## Assessing the impact of the COVID-19 shock on a stochastic multi-population mortality model

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LRisk - KU Leuven and ASE - University of Amsterdam

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#### Our people

The Research Centre for Longevity Risk (RCLR) is part of the University of Amsterdam. Prof. Dr. Torsten Kleinow is the director of RCLR and together with co-director Prof. Dr. Katrien Antonio, they are responsible for all the centre's research programmes. The directors are supported by management team members Prof. Dr. Michel Vellekoop and Frank van Berkum.

The research team consists of PhD students, postdoctoral researchers and other senior researchers of the Amsterdam School of Economics. Additional appointments will continue to be made in 2022



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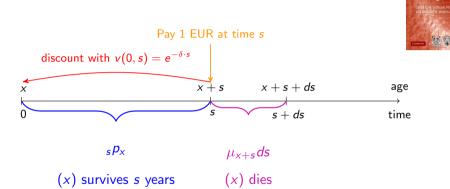
Jens Robben

(\*) This presentation reflects the personal views of the author and not the views of his employer.

Actuarial Mathematics for Life Contingent Risks

### Life insurance mathematics 101

Whole life insurance



If  $T_x$ , the future lifetime of (x), takes value s, then present value of 1 EUR at t=s is  $e^{-\delta \cdot s}$ . Interest goes to (distribution of)  $Z=v^{T_x}=e^{-\delta \cdot T_x}$ .

### Survival probabilities

Period vs cohort

Consider (x), a policyholder aged x in year t, with future lifetime  $T_{x,t}$ .

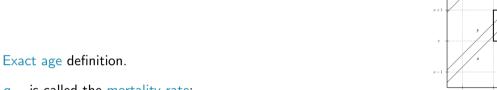
Period approach:

$$_{k}\rho_{x,t} = Pr(T_{x,t} \geq k) = \rho_{x,t} \cdot \rho_{x+1,t} \cdot \ldots \cdot \rho_{x+k-1,t}$$

Cohort approach:

$$_{k}p_{x,t} = Pr(T_{x,t} \ge k) = p_{x,t} \cdot p_{x+1,t+1} \cdot \ldots \cdot p_{x+k-1,t+k-1}$$

Need for mortality projections (beyond most recent t) in the cohort approach!



Exact age definition. 
$$q_{x,t}$$
 is called the mortality rate:

$$q_{x,t} = 1 - p_{x,t} = 1 - \exp(-\mu_{x,t})$$
 (with piecewise constant hazard rate  $\mu_{x,t}$ ),

where  $\mu_{x,t}$  is the force of mortality or hazard rate.

Professional actuarial associations and their mortality projection models

Actuarial associations (like IA|BE in Belgium, KAG in the Netherlands, Institute and Faculty of Actuaries in UK) publish mortality projection models:

- industry standard at national population level ('pop')
- insurance companies or pension funds then estimate portfolio correction factors ('pf'), e.g.

$$\mu_{x,t,g,\ell}^{pf} = \mu_{x,t,g}^{pop} \cdot \exp(f(\mathbf{x}_{\ell})),$$

for age x, period t, gender g and risk profile  $\ell$  (with covariates  $x_{\ell}$ ).

I am/was involved in the design of KAG 2014, IA|BE 2015 and IA|BE 2020 (published in November 2020).

KAG updates every 2 years, IA|BE every 5 years, CMI in the UK every year.

Research goals 9

Pandemic data points in 2020 and 2021, including mortality shocks

Today, I will focus on:

- (1) the basic principles of a stochastic multi-population mortality projection model of type Li& Lee (cfr. IA|BE 2015 and 2020, KAG 2014 2020 and 2022)
- (2) the impact of pandemic data points (as in 2020 and 2021) on the parameters calibrated for such a model
- (3) adjustments in the model specification, the calibration and the time dynamics that were recently proposed in response the (2).

### References

Stochastic mortality models at population and portfolio level





- Antonio, Devriendt et al. (2017, European Actuarial Journal). Producing the Dutch and Belgian mortality projections: a stochastic multi-population standard
  - with applications on e.g. calculating life expectancies, cash flow valuation for stylized portfolios.
- Van Berkum, Antonio & Vellekoop (2020, JRSS A). Quantifying longevity gaps using micro-level lifetime data
  - capture portfolio-specific mortality with national population model as baseline.

- Robben, Antonio & Devriendt (2022, Risks). Assessing the impact of the COVID-19 shock on a stochastic multi-population mortality model.
- Koninklijk Actuarieel Genootschap (2022). Prognosetafel AG 2022 langer leven in onzekere tijden.

and the accompanying working paper

Van Berkum, Melenberg & Vellekoop (2022). Estimating the impact of the COVID-19 pandemic using granular mortality data

# Foundations of the IA|BE 2020 stochastic mortality

projection model for the Belgian population

### The basic principles of IA|BE 2015 and IA|BE 2020



### The mortality project of IA|BE opts for:

- biological reasonableness, state of the art (but not necessarily novel)
- good performance on in sample statistical measures as well as out-of-time back-tests
- ability to generate future scenarios of mortality ('simulation generator')
- reproducibility and full transparency, use of open data.

More detailed discussion in Antonio, Devriendt et al. (2017, EAJ), KAG 2014, 2016, 2018 and 2020, IA|BE 2015 and 2020.

### Models in the literature: single population

A general class of models ('LifeMetrics models'):

$$\log \mu_{x,t} = \beta_x^{(1)} \kappa_t^{(1)} \gamma_{t-x}^{(1)} + \dots + \beta_x^{(N)} \kappa_t^{(N)} \gamma_{t-x}^{(N)}$$

or

logit 
$$q_{x,t} = \beta_x^{(1)} \kappa_t^{(1)} \gamma_{t-x}^{(1)} + \ldots + \beta_x^{(N)} \kappa_t^{(N)} \gamma_{t-x}^{(N)}$$

where

- $\beta_{x}^{(k)}$  = age effect for component k
- $\kappa_t^{(k)} = \text{period effect for component } k$
- $\gamma_{t-x}^{(k)} = \text{cohort effect for component } k$ .

### From single to multi-population mortality models

Multi-population models specify (for the log of the force of mortality) a  $M_{\text{com}} + M_{\text{country}}$ , where  $M_{\text{com}}$  is common and  $M_{\text{country}}$  is country-specific.

The augmented common factor model by Li & Lee (2005, Demography):



across a set of countries:

$$\ln \mu_{x,t}^{(i)} = \underbrace{A_x}_{\text{common}} + \underbrace{\alpha_x^{(i)}}_{\text{country}} + \underbrace{B_x \cdot K_t}_{\text{common}} + \underbrace{\beta_x^{(i)} \cdot \kappa_t^{(i)}}_{\text{country}},$$

for a specific country (i)

• twice a Lee & Carter (1992, JASA) specification.

"Collect and include new data points, re-calibrate the model parameters, and - if necessary - incorporate any methodological changes."

 $Starting\ point\ is\ the\ IA|BE\ 2015\ model,\ documentation\ of\ all\ assumptions,\ calibration\ and\ simulation\ details\ is\ part\ of\ our\ mission.$ 

Antonio, Devriendt et al. (2017, European Actuarial Journal). Producing the Dutch and Belgian mortality projections: a stochastic multi-population standard.



The data

We select European countries with GDP per capita above the average of the Euro area (in 2018, Worldbank data).

This results in a set of 14 countries:

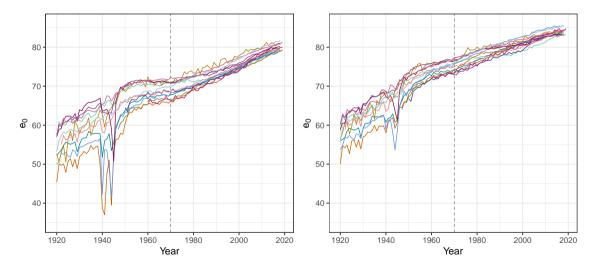
Belgium, The Netherlands, Luxembourg, Germany, France, UK, Ireland, Iceland, Norway, Sweden, Finland, Denmark, Switzerland, Austria.

For these countries we obtain data on deaths and exposures from 1970 until 2018 from HMD (www.mortality.org) and Eurostat (https://ec.europa.eu/eurostat).

For Belgium, we add deaths and exposures in 2019 from Statbel (https://statbel.fgov.be/en).

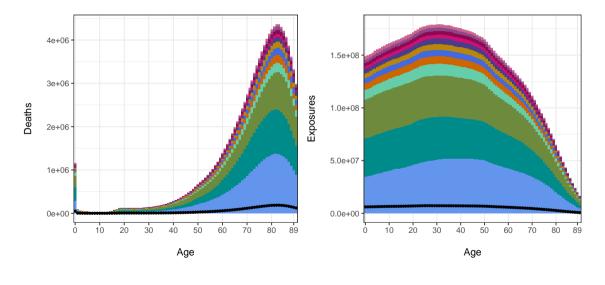
A more data driven selection of the countries is discussed in Devriendt, Antonio & Vellekoop (2021) on Regularized multi-population mortality modelling.

### The data - evolution in period life expectancy (source: HMD)



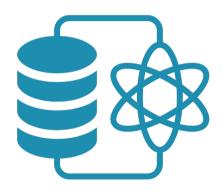
- AUS - BEL - DNK - FIN - FRA - GER - ICE - IRE - LUX - NED - NOR - SWE - SWI - UNK

### The data - (combined male and female) deaths and exposures



### Model specification

and calibration



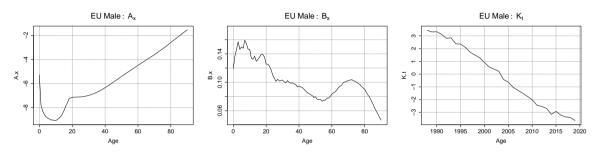
Lee & Carter model for EU mortality and country-specific deviation:

$$\begin{array}{lll} \ln \mu_{x,t}^{(\mathsf{BEL})} &=& \ln \mu_{x,t}^{(\mathsf{EU})} + \ln \tilde{\mu}_{x,t}^{(\mathsf{BEL})} \\ \ln \mu_{x,t}^{(\mathsf{EU})} &=& A_x + B_x K_t \\ \ln \tilde{\mu}_{x,t}^{(\mathsf{BEL})} &=& \alpha_x + \beta_x \kappa_t \end{array}$$

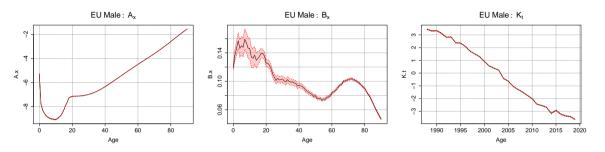
with constraints

$$\sum_t K_t = \sum_t \kappa_t = 0 \text{ and } \sum_x B_x^2 = \sum_x \beta_x^2 = 1.$$

We use a Poisson assumption for the number of deaths and Maximum Likelihood Estimation (MLE) for estimating the parameters.

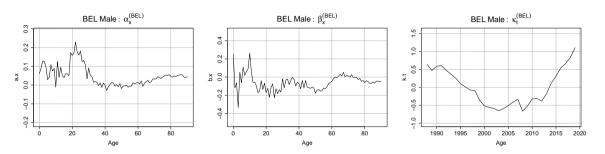


Note: calibration period 1988 - 2018 extensively motivated in Antonio, Devriendt and Robben (2020).



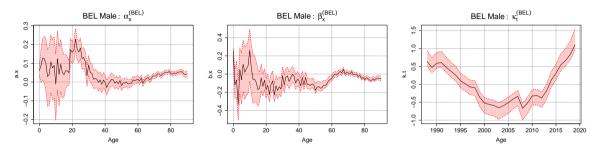
Poisson bootstrap used to add parameter uncertainty (99% pointwise intervals, based on 10 000 simulations).

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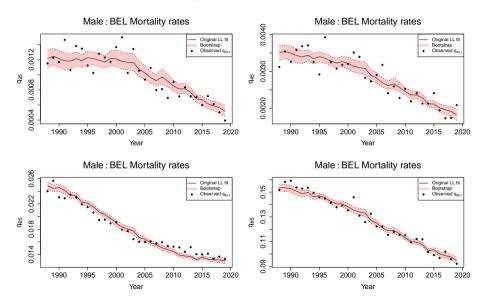
### IA BE 2020: males, fitted parameters, Belgian deviation



Poisson bootstrap used to add parameter uncertainty (99% pointwise intervals, based on 10 000 simulations).

Note: calibration period 1988 - 2019 extensively motivated in Antonio, Devriendt and Robben (2020).

### **IA**|**BE 2020:** males, in sample $q_{x,t}$ for x = 25, 45, 65, 85



### **Time dynamics**



### in the IA|BE 2020 model

Bivariate time series model for (estimated)  $K_t$  and  $\kappa_t$  (per gender):

$$K_{t+1} = K_t + \theta + \epsilon_{t+1}$$
  

$$\kappa_{t+1} = c + \phi \cdot \kappa_t + \delta_{t+1}.$$

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We combine  $(\epsilon_t^{(M)}, \delta_t^{(M)}, \epsilon_t^{(F)}, \delta_t^{(F)})$  and assume i.i.d 4-variate normally distributed noise terms with mean (0,0,0,0) and covariance matrix  $\boldsymbol{C}$ .

Estimate with MLE for C.

To use IA|BE 2020 as a scenario generator, we simulate noise terms and obtain projections for  $\mu_{x,t}^{(\text{BEL})}$  and  $q_{x,t}^{(\text{BEL})}$  (for future t).

### From IA BE 2015 to IA BE 2020: differences in time dynamics



IA|BE 2020 incorporates correlation between  $K_t$  the European trend and  $\kappa_t^{(BEL)}$  the country-specific deviation from this trend

- for males and females, jointly (new!)
- hence, a (new!) 4-variate distribution for error terms  $(\epsilon_t^{(\mathsf{M})}, \delta_t^{(\mathsf{M})}, \epsilon_t^{(\mathsf{F})}, \delta_t^{(\mathsf{F})})$ .

### From IA BE 2015 to IA BE 2020: differences in time dynamics



### IA|BE 2020 uses AR(1) with intercept (new!):

- AR(1) parameter in the  $\kappa_t$  process no longer depends on the linear identifiability constraint imposed on  $\kappa_t$
- $\kappa_t$  may converge to a non-zero value, thus an extra gap, besides the age effect  $\alpha_x$ , between the long term projected mortality rates for Belgium and Europe
- stability of the AR(1) process and sensitivity analysis with respect to AR(k) process extensively investigated.

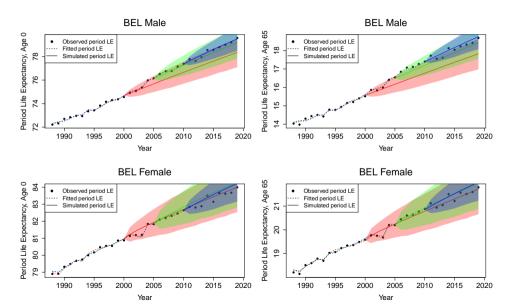
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- 1. start with the published  $(K_{t_{\max}}^M, \kappa_{t_{\max}}^M, K_{t_{\max}}^F, \kappa_{t_{\max}}^F)$  and time series parameter estimates simulate error terms  $(\epsilon_t^M, \delta_t^M, \epsilon_t^F, \delta_t^F)$  and retrieve future  $(K_t^{M,i}, \kappa_t^{M,i}, K_t^{F,i}, \kappa_t^{F,i})$  from the time series specifications
- 2. combine with the published age specific parameters ( $A_x$ ,  $B_x$ ,  $\alpha_x$  and  $\beta_x$ ) and obtain future  $\mu_{x,t}^i$  or  $q_{x,t}^i$
- 3. close each generated period table (i, t) for old ages, say  $x \in \{91, ..., 120\}$ , using law of Kannistö (1992) calibrated on ages  $\{80, 81, ..., 90\}$ .

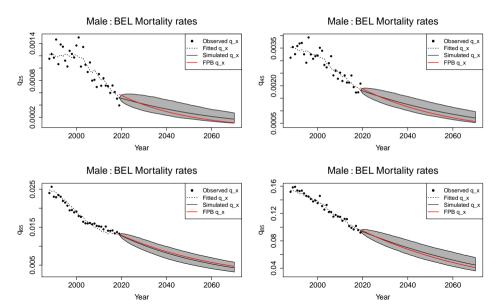


Results, including back-tests

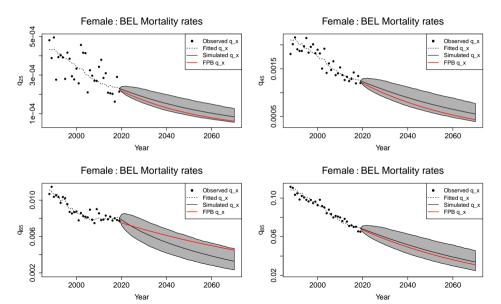
### IA BE 2020: back-test period LE



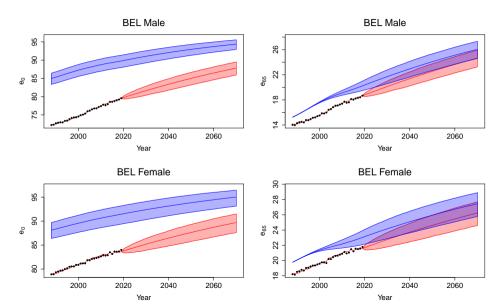
### IA|BE 2020: mortality rates $q_{x,t}$



### IA|BE 2020: mortality rates $q_{x,t}$



## IA|BE 2020: period and cohort life expectancy



#### IA BE 2020: cohort life expectancy

year		males		females	
		0	65	0	65
2020	Best Est.	89.91	20.38	91.54	23.14
	$[q_{0.5}; q_{50}; q_{99.5}]$	[88.11;89.89;91.46]	[19.57;20.37;21.17]	[89.46;91.53;93.25]	[22.15;23.14;24.07]
	FPB	(90.07;90.25)	(20.11;20.56)	(91.28;91.53)	(22.92;23.38)
2040	Best Est.	92.08	22.94	93.15	25.09
	$[q_{0.5}; q_{50}; q_{99.5}]$	[90.35;92.08;93.52]	[21.65;22.94;24.14]	[91.12;93.14;94.82]	[23.63;25.09;26.46]
	FPB	(92.09;92.36)	(22.80;23.26)	(92.80;93.08)	(24.82;25.28)
2060	Best Est.	93.73	25.11	94.45	26.74
	$[q_{0.5}; q_{50}; q_{99.5}]$	[92.18;93.72;94.97]	[23.69;25.11;26.39]	[92.50;94.45;95.97]	[25.06;26.74;28.18]
	FPB	(93.62;93.90)	(25.00;25.48)	(94.06;94.34)	(26.45;26.92)

 $\text{Multi-population model of type Li \& Lee calibrated on } t \in \{1988, \dots, 2018\} \text{ and } t \in \{1988, \dots, 2019\} \text{ for Belgian data and } x \in \{0, 1, \dots, 90\}.$ 

# COVID-19 impact analysis and adjustments to the Li & Lee multipopulation model and the proposed time

dynamics

#### We will now focus on:

- Robben, Antonio & Devriendt (Risks, 2022) published early January 2022, written mid 2021, using only the pandemic data point 2020
- Prognosetafel AG 2022 (from www.ag-ai.nl)
   and the working paper by Van Berkum, Melenberg & Vellekoop,
   both published on September 13, 2022,
   using the pandemic data points 2020 and 2021.



#### An important note on data collection

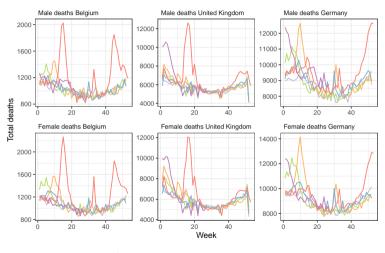
To assess the impact of the COVID-19 pandemic on our proposed stochastic mortality model:

- extract death counts  $d_{x,t}$  and exposures  $E_{x,t}$  for individual ages up to and including years 2020 and 2021
- however, publication of these statistics by national statistics institutes takes time!
- alternative sources:

Eurostat and STMF ('Short Term Mortality Fluctuations') publish weekly statistics, in age buckets

or acquiring customized (granular) data from National Statistical Institutes ('maatwerk').

#### Weekly death counts, Eurostat and STMF

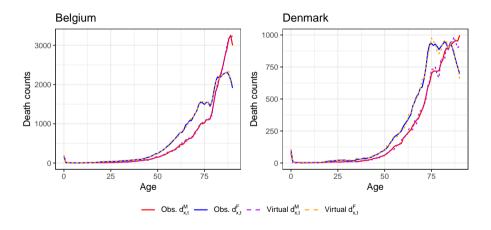


Year - 2016 - 2017 - 2018 - 2019 - 2020 - 2021

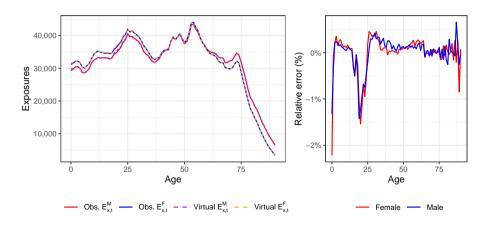
- 1. We use <u>weekly</u> exposures and death counts in age <u>buckets</u> from STMF (by HMD) and Eurostat, for the 13 EU countries from IA|BE 2020, Ireland is not included (no data).
- 2. We design and apply a technical protocol to transform the weekly mortality data in age buckets to yearly mortality data for individual ages.

We verify our protocol on the 2020 data for Belgium and Denmark (published at the moment of writing the paper).

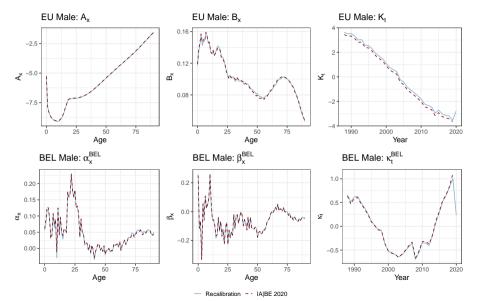
## Evaluation of technical protocol on 2020 data from Belgium and Denmark



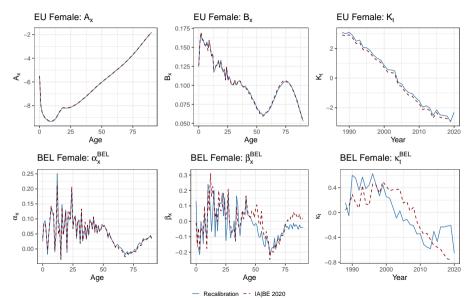
## Evaluation of technical protocol on 2020 data from Belgium and Denmark



#### Pandemic impact on calibrated parameters - recalibrating IA|BE 2020

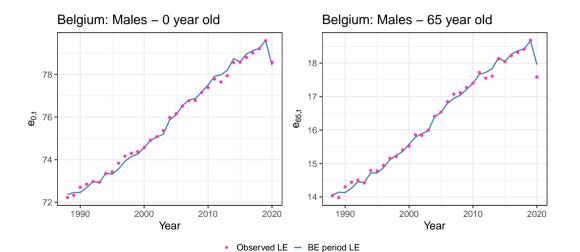


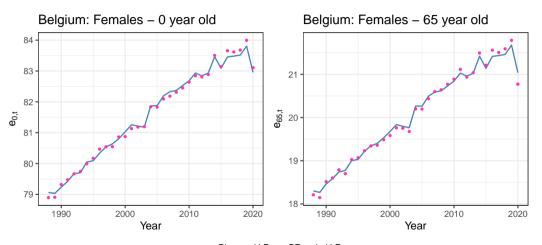
#### Pandemic impact on calibrated parameters - recalibrating IA BE 2020



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## Pandemic impact on period life expectancy - recalibrating IA|BE 2020





Observed LE — BE period LE

## Pandemic impact on cohort life expectancy - recalibrating IA|BE 2020

Cohort life expectancy in 2020		Males		Females	
		0	65	0	65
IA BE 2020	Best. Est. [q <sub>0.5</sub> ; q <sub>50</sub> ; q <sub>99.5</sub> ]	89.91 [88.11; 89.89; 91.46]	20.38 [19.57; 20.37; 21.17]	91.54 [89.46; 91.53; 93.25]	23.14 [22.15; 23.14; 24.07]
Recalibration	Best. Est. [q <sub>0.5</sub> ; q <sub>50</sub> ; q <sub>99.5</sub> ]	87.64 [83.94; 87.63; 90.51]	19.26 [17.99; 19.25; 20.53]	89.67 [85.98; 89.65; 92.60]	22.21 [20.81; 22.20; 23.55]

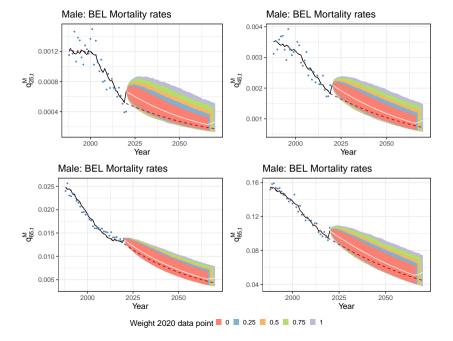
No expert judgement made about the 2020 observation; re-calibrated along the principles of IA $\mid$ BE 2020.

Robben, Antonio & Devriendt (2022, Risks) investigate how to limit the impact of the 2020 data point (if wanted):

- by intervening in the likelihood to calibrate the time series models
- via a weighted time series likelihood

$$I(\boldsymbol{\Psi}, \boldsymbol{C}) = -\frac{1}{2} \sum_{t=1989}^{2020} w_t \cdot \left(4 \log 2\pi + \log |\boldsymbol{C}| + tr \left[\boldsymbol{C}^{-1} (\boldsymbol{Y}_t - \boldsymbol{X}_t \boldsymbol{\Psi}) (\boldsymbol{Y}_t - \boldsymbol{X}_t \boldsymbol{\Psi})^t\right]\right),$$

where  $w_t = 1$  for t < 2020 (pre-COVID) and 5 possible scenarios are investigated for  $w_{2020}$ , i.e.  $w_{2020} \in \{0, 0.25, 0.50, 0.75, 1\}$ .



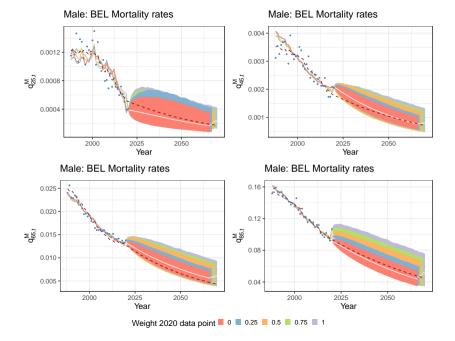
# Robben et al. (2022) interventions in forecasting and calibration strategy

Robben, Antonio & Devriendt (2022, Risks) investigate how to limit the impact of the 2020 data point (if wanted):

via the calibration strategy, with a Lee & Miller (2001) inspired modification

$$\begin{array}{ll} \ln \mu_{x,t}^{\rm BEL} & = & \ln \mu_{x,t}^{\rm EU} + \ln \tilde{\mu}_{x,t}^{\rm BEL} \\ \ln \mu_{x,t}^{\rm EU} & = & \underbrace{\lambda_{2020} \cdot \log m_{x,2020}^{\rm EU} + (1-\lambda_{2020}) \cdot \log m_{x,2019}^{\rm EU}}_{\rm adjusted} + B_x (K_t - K_{2020}) \\ \ln \tilde{\mu}_{x,t}^{\rm BEL} & = & \underbrace{\lambda_{2020} \cdot \log \tilde{m}_{x,2020}^{\rm BEL} + (1-\lambda_{2020}) \cdot \log \tilde{m}_{x,2019}^{\rm BEL}}_{\rm adjusted} + \beta_x (\kappa_t - \kappa_{2020}), \\ & & \text{adjusted} \ \alpha_x \end{array}$$

where  $\lambda_{2020} \in \{0, 0.25, 0.50, 0.75, 1\}$  is the weight assigned to the observed central death rates in 2020.



#### KAG 2022 interventions in model specification

KAG 2022 proposes a three-layer Li & Lee model:

$$\ln \mu_{x,t}^{(\text{NL})} = \ln \mu_{x,t}^{(\text{pre-COVID, NL})} + (\tilde{\mathcal{B}}_x \Upsilon_t)$$
$$= A_x + B_x K_t + \alpha_x + \beta_x \kappa_t + \tilde{\mathcal{B}}_x \Upsilon_t,$$



calibrated for male and female data, respectively.

Here:

- the pre-COVID baseline mortality is calibrated on data up to (and including) 2019
- $\Upsilon_t$  for t=2020 and t=2021 capture the time effect of the pandemic
- the  $\tilde{\mathcal{B}}_x$  express age-specific differences in pandemic impact.

#### KAG 2022 interventions in model specification

To calibrate the COVID-19 impact, expressed as  $\tilde{\mathcal{B}}_x \Upsilon_t$ , focus on weekly Dutch data:

$$D_{\mathsf{x},\mathsf{w},t} \sim \mathsf{POI}\left(E_{\mathsf{x},\mathsf{w},t} \cdot \mu_{\mathsf{x},\mathsf{w},t}\right),$$

for ages  $x \in \{55, \dots, 90\}$  and  $t \in \{2020, 2021\}$ , where

$$\mu_{x,w,t} = \mu_{x,t}^{(\text{pre-COVID, NL})} \cdot \underbrace{\phi_{w,t}}_{\text{yearly seasonal effect}} \underbrace{\exp(\mathcal{B}_x \mathcal{K}_{w,t})}_{\text{cov}},$$

and  $\sum_{x=55}^{90} \mathcal{B}_x = 1$ .

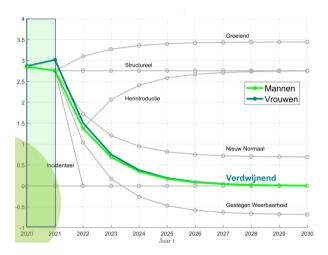
A transformation is then proposed to step:

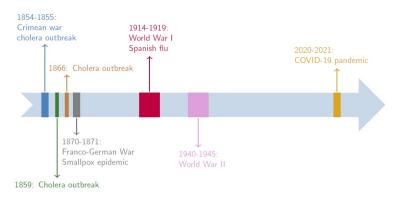
- from calibrated  $\mathcal{B}_x$  to  $\tilde{\mathcal{B}}_x$  for  $x \in \{55, \dots, 90\}$
- from weekly  $\mathcal{K}_{w,t}$  to yearly  $\Upsilon_t$  for  $t \in \{2020, 2021\}$ .

#### Hereto, KAG 2022 assumes

- the one-year annual survival probabilities in 2020 and 2021 equal the product of the weekly survival probabilities in these years  $\Rightarrow \Upsilon_t$
- survival over 2020 and 2021 should be equal to surviving over all weeks in these years  $\Rightarrow$   $\tilde{\mathcal{B}}_{x}$ .

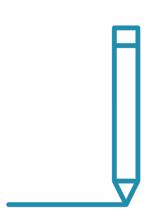
#### KAG 2022 scenarios for future impact of COVID-19 via the $\Upsilon_t$ 's





#### Ongoing work:

- age-dependent mortality shocks in a stochastic multi-population mortality projection model of type Li & Lee with multiple age-time components
- regime switch process to switch between a high volatility regime (prone to mortality shocks) and a low volatility regime.



That's a wrap!

IA|BE 2020 is still our best estimate for future long-term mortality.

Cfr. CMI 2020 in the UK: 'We put no weight on the data for 2020.'

At this moment, scenario-thinking + some methodological interventions are necessary to quantify the long-term impact of COVID-19 on mortality.

Papers and code available via the hyperlinks in the sheets or from my website and Github.



# Thank you for your attention!