Factor	1.2
Per Accident Loss Limitation	\$150,000
Expense Allowance Excluding Tax Multiplier	25%
Expected Loss Ratio	60%
Tax Multiplier	1.05
Net Insurance Charge	44.6%
Standard Premium	\$540,000

R = (b + CA)T

$$b = e - (C - 1)E[A] + CI$$

$$(b/P) = 25\% \cdot (1.2 \cdot 1)60\% + (1.2)(44.6\%)$$

$$(b/P) = 0.6652$$

$$b = 0.6652 \times \$540,000 = \$359,208$$

$$R = [\$359,208 + (1.2)(\$400,000)] \times 1.05$$

 $H = [\$359,208 + (1.2)(\$400,000)] \times 1.05$ R = \$881,168Min Premium = $50\% \times \$540,000 = \$270,000$ Max Premium = $150\% \times \$540,000 = \$810,000$

- (a) Calculate the retrospective premium as of June 30, 2012. Answer = \$810,000
- (b) Discuss what could cause the retrospective premium in part (a) above to change for the insured between June 30, 2012 and the tenth adjustment.

An employer negotiated a workers compensation retrospective policy with an insurer, effective from January 1, 2011 to December 31, 2011. The first adjustment of the retrospective premium occurs six months after the end of the policy period and annually thereafter until the tenth adjustment.

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The provisions for this retrospective rating plan are as follows:

Minimum retrospective premium ratio 50% Maximum retrospective premium ratio 150% Loss Conversion Factor 1.2 \$150,000 Per Accident Loss Limitation Expense Allowance Excluding Tax Multiplier 25% Expected Loss Ratio 60% Tax Multiplier 1.05 Net Insurance Charge 44.6% Standard Premium \$540,000 R = (b + CA)T

b = e - (C - 1)E[A] + CI $(b/P) = 25\% \cdot (1.2 - 1)60\% + (1.2)(44.6\%)$ (b/P) = 0.6652 $b = 0.6652 \times $540,000 = $359,208$

 $R = [\$359,208 + (1.2)(\$400,000)] \times 1.05$ R = \$881,168Min Premium = $50\% \times \$540,000 = \$270,000$ Max Premium = $150\% \times \$540,000 = \$810,000$

- (a) Calculate the retrospective premium as of June 30, 2012. Answer = \$810,000
- (b) Discuss what could cause the retrospective premium in part (a) above to change for the insured between June 30, 2012 and the tenth adjustment. Can only go down since already at max. Only way: reduction in case reserves.

Thank you!

THANK YOU!