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Pension Forum, January 2005

R-D109-07 Financial Economics and Canadian Pension Valuation

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Obj6c

Obj5a

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Obj6c

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Fundamentals of Retiree Group Benefits by Yamamoto
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Pension Forum, January 2005

R-D112-10 Selection of Actuarial Assumptions

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R-D127-09 ASOP6 Measuring Retiree Group Benefit Obligations

Obj6c

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Obj5b

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Differences in Actuarial Assumptions, The Actuary 1988

Obj6b

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Fundamentals of Retiree Group Benefits by Yamamoto
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AAA Code of Professional Conduct

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SOA Code of Professional Conduct

Obj5c

R-D125-09 ASOP35 Selection of Demographic and Other Noneconomic Assumptions for Measuring Pension Obligations

Obj8

Fundamentals of Retiree Group Benefits (Yamamoto et al)

Page 287 - 294

I. ACTUARIAL METHODS FOR LIFE AND HEALTH PLANS

1. All pension actuarial cost methods applicable to retiree group benefit plans.
2. Only difference is benefit definition
 - a) Benefit related to health plan costs at retirement + cost increases after retirement.
 - b) No benefits EE terminating before eligible for retirement
 - c) Benefit costs / retiree contributions vary on service, age, and marital status at retirement.
3. May split costs associated with total eligible health plan expenses and those reimbursed by Medicare
 - a) Net present value cost of the plan = PV of total eligible expenses less PV of Medicare reimbursed expenses:

$$PVTH_x = \frac{\sum_j^{\infty} l_j \times {}^r q_j \times B_j \times T_{\•j} \times v^{j-x}}{l_x}$$

$$PVM_x = \frac{\sum_j^{64} l_{65} \times {}^r q_j \times M_{65} \times M_{\•65} \times v^{65-x}}{l_x} + \frac{\sum_j^{\infty} l_j \times {}^r q_j \times M_j \times M_{\•j} \times v^{j-x}}{l_x}$$

$$PVNH_x = PVTH_x - PVM_x$$

where:

- $PVTH_x$ = present value of total health plan benefit
- l_j = number alive at age j
- ${}^r q_j$ = probability of retirement at age j
- B_j = benefit at age j (increased at total health trend assumption from age x)
- $T_{\•j}$ = increasing annuity at age j (increasing at total health trend assumption)
- v^{j-x} = interest discount
- PVM_x = present value of Medicare benefit
- M_j = Medicare benefit at age j (increased at Medicare increase assumption from age x)
- $M_{\•j}$ = increasing annuity at age j (increasing at Medicare increase assumption)
- $PVNH_x$ = present value of net health plan benefit
- B_j, M_j = present benefits payable at the attained age j and therefore include any health/Medicare inflation from age x

Modified Projected Unit Credit

1. Required “attribution” method under FAS 106
2. Since retiree group benefits has no rate of benefit accrual, method must be modified
3. FAS 106 requires benefits be attributed to years prior to the date of full eligibility for benefits instead of expected retirement dates.
 - a) E.g. EE hired at 35 with full benefit accrual by earliest retirement age 55.
 - b) EE is assumed to have accrued one-fourth $[5 \div (55 - 35)]$ of his benefit at age 40, three-fourths at 50 $(15 \div 20)$ and the full benefit at age 55

Delayed Funding Eligibility

1. Applicable to any actuarial method
2. The difference is only participants who meet high age and service requirements will be included in the calculations. (E.g. Age 45 with 15 years of service or a rule of 60)
3. Rationale: only value EE most likely to receive retiree group benefit
4. Provide some degree of advance accrual for ER

Modified Entry Age

1. For welfare benefit fund calculations.
2. Entry age = Max (age at hire, date the welfare benefit fund was adopted)
 - a) Benefits funded over the working lifetime of employees

II. SELECTION OF ACTUARIAL METHODS

1. FAS 106 requires projected unit credit method with cost allocation from hire age to full eligibility age (typically earliest retirement age)
 - a) Cost allocation may also be over different time periods depending on how benefits are earned.
2. Most conservative (fastest) funding form entry age normal method
3. Most liberal (slowest) funding from traditional unit credit method
4. In between from aggregate, frozen initial liability, and projected unit credit methods
 - a) Depend on amortization period of any unfunded liability in the funding amount.
5. GASB allow all 6 methods: entry age, attained age, frozen entry age, frozen attained age, projected unit credit, and aggregate.
 - a) Actuary must communicate the longer term differences of the alternative methods.
6. Pension literature on actuarial cost methods selection generally also applicable for retiree group benefit valuations

III. EXPERIENCE GAINS AND LOSSES

1. Immediate gain methods (entry age and unit credit) produce annual GL
2. Generalized formula for calculating the gain/loss is:

$$Exp\ UAL_{t+1} = (UAL_t + NC_t) \times (1+i) - C_t^i$$

$$Gain/(loss) = Exp\ UAL_{t+1} - UAL_{t+1}$$

where:

$Exp\ UAL_{t+1}$	=	Expected unfunded actuarial liability
UAL_{t+1}	=	Actual unfunded actuarial liability
NC_t	=	Normal cost
i	=	interest rate
C_t^i	=	Contribution (with interest)

3. GL may be identified by each source E.g. GL due to plan cost changes:

$$Gain/(loss) = AL_{t+1} - \frac{PC_t \times (1+m)}{PC_{t+1}} \times AL_{t+1}$$

where:

PC_t	=	plan cost at time t
m	=	expected health trend

4. Pension literature on GL also applicable for retiree group benefit valuations

IV. “ROLL-FORWARD” VALUATIONS

1. Allowed by ASOP 6 for interim valuations
2. Expected actuarial liability (no GL):

$$Exp\ AL_{t+1} = (AL_t + NC_t) \times (1+i) - B_t^i$$

3. May adjust expected AL if actual claim rates is different from prior year's claim rate increased by the valuation health care cost trend rate assumption.
 - a) Linear adjustment is generally used (I.e. if the actual increase in cost rate was $j\%$ and the expected increase was $i\%$, adjustment is:

$$Adj\ AL_{t+1} = Exp\ AL_{t+1} \times \frac{1+j}{1+i}$$

4. Similar adjustment may be made for demographics
 - a) Either total number or a change in the make-up (i.e., age and gender)
 - b) Consider differences by group (i.e., actives versus pre- and post-65 retirees), plan type, and location.
5. Normal cost estimation generally = Prior year's normal cost increased by the ultimate trend rate:

$$PVB_x^z = \sum_{t=0}^{\infty} {}_t p_x \times r_{x+t} \times B_0^z \times \prod_{j=0}^{t-1} (1+h_{z+j})$$

where:

PVB	=	present value of projected benefits
${}_t p_x$	=	probability of survival to duration t
r_{x+t}	=	probability of being retired at $x+t$
B_0^z	=	initial benefit amount in year z

$$h_{z+j} = \text{health care trend in year } z + j$$

$$PVB_x^{z+1} = \sum_{t=0}^{\infty} {}_t p_x \times r_{x+t} \times B_0^{z+1} \times \prod_{j=0}^{t-1} (1+h_{z+1+j})$$

$$B_0^{z+1} = B_0^z \times (1+h_z)$$

$$PVB_x^{z+1} = \sum_{t=0}^{\infty} {}_t p_x \times r_{x+t} \times B_0^z \times (1+h_z) \times \prod_{j=0}^{t-1} (1+h_{z+1+j})$$

$$PVB_x^{z+1} = \sum_{t=0}^{\infty} {}_t p_x \times r_{x+t} \times B_0^z \times \prod_{j=0}^t (1+h_{z+j})$$

$$PVB_x^{z+1} = \sum_{t=0}^{\infty} {}_t p_x \times r_{x+t} \times B_0^z \times (1+h_{z+t}) \times \prod_{j=0}^{t-1} (1+h_{z+j})$$

6. If most persons aged x benefits do not commence until after the select period (i.e., time t is beyond the select period), the term h_{z+t} is a constant equal to the ultimate trend rate h_{ult} .

$$PVB_x^{z+1} = (1+h_{ult}) \times \sum_{t=0}^{\infty} {}_t p_x \times r_{x+t} \times B_0^z \times \prod_{j=0}^{t-1} (1+h_{z+j})$$

$$PVB_x^{z+1} = (1+h_{ult}) \times PVB_x^z$$

$$NC_x^z = PVB_x^z \times \frac{1}{FEA - e}$$

$$NC_x^{z+1} = PVB_x^{z+1} \times \frac{1}{FEA - e}$$

therefore:

$$NC_x^{z+1} = NC_x^z \times (1+h_{ult})$$

Above illustrates the formula for the projected unit credit method normal cost development. Similar proofs can be made for other actuarial cost methods

7. For select period > 5 years, such assumption (Most active EE start benefit payments until after the select period) does not hold
 - a) Decide how much greater the service cost should be increased over the ultimate trend rate assumption.
8. Stable population implies total NC increases at the ultimate health care trend rate.