Comment #7 – 12/15/14 – 7:05 p.m.

Actuarial Standards Board
1850 M Street NW
Suite 300
Washington, DC  20036

December 15, 2014

Re:  Proposed Actuarial Standard of Practice: Principle-Based Reserves for Life Products

Dear Sir or Madam:

We welcome the opportunity to provide comments on the proposed Actuarial Standard of Practice for Principle-Based Reserves for Life Products. While this comment letter has been drafted by employees of Transamerica, our comments reflect our personal views and do not necessarily represent the views of our employer.

Although principle-based reserving is not yet in place, we believe that the development of an ASOP at this time can benefit the actuarial community by providing professional guidance for certain issues that will be encountered when companies implement VM-20. At the same time, the development of this ASOP carries risks. For example, the danger exists that certain elements of the ASOP could contradict or inappropriately add to VM-20. We are also concerned that the ASOP references to VM-20 will get out of sync as VM-20 is updated. Accordingly, needless redundancy should be avoided, and conflicts with VM-20 should be eliminated.

In the attached appendices, we provide responses to the four questions asked by the ASB, along with a color-coded markup of the draft ASOP. The markup should be interpreted as follows:

- If a section is not highlighted, we support including it (or similar content) in the ASOP.
- If a section is highlighted in yellow, we perceive it to be redundant with VM-20. We see little benefit of including such sections in the ASOP in light of the risk identified above.
- If a section is highlighted in red, we view it as contradicting VM-20, and we believe that such sections must be substantially revised or eliminated.

We conclude that the draft ASOP still needs significant revisions. Given the available window prior to formal implementation of PBR, we recommend that the ASB revise the draft and promulgate an additional Exposure Draft.

Sincerely,

Chris Conrad, FSA, MAAA
Donald Krouse, FSA, MAAA
Bill Schwegler, FSA, MAAA
Appendix 1
Responses to Questions from the ASB

1. Is the distinction between the company's responsibility and the actuary's responsibility clear?

While we applaud the efforts to delineate between the responsibilities of the company and the actuary, we suggest that it would be useful for the ASB to include within the ASOP an overview of all the roles and responsibilities of the various parties involved:

- The company
- Appointed Actuary
- Other actuaries working on PBR valuation

2. Does the language of the standard quote or summarize VM-20 text appropriately and usefully?

While much of the text is appropriate and useful, there are many instances where we believe that the language should be modified or removed.

There are instances where the proposed ASOP appears to be inconsistent with VM-20:

a.) The proposed ASOP states that VM-20 suggests sensitivity-testing whereas VM-20 indicates that sensitivity testing is mandatory.

ASOP(3.4.2): “Section 9 of VM-20 suggests sensitivity-testing the assumptions to determine those that have the most significant impact on reserves. The actuary should consider performing more analysis for assumptions that have a significant impact on valuation results than for assumptions that have a less significant impact.”

ASOP(3.4.2.c.1.vii): “However, the actuary should consider testing the sensitivity of results to understand the materiality of using alternate assumptions.”

VM-20(9.A.7): “The company shall examine the results of sensitivity testing to understand the materiality of prudent estimate assumptions on the minimum reserve.”

VM-20(9.D.4): “The company shall examine the sensitivity of assumptions on the minimum reserve as required under Subsection A.3 of this section and shall at a minimum sensitivity test…”

b.) The proposed ASOP states that the mortality assumption will be based on company experience to the extent appropriate in the actuary’s judgment whereas VM-20 requires the use of credibility theory.

ASOP(3.4.2.a): “Mortality—To the extent appropriate in the actuary’s judgment, the actuary should base anticipated experience assumptions for mortality on the insurer’s underwriting standards and mortality experience.”

VM-20(9.C.1.b.iii): “For each mortality segment, the company shall establish prudent estimate mortality assumptions using the following procedure: determine the level of credibility of the underlying company experience as provided in subsection 9.C.4.”
c.) VM-20 states that the company must assume that policyholders’ efficiency will increase, whereas the proposed ASOP indicates that policyholder behavior assumptions should be based merely on relevant experience and reasonable future expectations.

**ASOP(3.4.2.c.1.v):** “Unless there is clear evidence to the contrary, the actuary should use anticipated policyholder behavior assumptions that are consistent with **relevant experience** and reasonable future expectations.”

**VM-20(9.D.3.b):** “The company must assume that policyholders’ efficiency will increase over time unless the company has relevant and credible experience or clear evidence to the contrary.”

d.) VM-20 indicates that dynamic policyholder behavior modeling is required unless anticipated policyholder behavior can be captured by static assumptions, while the proposed ASOP implies that such dynamic modeling may be discretionary.

**ASOP(3.4.2.c.1.vii):** “The actuary should consider using a scenario-dependent formulation for anticipated policyholder behavior. If the actuary chooses to use a model for anticipated policyholder behavior that is not scenario-dependent, the actuary should demonstrate that the use of scenario-dependent assumptions is unlikely to result in a materially higher minimum reserve.”

**VM-20(9.D.2.a):** “The company shall use a dynamic model or other scenario-dependent formulation to determine anticipated policyholder behavior unless the behavior can be appropriately represented by static assumptions.”

e.) VM-20 allows for an exception to the use of historical information for purposes of determining anticipated experience assumptions only for new types of policies, while the proposed ASOP appears to allow this concept to be applied more broadly.

**ASOP(3.4.2.d.2):** “If the recent experience on the block is not, in the actuary’s professional judgment, a suitable basis for projection, the actuary may consider the use of experience on a closely similar type of policy within the company or intercompany studies.”

**VM-20(9.E.1.n):** “For policies sold under a new policy form or due to entry into a new product line the company shall use expense factors that are consistent with the expense factors used to determine anticipated experience assumptions for policies from an existing block of mature policies taking into account…”
There are also instances where the proposed ASOP goes beyond VM-20, is unclear, or is confusing:

a.) **ASOP(3.3.2.a):** “…changes in the economic environment or competitive landscape that could cause a material interest rate or asset return volatility risk to arise in the future…”

In the context of the stochastic exclusion test certification, this statement makes little sense, as it would appear to require stochastic testing if, under *any imagined future economic environment* (e.g., a 1000 basis point change in interest rates), such testing would be required. We have not located such a concept in VM-20.

b.) **ASOP(3.4.2.a):** “In determining anticipated mortality, the actuary should consider mortality trends that have been observed in company, industry, or population experience and determine the extent to which such trends are expected to continue. If the actuary determines that recognizing the continuation of mortality trends beyond the valuation date will increase reserves, the actuary should incorporate such trends into the assumptions for the cash flow projections. Otherwise, the actuary should not project mortality trends beyond the valuation date unless permitted by applicable law.”

We have not located a provision regarding mortality trends within VM-20 with the exception that future mortality improvement should not be assumed (Section 9.C.2.g).

c.) **ASOP(3.4.1.b):** “If this is not the case, the actuary should take into account the effects of variations in the proportions of the policies subject to each such investment policy due to plausible changes in future conditions and demonstrate that the minimum reserve appropriately recognizes such variations.”

We found this sentence confusing and suggest that an example might provide clarity. In addition, in order to avoid creating a new VM-20 requirement, we suggest replacing “demonstrate that” with “should consider whether.”

d.) **ASOP(3.4.2.d.2):** “In projections of direct sales expenses, the actuary should consider recent changes in company practice, such as changes in commission rates that may not have been fully reflected in the experience.”

It is not clear why direct sales expenses are singled out, as such considerations would seem to apply to all expenses. Moreover, commission rates would normally be projected based on distribution arrangements, not past experience.

e.) **ASOP(3.4.2.f.2):** “If determining the directional impact is not practical, the actuary need not establish a margin for that assumption.”

VM-20 appears to be silent on this circumstance, hence the ASOP represents an interpretation or extension of VM-20 that may not be appropriate.

f.) **ASOP(3.4.2.f.2):** “According to section 9 of VM-20, the actuary does not need to consider the margin at every duration but should consider the impact of the resulting margins on the reserve in the aggregate.”

We have not located a provision within VM-20 that supports this statement.

g.) **ASOP(3.4.2.f.4):** “The actuary should set overall margins such that the minimum reserves with margins are greater than the minimum reserves without margins by an amount that is
consistent with the risk on the group of policies and the regulatory requirements for reserves. In evaluating consistency, the actuary may, for example, relate overall margins to a percentage of the present value of risk capital requirements on the group of policies, consider the conditional tail expectation level implied by the minimum reserves based on prudent estimate assumptions, or consider historical variations in experience.”

We have not located a provision within VM-20 that requires the consideration of overall margins, although a related disclosure is included in the current draft of VM-31.

3. **A lot of duplicative material has been removed, although some language has been retained for clarification. Is the amount of material remaining in the standard appropriate?**

There is still some duplicative material. While we accept the fact that certain definitions and contextual material probably should be included, we also noted the following areas of duplication that could be considered for removal:

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4. **Is it sufficiently clear how the standard applies to actuaries who do not sign the PBR actuarial report but are involved in the preparation of principle-based reserves?**

See answer to question 1.
Appendix 2
Markup Showing Sections Meriting Further Review

PROPOSED ACTUARIAL STANDARD OF PRACTICE

PRINCIPLE-BASED RESERVES FOR LIFE PRODUCTS

STANDARD OF PRACTICE

Section 1. Purpose, Scope, Cross References, and Effective Date

1.1 Purpose—This actuarial standard of practice (ASOP) provides guidance to actuaries when performing actuarial services in connection with developing or opining on principle-based reserves for life insurance that are reported by companies in compliance with the National Association of Insurance Commissioners (NAIC) Standard Valuation Law (referred to herein as the Standard Valuation Law) and the NAIC Valuation Manual as adopted in December 2012.

1.2 Scope—This standard applies to actuaries when performing actuarial services on behalf of life insurance companies, including fraternal benefit societies, in connection with the calculation or review of reserves for individual life insurance policies subject to Chapter VM-20: Requirements for Principle-Based Reserves for Life Products of the Valuation Manual (VM-20), where such reserves are represented by the actuary as being in compliance with the provisions of the Standard Valuation Law and the Valuation Manual governing principle-based reserves.

The Standard Valuation Law and the Valuation Manual state that compliance is the responsibility of the company. Actuaries frequently participate in the application of principle-based methods in the preparation of insurance company reserves. To the extent an actuary is involved in these activities, that actuary should follow the applicable guidance in this standard.

If the actuary departs from the guidance set forth in this standard in order to comply with applicable law (statutes, regulations, and other legally binding authority), or for any other reason the actuary deems appropriate, the actuary should refer to section 4.

1.3 Cross References—When this standard refers to the provisions of other documents, the reference includes the referenced documents as they may be amended or restated in the future, and any successor to them, by whatever name called. If any amended or restated document differs materially from the original referenced document, the actuary should consider the guidance in this standard to the extent it is applicable and appropriate.

1.4 Effective Date—This standard will be effective for work performed starting four months after adoption by the Actuarial Standards Board.
Section 2. Definitions

The terms below are defined for use in this ASOP:

2.1 **Anticipated Experience Assumption**—An expectation of future experience for a **risk factor**, given available, relevant information pertaining to the assumption being estimated.

2.2 **Asset Segmentation Plan**—The plan by which an insurer allocates assets among lines of business for establishing investment strategies, for allocating investment income, for performing risk management analyses, or for supporting the reporting of investment income for statutory purposes.

2.3 **Cash Flow Model**—A model designed to simulate asset and liability cash flows.

2.4 **Credibility**—A measure of the predictive value in a given application that the actuary attaches to a particular body of data. (*Predictive* is used here in the statistical sense and not in the sense of predicting the future.)

2.5 **Deterministic Reserve**—A reserve calculated under a defined **scenario** and a single set of assumptions in accordance with VM-20.

2.6 **Granularity**—The extent to which a model contains separate components such as cells or assumptions that vary by cell or time intervals.

2.7 **Margin**—An amount included in a **prudent estimate assumption** that incorporates conservatism in the calculated value and is intended to provide for estimation error and adverse deviation related to a corresponding **anticipated experience assumption**.

2.8 **Minimum Reserve**—The **minimum reserve** standard for all life policies subject to the requirements of the *Valuation Manual*.

2.9 **Model Segment**—A group of policies and associated assets that are modeled together to determine the path of net asset earned rates.

2.10 **Modeling Cell**—Policies that are treated in a **cash flow model** as being completely alike with regard to demographic characteristics, policyholder behavior assumptions, and policy provisions.

2.11 **Net Premium Reserve**—The formula reserve calculated in accordance with the procedures set forth in the *Valuation Manual*. 
2.12 **Principle-Based Reserve (PBR) Actuarial Report**—The document or set of documents containing supporting information prepared by the company under the direction of a **qualified actuary** as required by Chapter VM-31: PBR Report Requirements for Business Subject to a Principle-Based Reserve Valuation of the *Valuation Manual* (VM-31).

2.13 **Principle-Based Valuation**—A reserve valuation that uses one or more methods or one or more assumptions determined by the insurer and is required to comply with section 12 of the Standard Valuation Law as specified in the *Valuation Manual*.

2.14 **Prudent Estimate Assumption**—A risk factor assumption developed by applying margins to the anticipated experience assumption for that risk factor.

2.15 **Qualified Actuary**—An individual who is qualified to sign statements of actuarial opinion required by VM-20 and VM-31 in accordance with the *Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States* and who meets the requirements specified in the *Valuation Manual*.

2.16 **Relevant Experience**—Experience in situations that are sufficiently similar to the liabilities, assets, and environments being projected to make the experience appropriate, in the actuary’s professional judgment, as a basis for determining the assumptions for anticipated experience.

2.17 **Risk Factor**—An aspect of future experience that is uncertain as of the valuation date and that can affect the future financial results arising from the provisions of a policy. Examples include mortality, expense, policyholder behavior, and asset return.

2.18 **Scenario**—A projected sequence of events used in the cash flow model, such as future interest rates, equity performance, or mortality.

2.19 **Sensitivity Test**—A calculation of the effect of varying an assumption.

2.20 **Starting Assets**—A portfolio of assets that will be used to fund projected policy cash flows arising from the policies funded by those assets.

2.21 **Stochastic Reserve**—A reserve amount calculated with stochastically generated scenarios in accordance with VM-20.

2.22 **Valuation Date**—The date as of which the reserve is to be determined.

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**Section 3. Analysis of Issues and Recommended Practices**

3.1 **Regulatory Requirements**—An actuary performing actuarial services within the scope of
this standard should be familiar with applicable law and regulation including the
*Standard Valuation Law* and the *Valuation Manual*.

VM-20 describes the calculation of stochastic reserves, deterministic reserves, and net
premium reserves. The required minimum reserve is based on one or more of these
reserves as described in section 2 of VM-20.

3.2 Net Premium Reserve—The actuary should calculate net premium reserves using
assumptions and methods prescribed by section 3 of VM-20.

3.3 Exclusion Tests—Section 6 of VM-20 provides for certain exclusion tests that, if
satisfied, allow the insurer to dispense with the calculation of the stochastic reserves or
deterministic reserves for a group of policies.

3.3.1 Grouping—In constructing groups of contracts for the purposes of applying the
stochastic exclusion ratio test and the deterministic exclusion test, the insurer may
not group together contract types with significantly different risk profiles.

In evaluating a group of contracts against this criterion, the actuary should
consider the following:

a. the risk profile indicated by the contractual provisions of the policies and
the impact of varying economic or other conditions on that risk profile;
b. results of other analyses performed that may provide an indication of the
risk profile of a proposed group of policies (for example, economic capital
analysis or cash flow testing analysis);
c. the risk profile indicated by the demographics of the policyholders and
insureds; and
d. any other information available to the actuary that indicates that the
policies have similar or significantly different risk profiles.

3.3.2 Certification—In some cases, satisfying an exclusion test requires a certification
by a qualified actuary that a group of policies is not subject to material interest
rate risk or asset return volatility risk. In providing such a certification, the
actuary should evaluate the group as a whole and consider, in addition to
examples provided in section 6 of VM-20, such as the following:

a. changes in the economic environment or competitive landscape that could
cause a material interest rate or asset return volatility risk to arise in the
future, and
b. the results of other analyses that may have been completed as part of an economic capital measurement process or cash flow testing.

3.4 Stochastic and Deterministic Reserves—The actuary should calculate stochastic reserves and deterministic reserves using models and assumptions as described in sections 7, 8, and 9 of VM-20.

3.4.1 Modeling—The actuary should use modeling methods that are appropriate for the business being valued.

a. Cash Flow Model—Section 7 of VM-20 requires companies to design and use a cash flow model that does the following:

1) complies with applicable ASOPs in developing cash flow models and projecting cash flows;

2) uses model segments consistent with the insurer’s asset segmentation plan, investment strategies, or approach used to allocate investment income for statutory purposes;

3) assigns each policy in the cash flow model to only one model segment and uses a separate cash flow model for each model segment; and

4) projects cash flows for a period that extends far enough into the future so that no obligations remain.

b. Model Segments—The construction of model segments facilitates the calculation of asset earned rates and discount rates. To do this, the actuary should model the reinvestment and disinvestment of cash flows in accordance with an investment strategy. Usually, this means that the segment should contain only policies that will be managed under a common investment policy, particularly with regard to reinvestment and borrowing practices. If this is not the case, the actuary should take into account the effects of variations in the proportions of the policies subject to each such investment policy due to plausible changes in future conditions and demonstrate that the minimum reserve appropriately recognizes such variations.

The actuary may assign policies with offsetting risks to the same model segment if the assignment is otherwise appropriate (for example, when there is a common investment strategy) and the risks may reasonably be assumed to remain offsetting under plausible changes in future conditions.
c. **Model Validation**—The actuary should consider a static validation that confirms that the initial values for reserves, face amount, policy count, and other basic statistics materially balance to the insurer’s records as of the model date. The actuary should consider the extent to which a model has been previously reviewed as well as controls around model changes in determining the level of model review required for the current valuation. A model that in the actuary’s judgment was previously subject to rigorous review and testing and updated in a controlled manner may require less rigorous current review.

The actuary should consider conducting additional validation procedures such as the following:

1) performing a dynamic validation of the model that involves comparing the cash flows produced by the model to the actual historical data to verify, where appropriate, that the model produces results reasonably similar to those actually experienced;

2) evaluating the consistency of the model’s results to the results of any other existing internal systems that have similar calculations; and

3) performing an analysis that critically reviews each of the changes made to the model since it was last validated.

d. **Liability Modeling Considerations**—In determining the minimum reserve, the actuary should reflect all relevant policy provisions and risks specific to the insurance contracts, including those arising from guarantees that have a reasonable probability of materially affecting future policy cash flows or other contract-related cash flows. According to section 9 of VM-20, costs that are not specific to the insurance contract (for example, federal income taxes, shareholder dividends, and costs related to operational failures, mismanagement, fraud, and regulatory risks) are not recognized in the reserve calculation.

1) The actuary may group policies with similar risk characteristics in representative modeling cells. When grouping is used, the actuary should demonstrate that the use of a model with a higher degree of granularity is unlikely to result in a materially higher minimum reserve. Acceptable demonstrations for this purpose include, but are not limited to, the following:

i. comparison of the results of the grouping based on a representative sample of modeling cells to the results of a
seriatim calculation on the same representative sample; and

ii. a demonstration that extremes of adverse experience for a sample set of scenarios have closely similar effects on the minimum reserve for all policies assigned to the same sample cells. Such demonstrations may be done as of a date other than the valuation date and need not be updated every year, unless the actuary determines that conditions likely to affect the result have changed.

2) In projecting policy or other liability cash flows, the actuary should consider the impact of projected changes in experience on cash flows arising from nonguaranteed elements (including policyholder dividends). For example, if the insurer bases credited rates on current asset yields, the actuary should model projected credited rates that are consistent with projected asset yield rates. The actuary should consider contractual provisions, regulatory constraints, current management policy, and past company actions, such as any lag between a change in experience and a change in nonguaranteed elements, when projecting future nonguaranteed element changes. The actuary should determine policyholder behavior assumptions that are consistent with the nonguaranteed element projections. For example, consistency may require increased lapse rates if credited interest rates tend to lag projected new money rates in a rising interest rate scenario.

e. Use of Prior Period Data—Section 1 of VM-20 provides that the company may calculate the deterministic reserve and the stochastic reserve as of a date no earlier than three months before the valuation date, using relevant company data, provided an appropriate method is used to adjust those reserves to the valuation date.

When using such a prior “as of” date the actuary should document the nature of any updating adjustments made to the reserves, and why the use of prior period data plus such adjustments would not produce a material difference from calculating reserves as of the valuation date. The actuary should also demonstrate that any material events known to the actuary that occurred between the two dates do not diminish the appropriateness of the results.

When evaluating the appropriateness of using prior period data, the actuary should consider the following:
1) a comparison of the asset portfolio between the two dates by type of asset, mix of assets by quality, and the nature of assets (for example, duration, yield, and type) and a comparison of the size and nature of the in force policies between the two dates (for example, average size, policy counts, and mix);

2) changes in the interest rate curve, interest spreads, and equity values between the two dates, including, as an example, changes causing guarantees to be “in the money” that were not as of the prior date, and vice-versa;

3) changes in policyholder behavior (surrenders, lapses, premium patterns, etc.); and

4) validation procedures such as comparing a subset of policies by calculating reserves as of both dates.

3.4.2 Assumptions—In setting assumptions, the actuary should consider ASOP No. 23, Data Quality, and ASOP No. 25, Credibility Procedures, as applicable. Within the range of acceptable practices described in VM-20, the actuary should use professional judgment in setting reasonable assumptions.

Section 9 of VM-20 states that “The company shall use its own experience, if relevant and credible, to establish an anticipated experience assumption for any risk factor. To the extent that company experience is not available or credible, the company may use industry experience or other data to establish the anticipated experience assumption, making modifications as needed to reflect the circumstances of the company.”

Where no relevant and credible company information is available, the actuary should use professional judgment in advising on the adoption and modification of other sources of experience data. Examples of items that may result in modifications to the experience data include the company’s underwriting practices, market demographics, product design, and economic and regulatory environments.

Section 9 of VM-20 suggests sensitivity-testing the assumptions to determine those that have the most significant impact on reserves. The actuary should consider performing more analysis for assumptions that have a significant impact on valuation results than for assumptions that have a less significant impact.

a. Mortality—To the extent appropriate in the actuary’s judgment, the actuary should base anticipated experience assumptions for mortality on the insurer’s underwriting standards and mortality experience.
Section 9 of VM-20 limits the exposure period for a company’s own experience to between three and ten years and defines mortality segments within which separate mortality assumptions must be made. The methods for determining credibility of the experience and the methods for grading into industry standard tables are set forth in section 9 of VM-20.

In choosing an exposure period, consideration should be given to the possibility that data may be obsolete if the period is too long, but that a shorter period may reduce the credibility to be assigned to the data. The actuary should refer to ASOP No. 25 for guidance on credibility. The actuary should consider the possibility of combining several mortality segments for the purpose of achieving a higher level of credibility, but in doing so the actuary should be aware that section 9 of VM-20 allows such combining only if the mortality experience was determined for the combined segments and then appropriately subdivided.

The actuary should consider reflecting the effect that lapsation or nonrenewal activity or other anticipated policyholder behaviors has had or would be expected to have on mortality. The actuary should consider the effect of any anticipated or actual increase in gross premiums or cost of insurance charges on lapsation, and the resultant effect on mortality due to antiselection.

In determining anticipated mortality, the actuary should consider mortality trends that have been observed in company, industry, or population experience and determine the extent to which such trends are expected to continue.

If the actuary determines that recognizing the continuation of mortality trends beyond the valuation date will increase reserves, the actuary should incorporate such trends into the assumptions for the cash flow projections. Otherwise, the actuary should not project mortality trends beyond the valuation date unless permitted by applicable law. However, the actuary may include mortality improvement beyond the valuation date in the aggregate margin amount that the actuary is required to report under VM-31 section 3.E.12.

b. **Investment Experience**—The actuary should make reasonable assumptions about future investment experience that take into consideration the insurer’s asset/liability management strategy for the product portfolio.

1) Sets of scenarios of future U.S. Treasury rates and future equity values are specified in appendix 1 of VM-20. In applying these sets
of scenarios, the actuary may use scenario reduction techniques. When using these techniques, the actuary should be satisfied that the techniques used are appropriate to the situation and can reasonably be expected not to result in a material reduction in minimum reserves.

2) Factors and methods for determining prescribed default assumptions and spread assumptions are set forth in section 9 and appendix 2 of VM-20. The prescribed default assumptions apply to reinvested assets as well as starting assets. The actuary should model the reinvestment of cash flows in accordance with the insurer’s investment strategy for the model segment or in accordance with a strategy that is closely similar to the actual strategy currently being used for the model segment. If the insurer’s investment strategy is to duration-match assets and liabilities, the actuary should reflect the rebalancing needed specific to each scenario to the extent practicable.

3) Section 7 of VM-20 requires that variability in the timing of the asset cash flows related to movements in interest rates, such as prepayment risk, be incorporated into the model. For example, prepayment, extension, call, and put features should be specifically modeled in a manner consistent with current asset adequacy analysis practice. (For related guidance, see ASOP No. 7, Analysis of Life, Health, or Property/Casualty Insurer Cash Flows, and ASOP No. 22, Statement of Opinion Based on Asset Adequacy Analysis by Actuaries for Life or Health Insurers.)

c. Policyholder Behavior—Anticipated policyholder behavior assumptions for the cash flow models usually include premium payment patterns, premium persistency, surrenders, withdrawals, transfers between fixed and separate accounts on variable products, benefit utilization, and other option elections.

1) General Considerations—General considerations include the following:

i. According to section 9 of VM-20, the actuary should consider that anticipated policyholder behavior may be expected to vary according to such characteristics as gender, attained age, issue age, policy duration, time to maturity, tax status, account and cash values, surrender charges, transaction fees, or other policy charges; distribution channel; product features; and whether the
policyholder and insured are the same person.

ii. Section 9 of VM-20 requires anticipated policyholder behavior assumptions that are appropriate for the block of business being valued. The actuary should consider other assumptions of the valuation model when developing policyholder behavior assumptions.

iii. The actuary should consider whether it is reasonable to constrain assumed policyholder behavior to the outcomes and events exhibited by historical experience, especially when modeling policyholder behavior of a new product benefit or feature.

iv. Options embedded in the product, such as term conversion privileges or policy loans, may affect policyholder behavior. The actuary should consider that, as the value of a product option increases, the likelihood that policyholders will behave in a manner that maximizes their financial interest in the contract will increase (for example, lower lapses, higher benefit utilization, etc.).

v. Unless there is clear evidence to the contrary, the actuary should use anticipated policyholder behavior assumptions that are consistent with relevant experience and reasonable future expectations. At any duration for which relevant data do not exist, the actuary should consider using an action that will maximize the value of the policy from the point of view of a rational investor who owns the policy (i.e., lapse the policy, persist, take out a loan, etc.).

vi. The actuary should also recognize that policyholders may place value on factors other than maximizing the policy’s financial value (for example, convenience of level premiums, personal budget choices, etc.) and that the policy’s full economic value to the policyholder depends not only on its currently realizable value but also on factors not available for analysis, such as the health of the insured and the financial circumstances of the beneficiaries and policyholder.

vii. The actuary should consider using a scenario-dependent formulation for anticipated policyholder behavior. If the actuary chooses to use a model for anticipated policyholder
behavior that is not scenario-dependent, the actuary should demonstrate that the use of scenario-dependent assumptions is unlikely to result in a materially higher minimum reserve. For risk factors that are scenario-dependent, the actuary should incorporate a reasonable range of future expected behavior consistent with the economic scenarios and other variables in the model. In the absence of evidence to the contrary, modeling extreme behavior may not be necessary. However, the actuary should consider testing the sensitivity of results to understand the materiality of using alternate assumptions.

2) Premium Assumptions—For policies with fixed future premiums, the actuary should use an assumption that future premium payments on inforce policies will be paid in accordance with the policy provisions.

For policies with flexible premiums, the actuary, in designing assumptions about future premium payments, should consider such factors as the limitations inherent in the policy design, the amount of past funding of the policy, and the marketing of the policy. The actuary should consider using multiple premium payment pattern assumptions, for example, by subdividing the cell of business into several projection cells, each with a separate payment pattern assumption. If this is not done and consequently the cell has one average pattern, the actuary should consider using sensitivity testing to determine whether the estimates of reserves or risks are materially impacted by the use of such an approach.

While historical experience, when available, is often a good basis for such assumptions, the actuary should exercise care when assuming that past behavior will be indefinitely maintained. For example, market or environmental changes can make historical experience less relevant. Premium payment assumptions may also vary by interest rate scenario.

In setting premium assumptions, the actuary should consider the following marketing factors that may affect the level and continuation of premium payments:

i. emphasis on death benefits;

ii. emphasis on savings accumulation or tax advantages;
iii. emphasis on premium flexibility;
iv. policy illustrations showing premiums for a limited period;
v. automatic electronic payment of premiums;
vi. bonuses for higher premiums or assets; and
vii. other factors the actuary deems appropriate.

In selecting multiple premium patterns for modeling purposes, the actuary may consider patterns based on one or more of the following: target premium, illustrated premium, billed premium, minimum premium, or continuation of past premium levels.

The actuary should consider the level of granularity in setting the premium assumption. It should be granular enough, in the actuary’s judgment, to adequately reflect expected experience.

3) Partial Withdrawal and Surrender Assumptions—The actuary should consider using a scenario-dependent formulation for modeling partial withdrawals and surrenders that is responsive to factors such as the projected interest rate environment, the funding level, premium increases, and benefit triggers. In setting partial withdrawal and surrender assumptions, the actuary should consider the insured’s age and gender, the policy duration, and the existence of policy loans. In addition, the actuary should consider taking into account such factors as the policy’s competitiveness, surrender charges, interest or persistency bonuses, taxation status, premium frequency and method of payment, and any guaranteed benefit amounts. The actuary should consider the fact that rates of surrender can decline dramatically prior to a scheduled sharp increase in surrender benefit (sometimes known as a “cliff”) caused by a decrease in surrender charge, a bonus, or a maturity benefit and that rates of surrender can rise materially after such an event.

d. Expenses—The actuary should review the expenses that have been allocated, for financial reporting purposes, in recent years to the block of policies being evaluated. The actuary should allocate expenses that are classified as “direct sales expenses” or as “taxes, licenses, and fees” to the activity creating the expense. All non-direct expenses should be allocated to the appropriate activity count (per policy, per claim, etc.) and by
duration where appropriate, using reasonable principles of expense allocation and unit costs. The actuary should use this analysis as the basis for projecting expenses in doing the reserve valuation, unless, in the actuary’s professional judgment, the expense experience is not a suitable basis for projection, in which case other sources of data may be used (as set forth in section (2) below).

1) **Expense Inflation**—Section 9 of VM-20 requires expenses to reflect the impact of inflation. The actuary should appropriately adjust unit costs in the projection for the effect of inflation. Possible sources of information about inflation assumptions are published projections of the CPI or the price deflator, such as the rate selected by the Social Security Administration for its long-term intermediate projection. The actuary may also consider the assumption that future inflation rates will vary if prevailing new-money rates change. The actuary should review the resulting projection of implied “real return” to ensure that the inflation and investment return assumptions are consistent.

2) **Applying Recent Expense Experience**—In reviewing recent experience, the actuary should assure that the expenses being allocated to the block of policies being evaluated represent all expenses associated with the block, including overhead, according to statutory accounting principles. If the recent experience on the block is not, in the actuary’s professional judgment, a suitable basis for projection, the actuary may consider the use of experience on a closely similar type of policy within the company or intercompany studies.

The actuary should consider including a provision for overhead that considers holding company expenses associated with running the life insurance business (for example, rent and executive compensation) that have not been recognized in other charges to or reimbursements from the life company.

In developing expense assumptions, the actuary should include acquisition expenses and significant non-recurring expenses expected to be incurred after the **valuation date**, to the extent allocable to the business in force at the **valuation date**. The actuary should include provision for unusual future expenses that may be anticipated, such as severance costs or litigation costs.

If system development costs or other capital expenditures are amortized in the annual statement, the actuary should reflect such
duration where appropriate, using reasonable principles of expense
the exposure period and were not amortized, the actuary may
exclude them from the experience but should consider the
possibility that similar expenditures will occur in the future.

In projections of direct sales expenses, the actuary should consider
recent changes in company practice, such as changes in
commission rates that may not have been fully reflected in the
experience. The actuary’s projection of taxes, licenses, and fees
should be based on a reasonable activity base (such as premium).

The actuary should reflect recent changes in company practice,
such as changes in staffing levels that could increase non-direct
expenses in the projection. In the case of changes that are planned
but not fully implemented, the actuary may consider reflecting in
the projection the probability that the changes will increase future
expenses.

e. Taxes—Section 9 of VM-20 requires the company to determine reserves
using models in which federal income taxes are excluded from
consideration. The actuary should separately recognize any taxes that are
not included in the “taxes, licenses, and fees” item, other than federal
income taxes, in the projection models.

f. Determining Assumption Margins—After the anticipated experience
assumptions are established, the actuary should modify each assumption
to include a margin for estimation error and moderately adverse
deviation, except as indicated below. The actuary should incorporate an
adequate margin in assumptions that are modeled dynamically (i.e.,
assumed to vary as a function of a stochastic assumption, such as lapse
rates or nonguaranteed elements rates that vary in response to interest
rates) throughout all variations.

1) Mortality Margins—Section 9 of VM-20 prescribes the margins
that are to be added to the anticipated experience mortality
assumptions but also requires the establishment of an additional
margin if, in the actuary’s professional judgment, the prescribed
margin is inadequate. The guidance in the remainder of this
section on determining assumption margins does not apply to the
mortality assumptions.

2) Establishing Margins—The actuary should establish margins for a
particular assumption if doing so increases the minimum reserve.
If determining the directional impact is not practical, the actuary
need not establish a margin for that assumption.

The actuary need not include margins in assumptions for risks that are to be modeled stochastically as long as a moderately adverse proportion of the stochastically generated results is used for establishing the stochastic reserve.

For each assumption that includes a margin, the actuary should reflect the degree of risk and uncertainty in that assumption in determining the magnitude of such margin. When determining the degree of risk and uncertainty, the actuary should take into account the magnitude and frequency of fluctuations in relevant experience, if available. In doing so, the actuary should consider using statistical methods to assess the potential volatility of the assumption in setting an appropriate margin.

In determining the margins for policyholder behavior assumptions for which there is an absence of relevant and credible experience, the actuary should follow the guidance in section 9 of VM-20 of the Valuation Manual and consider the following:

i. experience trends by duration where there is relevant data; and

ii. the expectation that experience will change in the future due to policy features, economic conditions, or other factors.

According to section 9 of VM-20, the actuary does not need to consider the margin at every duration but should consider the impact of the resulting margins on the reserve in the aggregate.

The actuary should establish margins such that the additive impact for all assumptions is at a level that, in the actuary’s professional judgment, provides for an appropriate amount of adverse deviation in the aggregate, even if the margin for an individual assumption does not appear adequate on a stand-alone basis (see also section below on “Overall Margins”).

3) Sensitivity Testing—The actuary should consider using sensitivity testing to evaluate the significance of an assumption in determining the valuation results. For assumptions that are relatively insignificant, the actuary may decide to add little or no margin to the anticipated experience assumption.
duration where appropriate, using reasonable principles of expense

4) **Overall Margins**—The actuary should compare the minimum reserves based on prudent estimate assumptions with the minimum reserves based on anticipated experience (minimum reserves without margins) for a group of policies. For this purpose, “group of policies” may mean a line of business, or the actuary may make the comparison on several groups of policies within a line of business. The actuary should set overall margins such that the minimum reserves with margins are greater than the minimum reserves without margins by an amount that is consistent with the risk on the group of policies and the regulatory requirements for reserves. In evaluating consistency, the actuary may, for example, relate overall margins to a percentage of the present value of risk capital requirements on the group of policies, consider the conditional tail expectation level implied by the minimum reserves based on prudent estimate assumptions, or consider historical variations in experience.

5) **Adjusting Reserves**—The actuary should increase the minimum reserve if, in the actuary’s professional judgment, the difference between minimum reserves with and without margins is inadequate. This may be accomplished by changing the assumption margins or by adjusting the total minimum reserves for the group of policies and using a reasonable method to allocate the difference to individual policies.

3.5 **Reinsurance**—This section applies to reserves for policies ceded or assumed under the terms of a reinsurance agreement. The terms “reinsurance” and “reinsurer” include retrocession and retrocessionaire, respectively.

3.5.1 **Stochastic and Deterministic Reserves Under Reinsurance**—According to section 8 of VM-20, the deterministic reserves and stochastic reserves shall be based on assumptions and models that project cash flows that are net of reinsurance ceded. Thus, the actuary should use cash flows that reflect the effects of reinsurance assumed and ceded when calculating stochastic reserves and deterministic reserves.

The actuary should not calculate the stochastic reserve or deterministic reserve by deducting a formulaic reinsurance credit (such as the Statement of Statutory Accounting Principles No. 61 reserve credit) from a stochastic
reserve or deterministic reserve that is based on hypothetical pre-reinsurance cash flows where appropriate using reasonable principles the actuary can reasonably assume that such a procedure would produce a reserve that does not materially differ from a directly calculated stochastic reserve or deterministic reserve.

3.5.2 Pre-Reinsurance-Ceded Minimum Reserve—Section 8 of VM-20 requires a pre-reinsurance-ceded minimum reserve, if needed, to “…be calculated pursuant to the requirements of this Valuation Manual VM-20, using methods and assumptions consistent with those used in calculating the minimum reserve, but excluding the effect of ceded reinsurance,” using assumptions that “…represent company experience in the absence of reinsurance, for example assuming that the business was managed in a manner consistent with the manner that retained business is managed.” Determining the minimum reserve requires the calculation on a pre-reinsurance-ceded basis of all necessary reserve components, which may include a net premium reserve, a deterministic reserve, a stochastic reserve, and the application of any exclusion tests. In arriving at the assumptions for use in the cash flow model required for deterministic reserve and stochastic reserve calculations, the actuary should consider using assumptions for the ceded business that are consistent with those used for retained business of the same kind (reflecting any known differences, such as differences in average policy size).

The calculation of pre-reinsurance-ceded minimum reserves requires an estimate of the investment return earned on ceded assets. Possible methods for estimating this hypothetical investment return include the following:

a. basing the estimate on the investment return on assets available at the time the cash flows were ceded;

b. assuming the estimate is equal to the investment return used for retained policies of the same kind; and

c. assuming the estimate is equal to the investment return on a pro rata slice of the assets of the reinsurer that back the ceded reserve.

3.5.3 Reserve Credit—According to section 8 of VM-20, the reserve credit is the difference between the pre-reinsurance-ceded minimum reserve and the post-reinsurance-ceded minimum reserve. The actuary should apply the exclusion criteria and formulas of section 2 of VM-20 separately for each of these minimum reserves and should apply the guidance of this standard to calculate any needed stochastic reserve or deterministic reserve component. The actuary should be aware that the reserve credit might not be the difference between the pre- and post-reinsurance-ceded versions of the same reserve component; for example, the reserve credit could be the pre-reinsurance-ceded stochastic reserve less the post-reinsurance-ceded deterministic reserve.
3.5.4 Recognition of Reinsurance Cash Flows in the Deterministic Reserve or Stochastic Reserve—VM-20 requires the calculation of the deterministic reserve or stochastic reserve to use assumptions and margins that are appropriate for each company involved in a reinsurance agreement. The two parties to the agreement are not required to use the same assumptions and margins for the reinsured policies.

The actuary should choose assumptions for projecting cash flows for assumed reinsurance and for ceded reinsurance that consider all aspects of applicable reinsurance agreements, including all elements of the agreements that the assuming company can change (such as changes to the current scale of reinsurance premiums and changes to expense allowances) and all actions either party may take that could affect the reinsurance cash flows (such as changes by the ceding company in non-guaranteed elements or the recapture of ceded policies). The actuary should consider whether such changes depend on the economic scenario being modeled.

a. In modeling nonguaranteed elements, the actuary may consider any limits placed upon the reinsurer’s ability to change the terms of the treaty, including the presence or absence of guarantees of reinsurance premiums and allowances; known actions of the ceding company, such as changes in dividend scales; known past practices of reinsurers in general and the assuming reinsurer in particular regarding the changing of such terms; and the ability of the ceding company to modify the terms of the reinsured policies in response to changes in the reinsurance agreement.

b. The actuary should consider any actions that have been taken or appear likely to be taken by the ceding company, or direct writer, if different, that could affect the expected mortality or other experience of assumed policies. Examples of such actions include internal replacement programs and table-shave programs.

c. The actuary should choose assumptions and margins assuming that all parties to a reinsurance agreement are knowledgeable of the terms of the reinsurance agreement and will exercise options to their advantage, taking into account the context of the agreement in the entire economic relationship between the parties.

d. In applying the considerations in paragraphs a, b, and c above, the actuary should take into account the impact of the economic conditions inherent in the scenario being modeled.

e. Section 8 of VM-20 requires the use of stochastic modeling or analysis “to the extent that a single deterministic valuation assumption for risk factors associated with certain provisions of reinsurance agreements will not
adequately capture the risk.” A Guidance Note in section 8 of VM-20 identifies stop-loss reinsurance as an example of such a provision. The actuary should consider the distribution of claims for the coverage provided under the provisions of the reinsurance agreement to determine whether and to what extent a single deterministic valuation assumption adequately captures the risk.

Stochastic modeling of risk factors for which a single deterministic valuation assumption is inadequate may be introduced directly in the cash flow model, or a separate stochastic analysis outside the model may be performed. In deciding between these approaches, the actuary should consider the degree to which a separate stochastic analysis of risk factors should interact with the variables in the cash flow model. When there is a high degree of interaction, the actuary should consider incorporating the analysis directly into the cash flow model. In setting margins for such risk factors, the actuary should take into account any margins created by the stochastic modeling method (such as the margin created by a conditional tail expectation method). If the risk factor is subject to significant fluctuation, the actuary should consider using a stochastic modeling method that provides an adequate margin.

### 3.5.5 Margin for Risk of Default by a Counterparty

Section 8 of VM-20 requires the company to establish a margin for the risk of default if the company has knowledge that a counterparty is financially impaired. In the absence of such knowledge (or if the impact on cash flows is insignificant) no such margin is required. In determining whether the company has knowledge of such impairment of a counterparty, and in determining the risk margin for counterparty default if one is needed, the actuary may rely upon information provided by appropriate persons employed or retained by the company.

### 3.5.6 Reinsurance Agreements that Do Not Qualify for Credit for Reinsurance

Section 8 of VM-20 states, “If a reinsurance agreement or amendment does not qualify for credit for reinsurance, but treating the reinsurance agreement or amendment as if it did so qualify would result in a reduction to the company’s surplus, then the company shall increase the minimum reserve by the absolute value of such reductions in surplus.” The impact on surplus may be ascertained by calculating the minimum reserve with and without reflection of the non-qualifying reinsurance agreement or amendment. If the actuary concludes that such calculations are unnecessary, the actuary should document the testing and logic leading to that conclusion.

### 3.5.7 Assets Held by the Counterparty or Another Party

If, under the terms of the reinsurance agreement, some of the assets supporting the reserve are held by the counterparty or another party, the actuary should determine whether such assets should be modeled to properly determine discount rates or projected cash flows. If the actuary concludes that modeling is unnecessary, the actuary should document
3.6 Reliance on Data or Other Information Supplied by Others—When relying on data or other information supplied by others, the actuary should refer to ASOP No. 23 and ASOP No. 41, *Actuarial Communications*, for guidance. In addition, where the actuary relies on others for data, assumptions, projections, or analysis in determining the *principle-based reserves*, the actuary should comply with specific requirements of the *Valuation Manual*.

3.7 Documentation—The actuary should create records and other appropriate documentation supporting the valuation. To the extent practicable, the actuary should take reasonable steps to support the retention of this documentation for a reasonable period of time (and no less than the length of time necessary to comply with any statutory, regulatory, or other requirements). The actuary need not retain the documentation personally; for example, the actuary’s employer may retain it.

Section 2 of VM-31 states, “The PBR actuarial report must include documentation and disclosure sufficient for another actuary qualified in the same practice area to evaluate the work.” The actuary should include the rationale for all significant decisions made and information used by the insurer in complying with the *minimum reserve* requirements and in compliance with the minimum documentation and reporting requirements set forth in the *Valuation Manual* with respect to the PBR actuarial report.

Section 2 of VM-31 further requires the insurer to retain on file for at least seven years from the date of filing sufficient documentation so that it will be possible to determine the procedures followed, the analyses performed, the bases for assumptions, and the results obtained in a *principle-based valuation*. It also requires the insurer to submit a PBR actuarial report to a commissioner upon request.

Section 4. Communications and Disclosures

4.1 Actuarial Communications—When issuing actuarial communications under this standard, the actuary should refer to ASOP Nos. 23 and 41. In addition, the actuary should refer to ASOP No. 21, *Responding to or Assisting Auditors or Examiners in Connection with Financial Statements for All Practice Areas*, where applicable.

The actuary should be aware of the requirements of VM-31.

4.2 Actuarial Report—The actuarial report is prepared under the direction of, and signed by, one or more qualified actuaries, as required by VM-31. Section 3 of VM-31 prescribes the content of this report and other requirements.

Where applicable, the actuary should disclose the following items in the actuarial report as discussed in further detail in section 3:
duration where appropriate, using reasonable principles of expense

a. demonstration supporting the exclusion test (see section 3.3);

b. exclusion test grouping (see section 3.3.1);

c. differences in model results from existing internal system results (see section 3.4.1(c));

d. results of tests of model granularity (see section 3.4.1(d)(1));

e. use of an as-of date for assumptions or data that is prior to the valuation date (see section 3.4.1(e));

f. demonstration supporting the use of non-scenario dependent policyholder behavior assumptions (see section 3.4.2(c)(1)(vii));

g. the rationale for not calculating the impact on surplus of non-qualifying reinsurance agreements (see section 3.5.6);

h. the rationale for not modeling assets held by a counterparty or another party (see section 3.5.7); and

i. details such that another qualified actuary working in the same practice area could evaluate the work (see section 3.7).

4.3 Disclosures—The actuary should include the following, as applicable, in an actuarial communication:

a. the disclosure in ASOP No. 41, section 4.2, if any material assumption or method was prescribed by applicable law (statutes, regulations, and other legally binding authority);

b. the disclosure in ASOP No. 41, section 4.3, if the actuary states reliance on other sources and thereby disclaims responsibility for any material assumption or method selected by a party other than the actuary; and

c. the disclosure in ASOP No. 41, section 4.4, if in the actuary’s professional judgment, the actuary has otherwise deviated materially from the guidance of this ASOP.