# IFRS 17 Insurance Contracts

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IFRS Regulators Forum



Centre for Financial Reporting Reform





Strengthening Auditing and Reporting in the Countries of the Eastern Partnership



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January 2022

The views expressed in this presentation are my own and not necessarily those of any organization with which I am associated.

### Introduction IFRS 17 Insurance Contracts



» IFRS 17

- » replaces an interim Standard—IFRS 4
- » requires consistent accounting for all insurance contracts based on a current measurement model
- » will provide useful information about <u>profitability</u> of insurance contracts
- » Effective 2023
  - » one year restated comparative information
  - » early application permitted

# Reasons and objectives for IFRS 17

#### Insurance Accounting Phased approach

#### Two phases for accounting for insurance contracts:

Phase 1

- » 2004: issue of IFRS 4 *Insurance Contracts*, focus on enhanced disclosure of amount, timing and uncertainty of cash flows.
- » IFRS 4 allows entities to continue using various recognition, measurement and presentation (grandfathering)

Phase 2

» 2017: issue (2020 amendment) of IFRS 17 Insurance Contracts, focus on consistent recognition, measurement and presentation of insurance contracts.

IFRS 17 supersedes IFRS 4

### Phase 1: Insurance Accounting IFRS 4 Insurance contracts

- » IFRS 4 grandfathered much previous jurisdictional practice:
  - » Wide range of accounting stemming from original practices
  - » Differences across jurisdictions and products make it difficult for investors and analysts to understand and compare results
  - » Insurers use multiple practices in a set of consolidated results
- » Some existing practices fail to reflect true underlying financial position or performance of insurance contracts
- » Most stakeholders agreed on need for a common standard (opinions varied as to what it should be)

### Phase 1: Insurance Accounting Lack of comparability

	Year X			
CU Millions	GAAP 1	GAAP 2	Diffe	rence
Revenue	8 263	10 979	(2 716)	(33%)
Operating income	1 416	633	783	55%
Net income	965	337	628	65%
Total equity	8 977	3 872	5 105	57%

Source: Effects Analysis on IFRS 17

#### Phase 2 Overview IFRS 17 Insurance contracts

#### One accounting model for all insurance contracts





450 listed insurers on IFRS Standards



\$13 Trillion of assets



2023 mandatory effective date



5.5 years to implement

# IFRS 17 Improvements Transparency and useful information

Applying IFRS 4	Applying IFRS 17
<ul> <li>Old or outdated assumptions</li> <li>Options and guarantees not fully reflected in measurement</li> <li>Time value of money not considered for incurred claims</li> <li>Use of asset rate for discounting</li> </ul>	<ul> <li>Current assumptions</li> <li>Options/guarantees fully reflected</li> <li>Estimated claims measured on a discounted basis.</li> <li>Discount rate reflects insurance liability characteristics</li> </ul>
<ul> <li>Revenue recognised on cash basis</li> <li>Use of non-GAAP measures</li> </ul>	<ul> <li>Unearned profit recognised as insurance coverage is provided</li> <li>Additional metrics available</li> </ul>

#### Cost versus benefit Simplifications to reduce costs

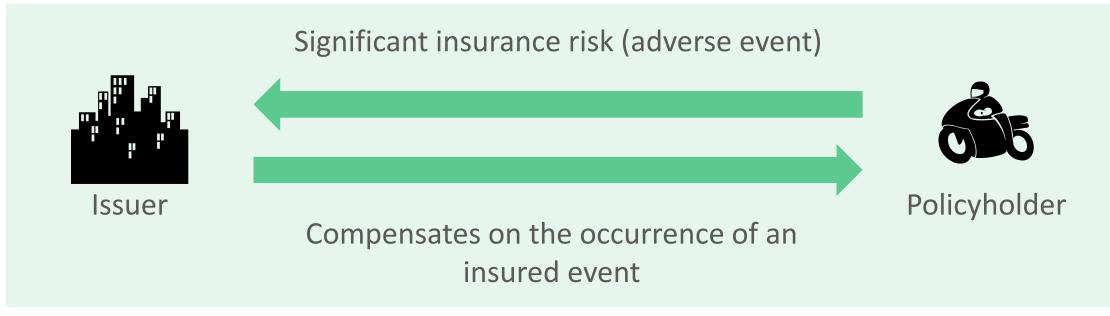
- » Simplifications must balance cost savings with potential loss of information
- » For example, IFRS 17:
  - » Allows simplified measurement of some short-term insurance contracts
  - » Enables requirements to be applied to a group of contracts rather than on a contract-by-contract basis
  - » does <u>not</u> apply to some common contracts issued by non-insurers, such as most product warranties

#### Cost versus benefit

- » Board concluded IFRS 17 will result in significant first time costs, but that overall benefits outweigh the costs
- » Board expected that applying IFRS 17 will require
  - » insurers to gather new information
  - » employ or develop skills and change financial systems
  - » updating internal procedures, and
  - » communicating changes in their reports to external parties
- » Costs will vary by jurisdiction depends on existing practices
- » Insurers are also expected to continue incurring costs in applying IFRS 17 on an ongoing basis.



#### What is an insurance contract



- ⇔ IFRS 17 and IFRS 4—same definition
- ⇔ IFRS 17 two minor changes to guidance but no expected changes in assessments for majority of contracts
  - ⇔ No change from IFRS 4

### Scope exclusions Mandatory exclusions

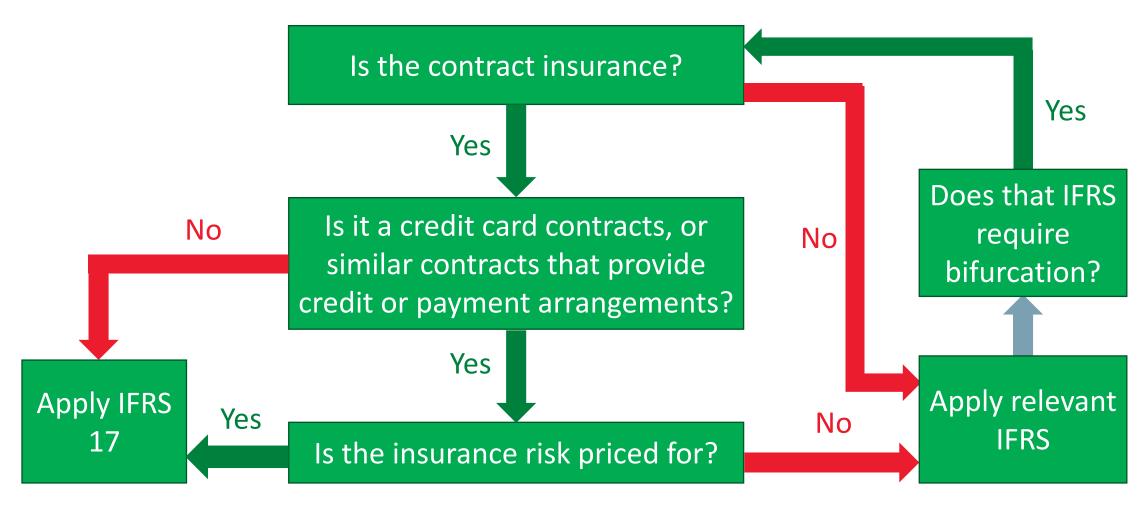
#### Some insurance contracts remain in the scope of other IFRSs

- » For example:
  - warranties issued by manufacturers, dealers or retailers
  - retirement benefit obligations
  - ⇔ some residual value guarantees
  - insurance contracts held by an entity, unless those contracts are reinsurance contracts
  - ★ some credit card and similar contracts if insurance risk is not assessed in pricing

### Mandatory exclusions Banking products

- » Credit card contracts, or similar contracts that provide credit or payment arrangements,
- » if, and only if, the entity doesn't price for the individual customer risk
- » if, and only if, IFRS 9 requires an entity to separate an insurance component, then entity apply IFRS 17 to that component.

### Mandatory exclusions Credit cards and similar products



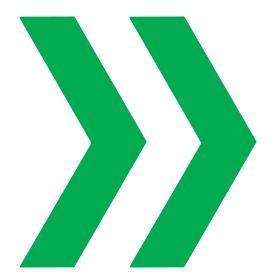
### Scope Optional exclusions

Option to account for some insurance contracts using either IFRS 17 or other IFRS Standards

- ⇔ Financial guarantee contracts—IFRS 17 or IFRS 9 Financial Instruments
- ✓ Specified fixed-fee service contracts—IFRS 17 or IFRS 15 Revenue from Contracts with Customers
- ✓ Specified loan contracts—IFRS 17 or IFRS 9 Financial Instruments

### Optional exclusions Banking products

- » Some contracts limit compensation to amount required to settle the policyholder's obligation created by the contract
- » Entity can choose
  - » to apply either IFRS 17 or IFRS 9
  - » at portfolio level, and
  - » is irrevocable.



### Level of aggregation

### Why group contracts?

- » Typically, under IFRS contracts are measured on an individual contract basis
- » IFRS 17 and insurance accounting is an exception to this general principle:

#### **Objective of insurance**

- » Insurance <u>aggregates</u> uncertain future events
- » This changes a <u>binary risk into a</u>
  <u>probability risk</u>
- » Allows insurer to manage risk where individual couldn't

#### **Asymmetry of IFRS 17**

- » Treatment of gains and losses is asymmetric
  - » Losses recognised immediately
  - » Gains recognised as earned
- » Contradicts objective

## Why group contracts? Example

100 2 yr contracts: premium 50 pa, expect 2 contracts to claim 3 500 each year, all expected claims emerge day 1.

	Individual contracts	
Grouped	Profitable	Loss making
10 000	9 800	200
(7 000)	-	(7 000)
3 000	9 800	(6 800)
-	-	(6 800)
1 500	4 900	(6 800)
	10 000 (7 000) 3 000	Grouped Profitable  10 000 9 800  (7 000) -  3 000 9 800

Year 1 loss: (1 900)

# Why not group contracts? Example

2 product lines, car and house, car premium 5 000, expected claims 1 500, house premium 5 000, claims 5 500.

		Sub groups	
Whole contract	Grouped	Car	House
Share or premium	10 000	5 000	5 000
Claims	(7 000)	(1 500)	(5 500)
Cumulative Profit/loss	3 000	3 500	(500)
Day 1 Profit/(loss)	-	-	(500)
Year 1 Profit/(loss)	1 500	1 750	(500)

Year 1 profit: 1 250

### Why not group all similar contracts? *Example*

2 year car insurance, written **year 1**: premium 5 000, <u>actual</u> claims 750pa, **year 2** premium 5 000, <u>actual</u> claims 2 750pa.

	Grouped	Sub groups Year 2	
Whole contract	Year 2	Issue year 1	Issue year 2
Share or premium	5 000	2 500	2 500
Claims	(3 500)	(750)	(2 750)
Cumulative Profit/loss	1 500	1 750	(250)
Year 2 Profit/(loss)	1 500	1 750	(250)

Year 2 profit: 1500

#### Why group contracts Grouping objectives

- » Balance <u>nature of insurance with risk of loss of information</u>
- » Trends matter:

#### **Product line loss making**

- » <u>Bad</u> contracts <u>subsidised</u> by <u>good</u>
- » Good subject to <u>cherry picking</u> by competitors
- » Can indicate risk or pricing problems in a unit

#### Profitability falls over time

- » New contracts subsidised by old
- » May indicate:
  - » an <u>underwriting</u> change <u>failure</u>
  - » increased competition
  - » deteriorating customer base

### How are contracts grouped? Step #1

- » Identify portfolios of insurance contracts
- » A portfolio: insurance contracts subject to similar risks and managed together

Portfolio 1	Portfolio 2	Portfolio 3
Eg Personal accident	Eg Health	Eg Motor
11111111		1111
✓ Similar risks ✓ Managed together	<ul><li>✓ Similar risks</li><li>✓ Managed together</li></ul>	<ul><li>✓ Similar risks</li><li>✓ Managed together</li></ul>

### How are contracts grouped? Step #2

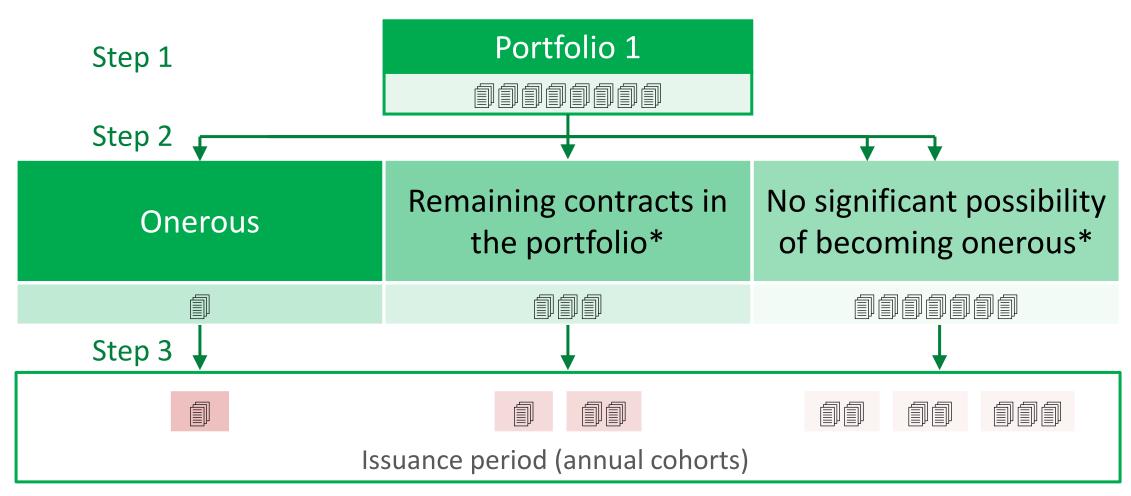
Divide a portfolio into a minimum of:



Recognise <u>loss</u> <u>immediately</u> in P&L <u>Unearned profit</u> recognised as part of the liability and is <u>released as insurance services are provided</u>

<sup>\*</sup> At initial recognition, if any

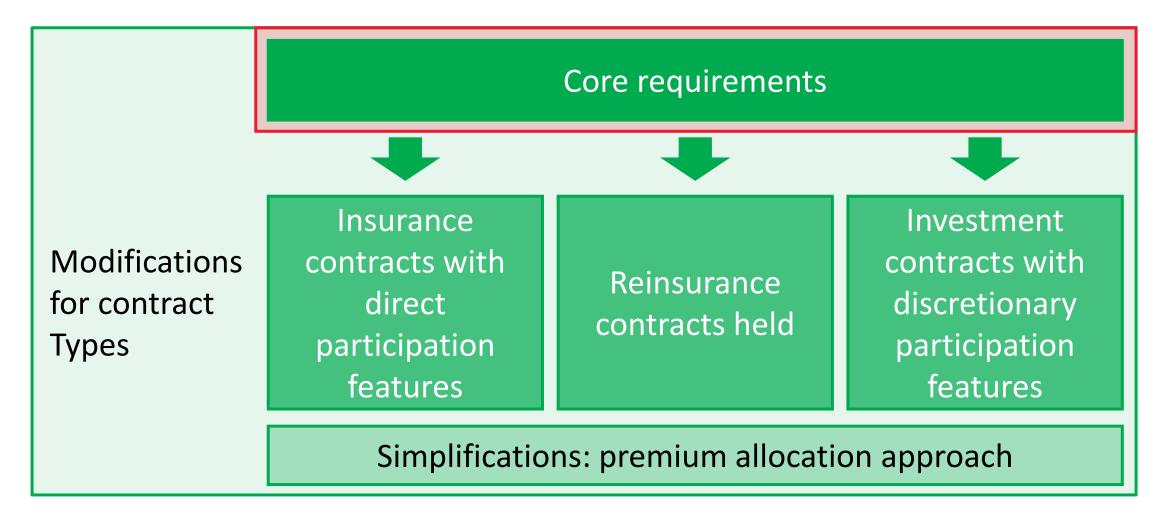
### How are contracts grouped? Step #3



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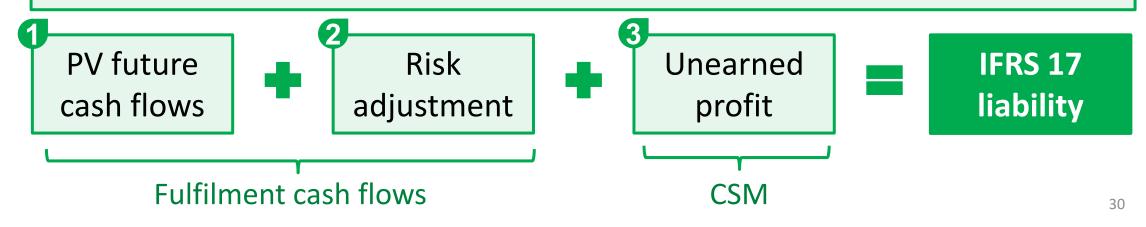
### Core Requirements Snapshot of IFRS 17 Approaches



### Core Requirements 'Building block Approach'

All insurance contracts measured as the sum of:

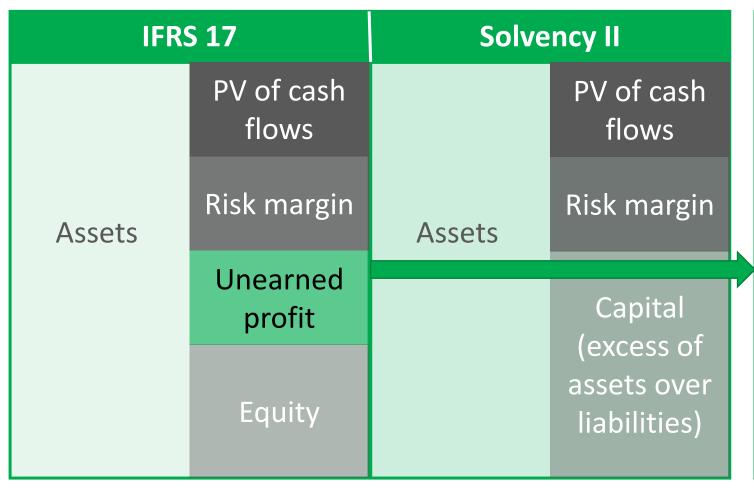
- » Fulfilment cash flows (FCF)
  - 1. Present value of probability-weighted expected cash flows
  - 2. Plus an explicit risk adjustment for non-financial risk (eg insurance risk)
- » Contractual service margin (CSM)
  - 3. The unearned profit from the contracts



# Regulatory regimes Comparison

	IFRS 17	Solvency II
Cash flows	Similar	Similar
Discount rates	<u>Liability-specific rate</u> , market consistent	Swap rate (yr 20) and ultimate forward rate
Risk	Company's <u>own view of</u> <u>risk</u> (possible use of Solvency II risk margin)	Prescribed approach (risk margin—cost of capital set at 6%)
Unearned profit	Recognised in <u>P&amp;L over</u> <u>time</u>	Included in <u>capital at</u> <u>inception</u> —day 1 gain

### Regulatory regimes Performance



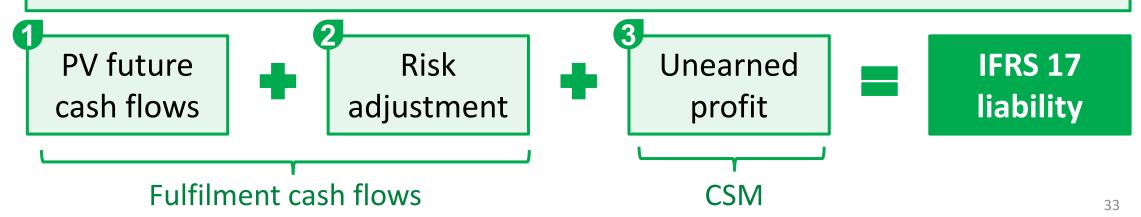
#### **Unearned profit**

- recognised in P&L when coverage is provided
- provides a measure of future profitability
   Changes in unearned profit provide information about:
- profitability of new business
- changes in profitability of existing contracts

### Core Requirements 'Building block Approach'

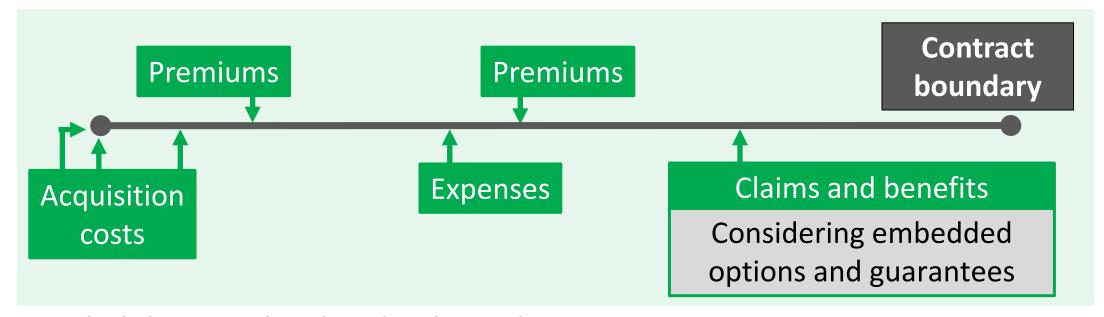
All insurance contracts measured as the sum of:

- » Fulfilment cash flows (FCF)
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  - 3. The unearned profit from the contracts



### Present value of future cash flows Cash flows

» Current estimate of future cash flows in contract boundary



- » Probability weighted and unbiased
- » Stochastic modelling for financial options and guarantees, where relevant

#### Present value of future cash flows Discount rates

#### Reflect time value of money and financial risks

- » Characteristics of the cash flows
- » Liquidity of the insurance contracts
- » To extent that financial risks are included in the cash flows

#### Consistent with observable market prices (if any)

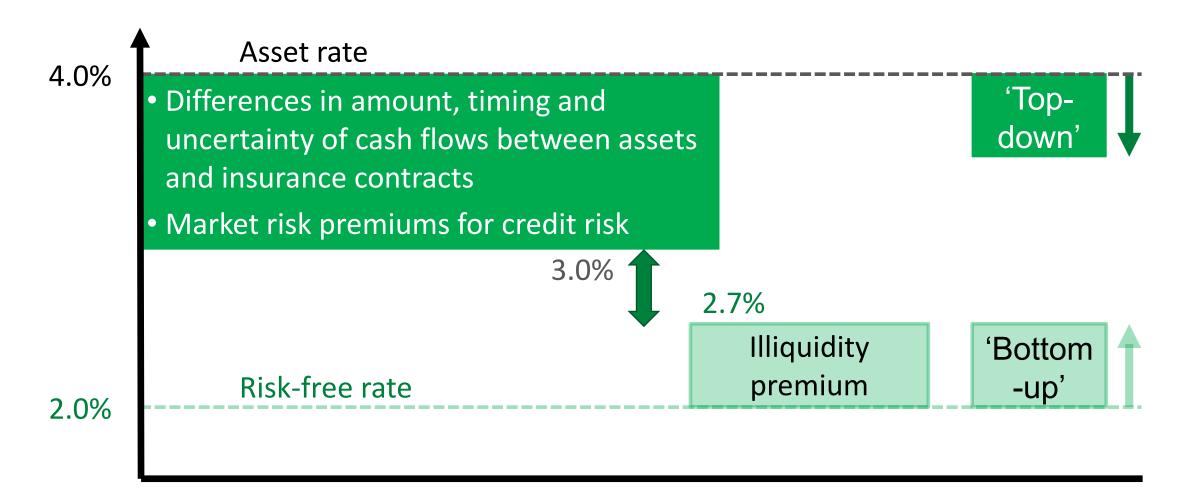
**Timing** 

Currency

Liquidity

Exclude the effect of factors in the observable market prices not relevant to insurance contracts eg credit risk

### Present value of future cash flows Determining the discount rates



#### Risk adjustment

- » Explicit, current adjustment for compensation insurer requires for bearing non-financial risk (eg insurance risk)
- » Compensation that makes a company indifferent between:
  - » fulfilling a liability that has a range of possible outcomes; and
  - » fulfilling a liability that will generate fixed cash flows

Group A		
Probability	Pay-off	
50%	1 000 000	
50%	0	

 $(0.5 \times 1m) + (0.5 \times 0) = CU0.5m$ 

Group B			
Probability Pay-off			
100%	500 000		

 $1 \times 0.5 m = CU0.5 m$ 

# Contractual Service Margin (CSM) Initial measurement

The unearned profit of the group of contracts that relates to future service to be provided

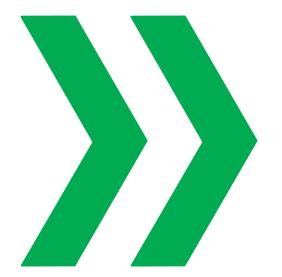
The amount determined so that no gains are recognised in profit or loss on initial recognition

Example—Consider a group of contracts with PV of future cash flows of CU4,250 and risk adjustment of CU750

If premiums CU5,500

If premiums CU3,500

- Contracts profitable at inception
- CSM = CU500 [CU5,500 CU750 CU4,250]
- Contracts onerous at inception
- Day-one loss CU1,500 recognised in P&L No CSM



#### Subsequent measurement

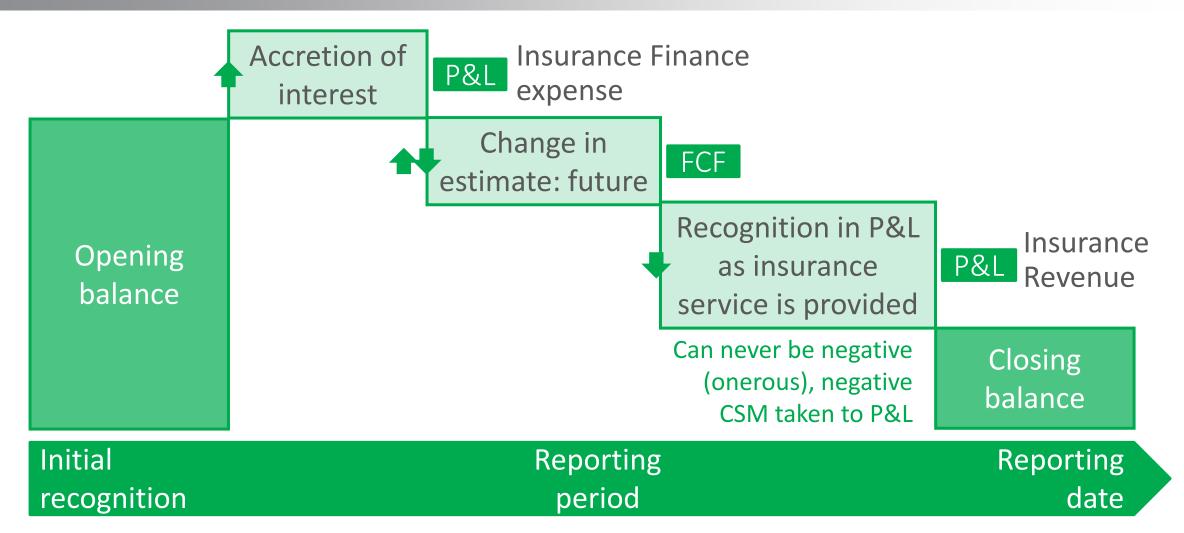
#### Subsequent Measurement

	Initial Measurement	Subsequent Measurement
	Current assumptions	Current assumptions
Risk adjustment	Current assumptions	Current assumptions

#### Subsequent Measurement

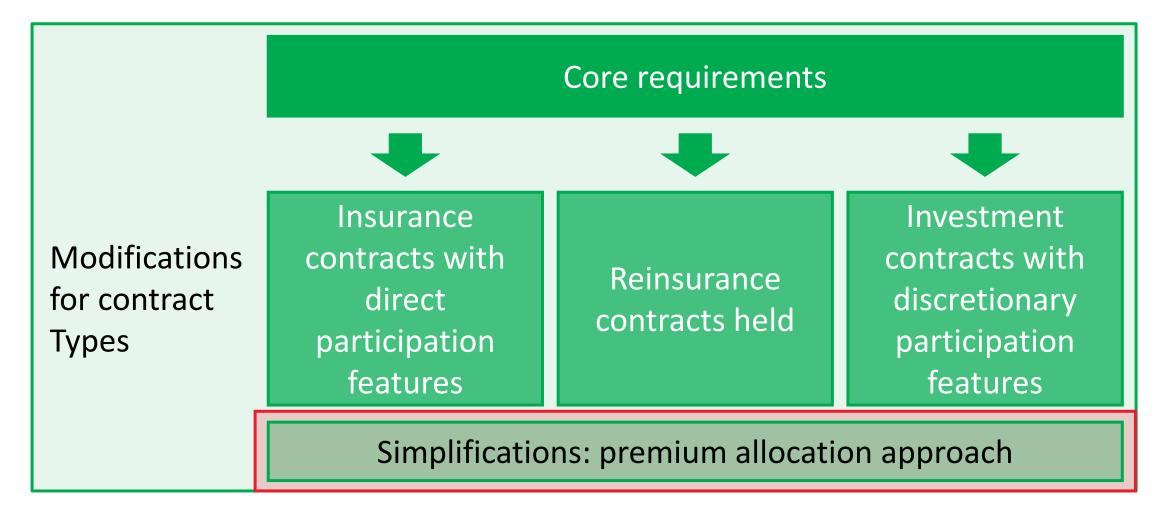
	Initial Measurement	Subsequent Measurement
PV future cash flows	Current assumptions	Current assumptions
Risk adjustment	Current assumptions	Current assumptions
Unearned profit	The amount that results in no gain recognised in profit or loss	<ul> <li>Update by reflecting:</li> <li>Time value Adjustments for future service (fixed)</li> <li>Allocation of the amount earned</li> </ul>

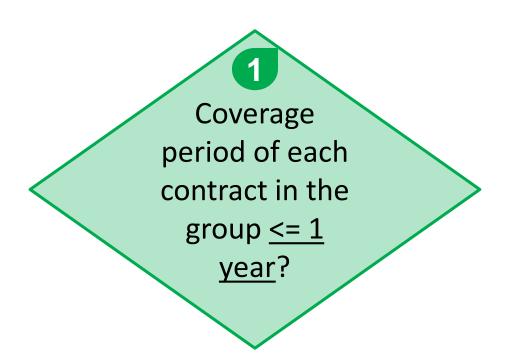
# Contractual Service Margin (CSM) Subsequent measurement

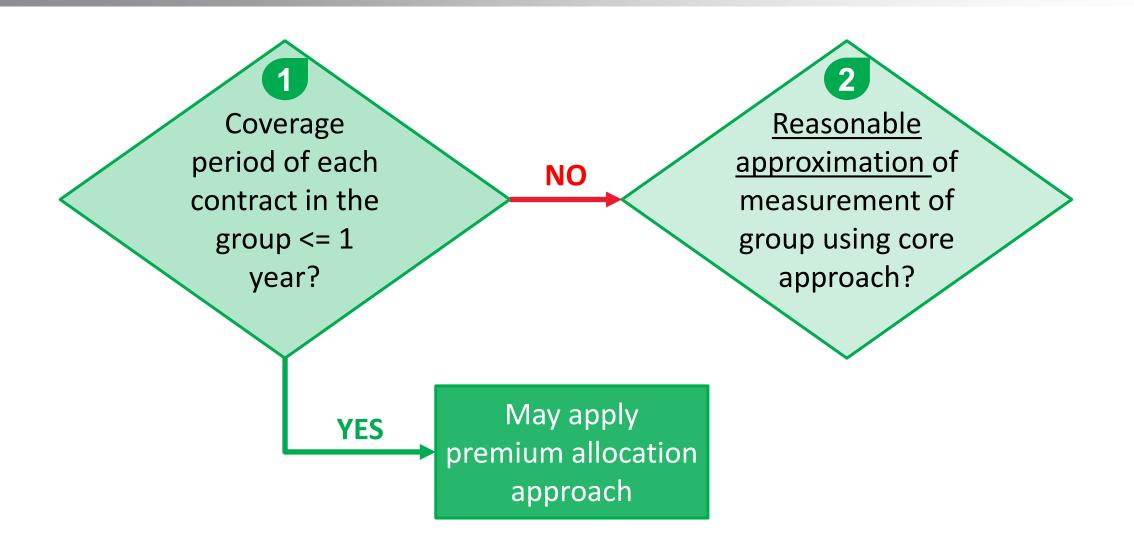


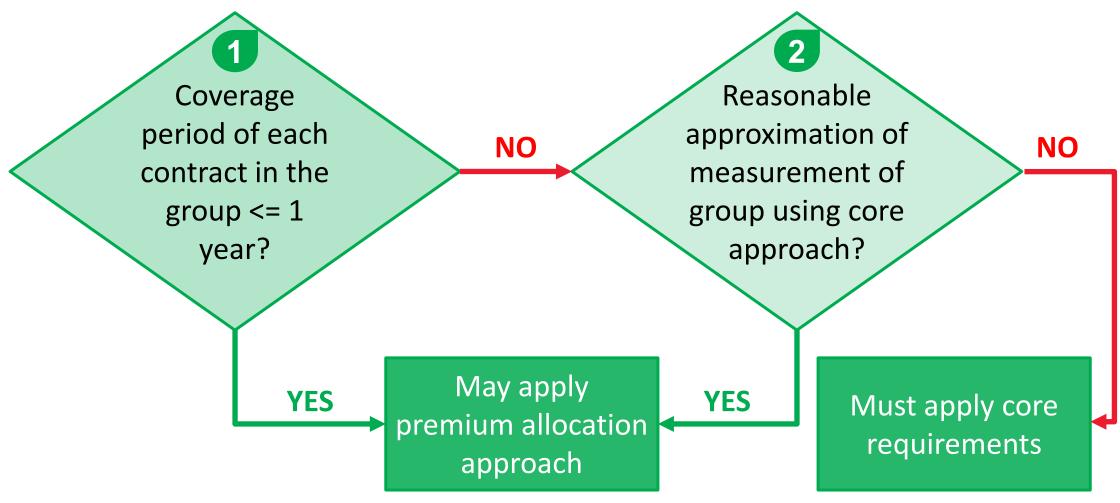
# Premium Allocation Approach

# Core Requirements Snapshot of IFRS 17 Approaches





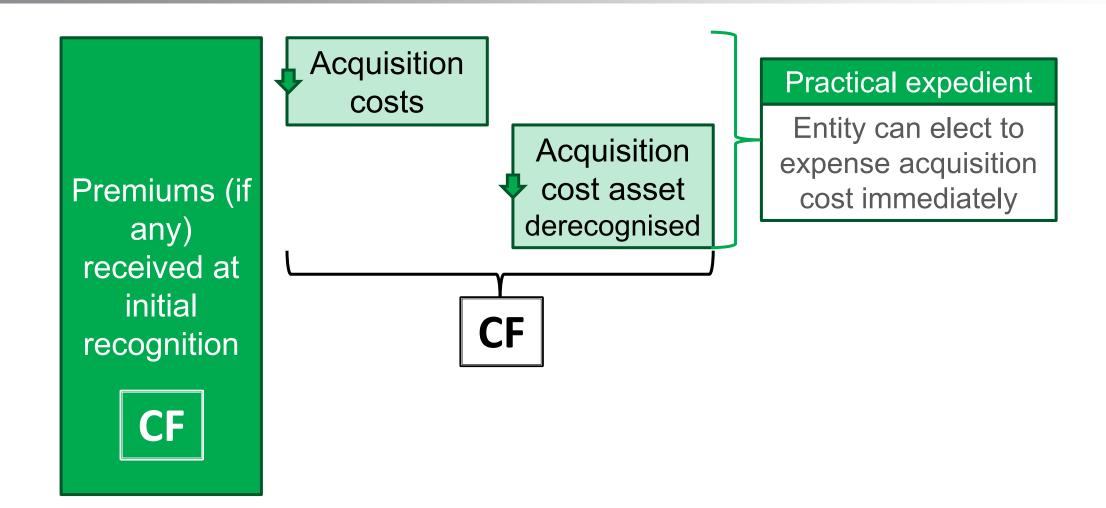




Premiums (if any) received at initial recognition



Cash premium received at initial recognition creates/increases liability



Acquisition Practical expedient costs Can elect to Acquisition expense other cash cost asset Premiums (if flows or accruals derecognised any) received at Other asset initial or liability **CF** recognition derecognised **CF** 

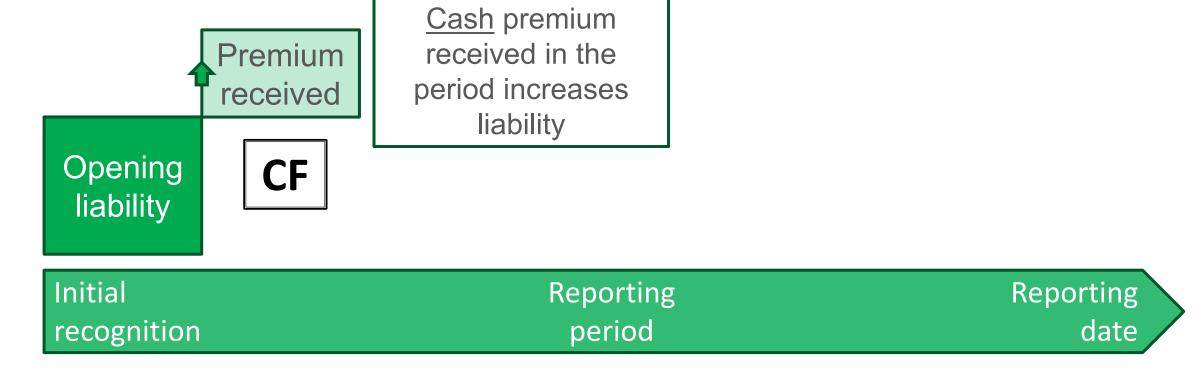
Premiums (if any) received at initial recognition

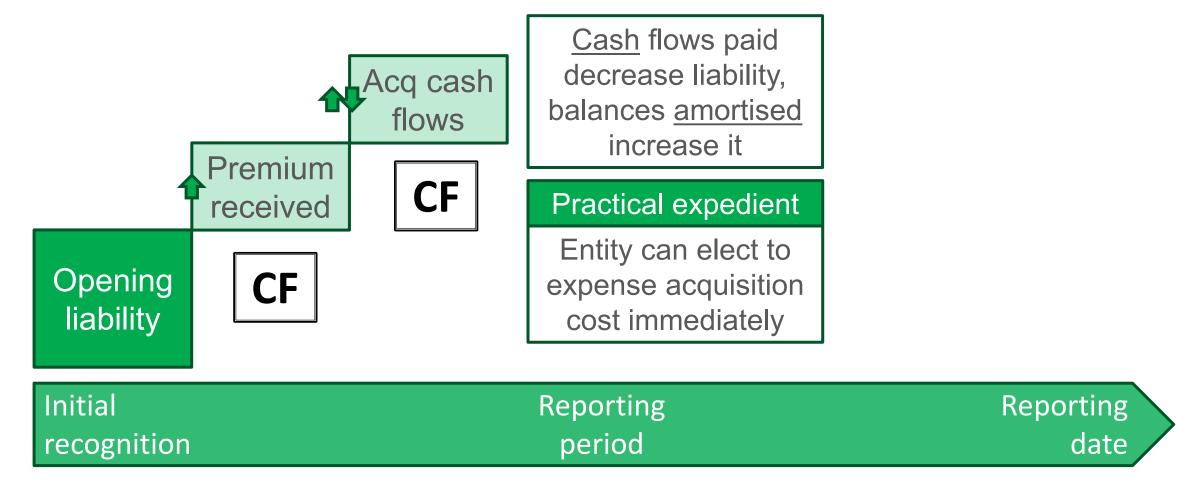
Acquisition costs

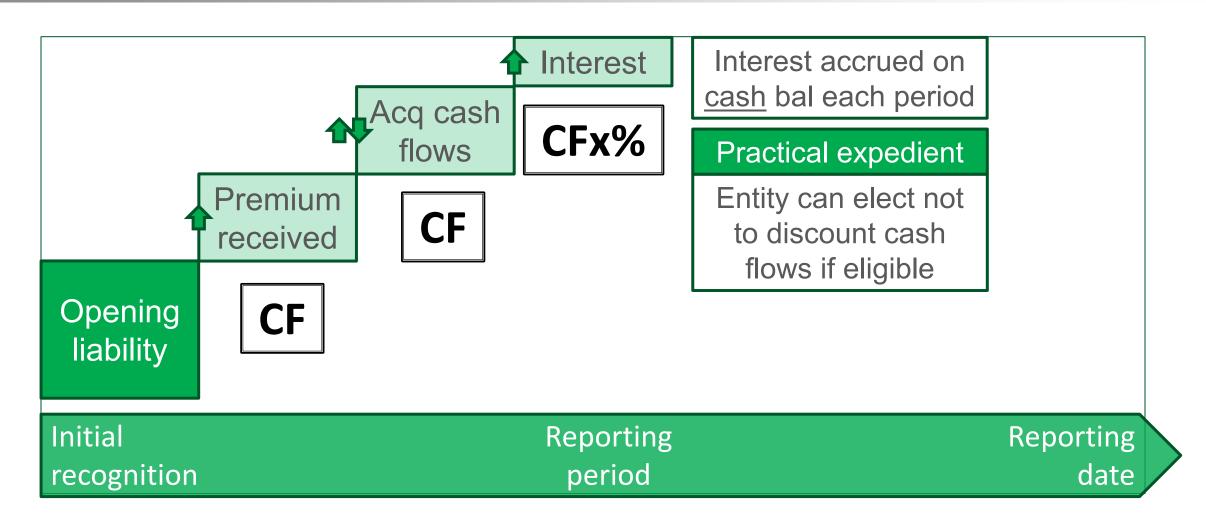
Acquisition cost asset derecognised

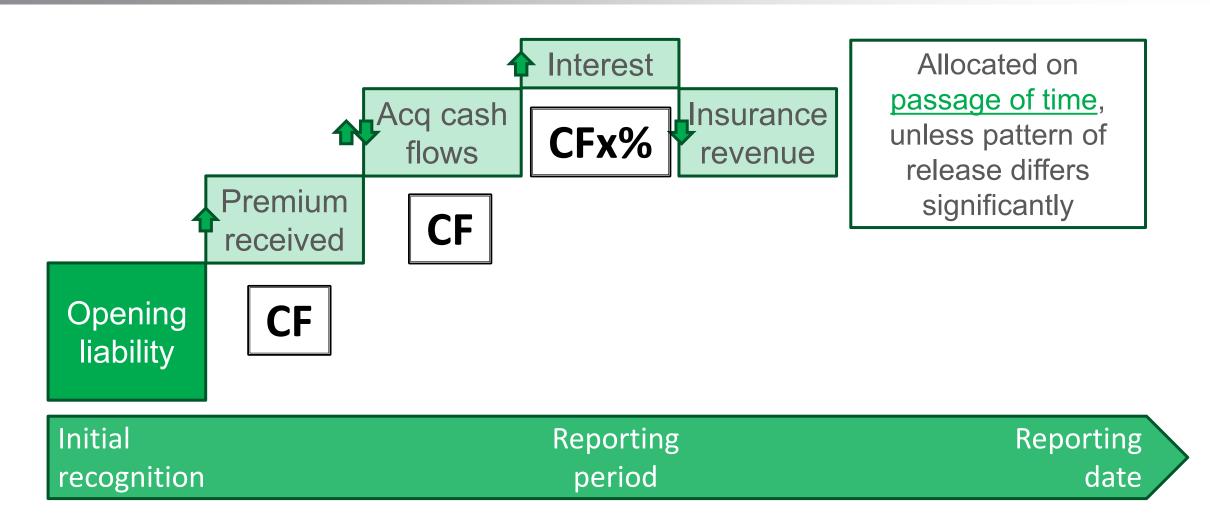
Other asset or liability derecognised

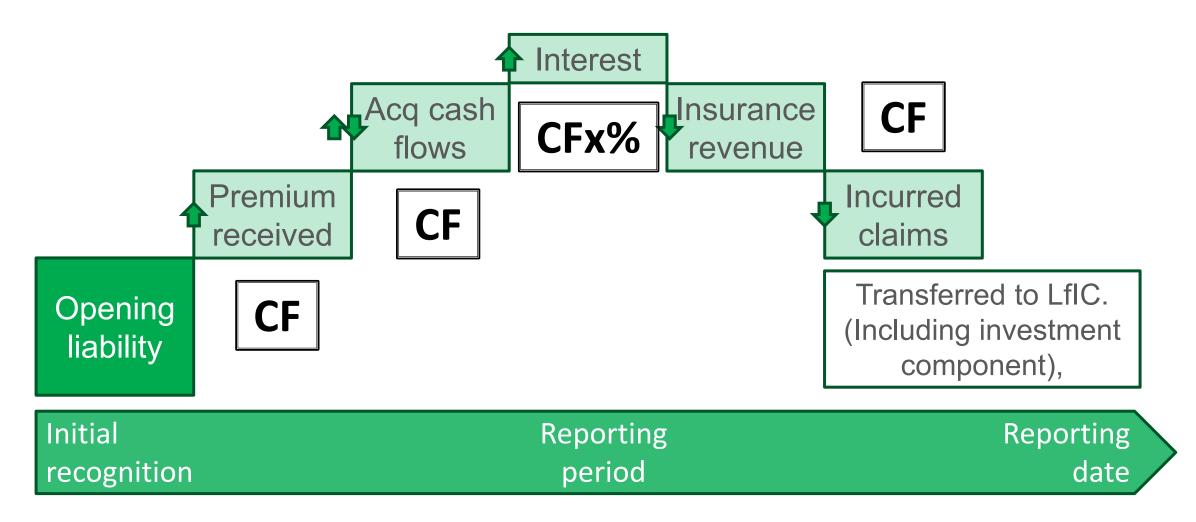
Initial liability

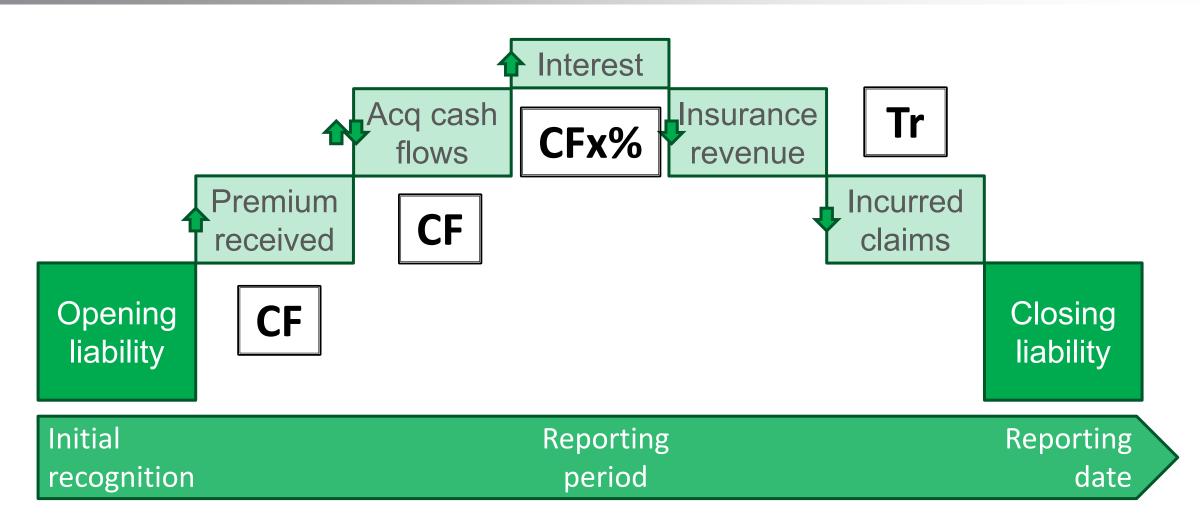










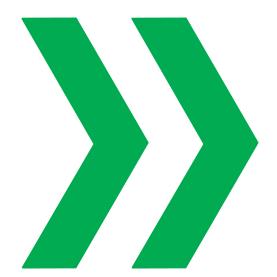




## IFRS 17 Programme Session 10

#### **Interpretations**

- IFRS 17 Transition Resource Group
- IFRS Interpretations committee



#### **IFRIC Committee**

# Due Process Interpretations Committee

#### Committee receives a question

Is matter widespread/expected to have a material effect?

Yes

Is it necessary to change IFRS Standards?

Yes↓

Can matter be resolved efficiently and is it sufficiently narrow in scope?

Yes

Narrow scope standard-setting (ie narrow scope amendment or Interpretation)

Discussed and approved by IASB



\* The publication of an agenda decision is subject to IASB not objecting to its publication

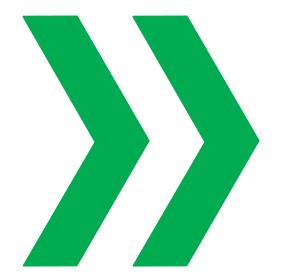
#### Transfer of benefits Agenda decision

#### » A method based on:

- » amount policyholder is able to validly claim meets the principle by:
  - » assigning quantity of benefits to periods entity has obligation to investigate and pay valid claims; and
  - » aligning quantity of benefits with amount validly claimable
- » the pv of future payments does not meet the principle because it:
  - » assigns quantity of benefits to periods for which the entity has no obligation to investigate and pay valid claims; and
  - » misrepresents quantity of benefits provided in a period.

#### Applying foreign currency to group of contracts Agenda decisions

- » Group of insurance contracts that generate cash flows in a foreign currency
- » Standard is not prescriptive, entity can either:
  - » Group contracts according to currency (easiest)
    - » Account for contract in its currency
    - » Then translate result, or
  - » Group contracts with mixed currencies
    - » Determine the CSM for each currency
    - » Then aggregate the CSM



### Transition resource group

#### Purpose of Transition Resource Group



Public forum for discussion of submitted questions

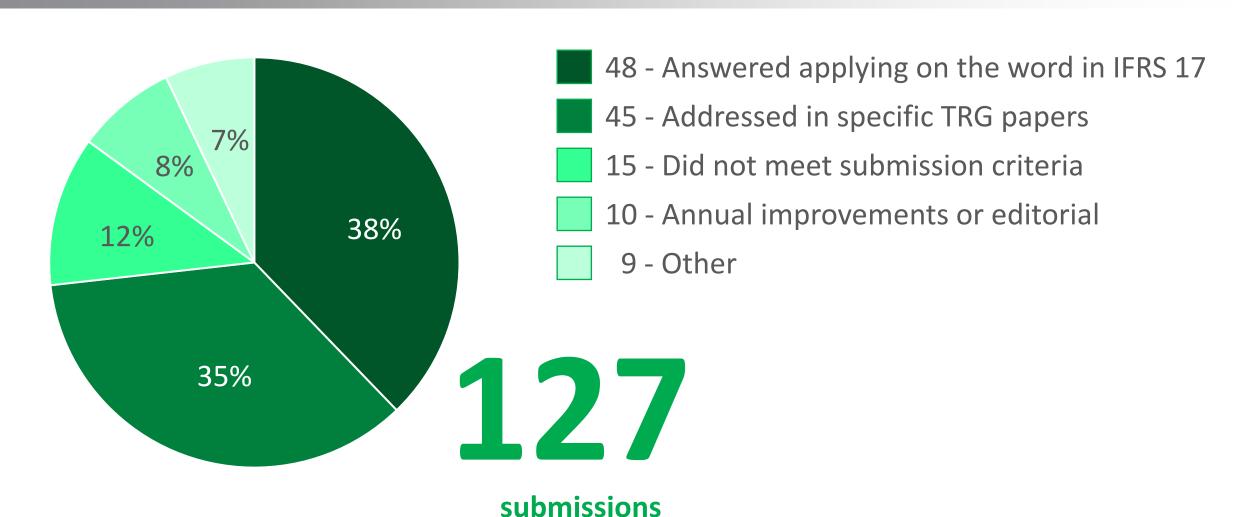
Helps companies to implement IFRS 17

Helps the Board to identify if more support is needed

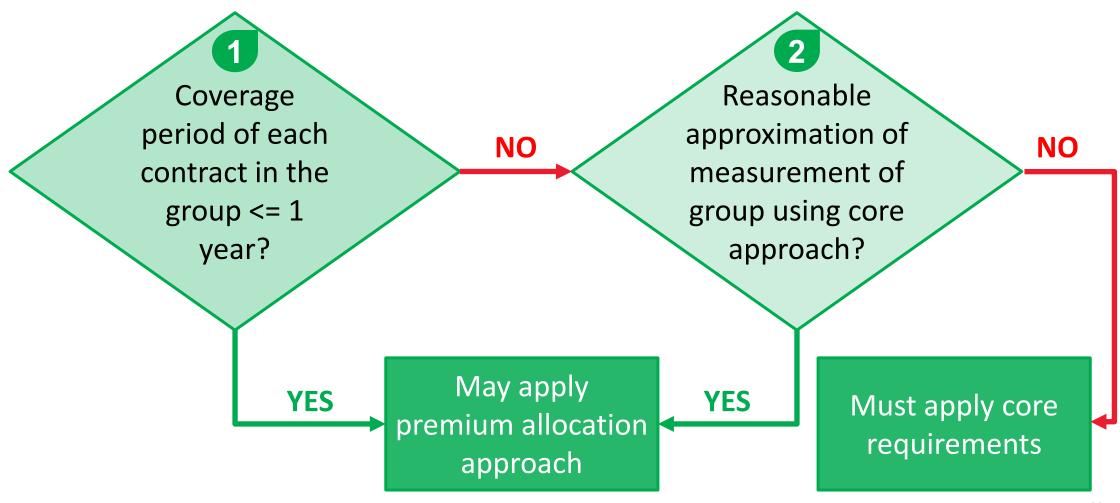
5 meetings held

Webcasts, papers and summaries available for each meeting

#### Overview of submissions received







## Example 1: Contract Boundaries

- » Entity issues a <u>whole life, stable premium</u> contract. Contract includes right to reprice individual contracts every year. Insurer is not however permitted to re-underwrite.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks

## Example 1: Contract Boundaries

- » Entity issues a <u>whole life, stable premium</u> contract. Contract includes right to reprice individual contracts every year. Insurer is not however permitted to re-underwrite.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks
- » Insurer can reprice to reflect risk However can't re-underwrite (ie can't test changed risk), most jurisdictions would not be able to price for risk therefore contract boundary is longer then 10 years
- » May depend on strength of regulator

## Example 2: Contract Boundaries

- » Entity issues 1 year health contracts. Insurer can be forced to renew yearly
  - 1. Insurer cannot reprice renewed contracts
  - 2. Insurer <u>cannot reprice individual repriced contracts</u>, but can fully reprice the portfolio each year
- » A substantive obligation ends when:
  - » practical ability to reprice reassessed risks; or
  - » both:
    - » practical ability to reprice portfolio reassessed risk; and
    - » reassessment pricing doesn't consider risks for periods after that date

## Example 2: Contract Boundaries

- » Entity issues 1 year health contracts. Insurer can be forced to renew yearly
  - 1. Insurer cannot reprice renewed contracts
  - 2. Insurer <u>cannot reprice individual repriced contracts</u>, but can fully reprice the portfolio each year
- » A substantive obligation ends when:
  - » practical ability to reprice reassessed risks; or
  - » both:
    - » practical ability to reprice portfolio reassessed risk; and
    - » reassessment pricing doesn't consider risks for periods after that date
- 1. Long boundary, 2. short boundary

# Example 3: Contract Boundaries

- » Entity issues one year vehicle insurance contracts. The insurer prices the contracts on the expectation that 90% of policyholders will renew. The insurer can fully reprice the contracts on renewal, but in practice only does so if it has specific information to indicate this is appropriate.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks

### Example 3: Contract Boundaries

- » Entity issues one year vehicle insurance contracts. The insurer prices the contracts on the expectation that 90% of policyholders will renew. The insurer can fully reprice the contracts on renewal, but in practice only does so if it has specific information to indicate this is appropriate.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks
- » Intent not relevant, it is whether has the right/obligation
- » Does not appear to have either, but is an obligation created by its practice?

# Example 4: Contract Boundaries

- » Entity issues 1 year motor vehicle contracts. If the policyholder remains claim-free for 3 years, the insurer will pay a premium rebate equal to 10% of gross premiums paid.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks

# Example 4: Contract Boundaries

- » Entity issues 1 year motor vehicle contracts. If the policyholder remains claim-free for 3 years, the insurer will pay a premium rebate equal to 10% of gross premiums paid.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks

Can the insurer cancel or reprice the contract at any point? This may depend on local consumer law.

# Example 5: Contract Boundaries

» Insurer issues a Funereal policy product. No underwriting occurs — everyone gets the same price. Insurer reprices every year but only for inflation. The same pricing is offered to new policies

# Example 5: Contract Boundaries

- » Insurer issues a Funereal policy product. No underwriting occurs everyone gets the same price. Insurer reprices every year but only for inflation. The same pricing is offered to new policies
- » One year contract. Although insurer does not reprice for underwriting., it doesn't do underwriting anyway. The price is the same as for a new customer.



# Expected future cash flows Control of premiums – PAA Approach

Insurers use ledger to control unpaid premiums. PAA Is cash only. Can ledger still be used as a control account?

# Expected future cash flows Control of premiums – PAA Approach

Insurers use ledger to control unpaid premiums. PAA Is cash only. Can ledger still be used as a control account?

Premiums receivable	X	
Insurance liability (LfRC)		X
Accounts for premiums from due date		
Cash received	X	
Premiums receivable		Х
Captures receipt of premium		

Yes. Above, premiums receivable recorded on same line of balance sheet as insurance liability (offset)

# Expected future cash flows Incurred but not reported

Please give an example of claims for events that have occurred but for which claims have not been reported. How they can be assessed?

# Expected future cash flows Incurred but not reported

Please give an example of claims for events that have occurred but for which claims have not been reported. How they can be assessed?

- » There is frequently a period that lapses between the occurrence of an event and the reporting of an event. So for example, many health insurers allow a period of 60 days between a treatment occurring and the submission of the related invoice.
- » An insurer typically uses historical data to estimate average daily claims and the average period between the event occurring and the submission of the invoice.

### Comparison to UPR

- » 12 month motor insurance contract
- » Single premium of 12 000, expect that service will be provided evenly over 12 month period:

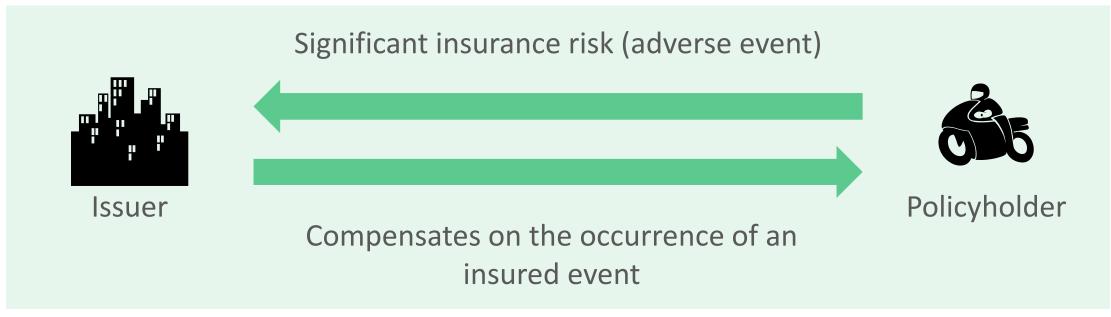
	UPR	PAA
Premium/Revenue	-12 000	-1 000
Transfer to UPR	11 000	-
Profit or loss	-1 000	-1 000
Cash	12 000	12 000
Insurance liability	-11 000	-11 000

### Comparison to UPR

- » 12 month motor insurance contract
- » 12 monthly premiums of 1 000, expect that service will be provided evenly over 12 month period:

	UPR	PAA
Premium/Revenue	-12 000	-1 000
Transfer to UPR	11 000	-
Profit or loss	-1 000	-1 000
Cash	1 000	1 000
Insurance premium receivable	11 000	-
Insurance liability	-11 000	-

#### What is an insurance contract?



- ⇔ IFRS 17 and IFRS 4—same definition
- ⇔ IFRS 17 two minor changes to guidance but no expected changes in assessments for majority of contracts
  - ⇔ No change from IFRS 4
  - ✓ Change from IFRS 4

### Definition of insurance Example: Longevity swap

- » Is a longevity swap based on a longevity index an insurance contract?
  Does the counterparty accept
  - » significant insurance risk by
  - » agreeing to compensate the policyholder if
  - » a specified uncertain future event adversely affects the policyholder

### Definition of insurance Example: Payment in kind

» Is a health contract that provides medical services at the issuer's hospital network an insurance contract?

Does the counterparty accept

- » significant insurance risk by
- » agreeing to compensate the policyholder if
- » a specified uncertain future event adversely affects the policyholder

### Definition of insurance Example: New for old

» Is a contract that replaces a damaged vehicle with a brand new vehicle an insurance contract?

Does the counterparty accept

- » significant insurance risk by
- » agreeing to compensate the policyholder if
- » a specified uncertain future event adversely affects the policyholder

### Definition of insurance Example: Annuity

- » Is an annuity contract an insurance contract?
  - Does the counterparty accept
  - » significant insurance risk by
  - » agreeing to compensate the policyholder if
  - » a specified uncertain future event adversely affects the policyholder

### Definition of insurance Example: Credit derivative

- » Is a credit derivative instrument an insurance contract?
  - Does the counterparty accept
  - » significant insurance risk by
  - » agreeing to compensate the policyholder if
  - » a specified uncertain future event adversely affects the policyholder

### Definition of insurance Example: A mutual

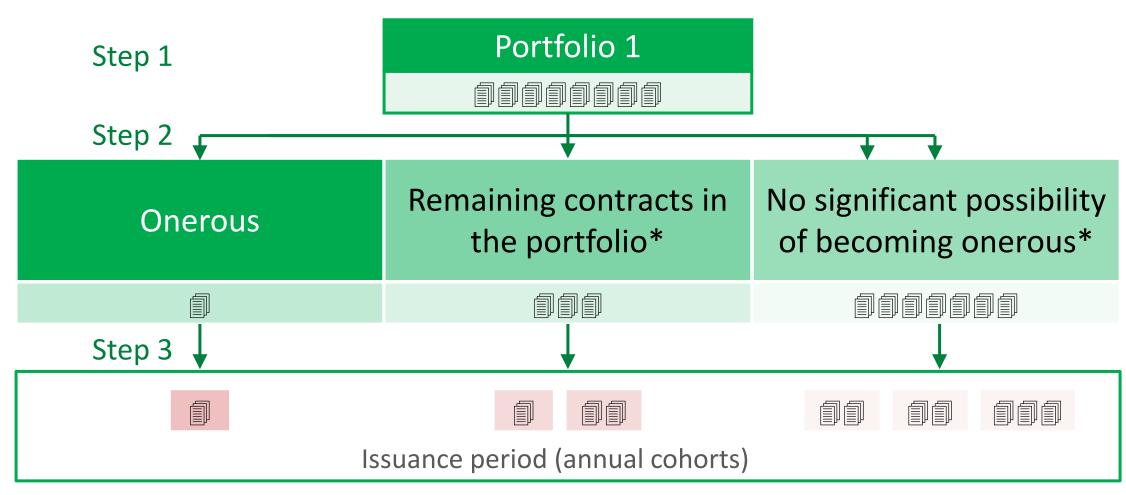
» Does a mutual entity accept insurance risk?

A mutual pools risk for the benefit of participants. It is a separate entity from the participants. It distributes first to those that submit valid claims but ultimately distributes the residual to policyholders.

Does the mutual accept

- » significant insurance risk by
- » agreeing to compensate the policyholder if
- » a specified uncertain future event adversely affects the policyholder

# How are contracts grouped? Step #3



<sup>\*</sup> At initial recognition, if any

# Why group contracts? Example

100 2 yr contracts: premium 50 pa, expect 2 contracts to claim 3 500 each year, all expected claims emerge day 1.

	Individual contracts	
Grouped	Profitable	Loss making
10 000	9 800	200
(7 000)	-	(7 000)
3 000	9 800	(6 800)
-	-	(6 800)
1 500	4 900	(6 800)
	10 000 (7 000) 3 000	Grouped Profitable  10 000 9 800  (7 000) -  3 000 9 800

Year 1 loss: (1 900)

# Why not group contracts? Example

2 product lines, car and house, car premium 5 000, expected claims 1 500, house premium 5 000, claims 5 500.

		Sub groups	
Whole contract	Grouped	Car	House
Share or premium	10 000	5 000	5 000
Claims	(7 000)	(1 500)	(5 500)
Cumulative Profit/loss	3 000	3 500	(500)
Day 1 Profit/(loss)	-	-	(500)
Year 1 Profit/(loss)	1 500	1 750	(500)

Year 1 profit: 1 250

# Why not group all similar contracts? *Example*

2 year car insurance, written **year 1**: premium 5 000, <u>actual</u> claims 750pa, **year 2** premium 5 000, <u>actual</u> claims 2 750pa.

	Grouped	Sub groups Year 2	
Whole contract	Year 2	Issue year 1	Issue year 2
Share or premium	5 000	2 500	2 500
Claims	(3 500)	(750)	(2 750)
Cumulative Profit/loss	1 500	1 750	(250)
Year 2 Profit/(loss)	1 500	1 750	(250)

Year 2 profit: 1 500

» A set of 100 vehicle contracts written in the same 12 month period. The entity expects that 5 policyholders will claim, but does not know which 5

- » A set of 100 vehicle contracts written in the same 12 month period. The entity expects that 5 policyholders will claim, but does not know which 5
- » The 100 contracts are a group; the company does not treat the 5 contracts as a separate group, either at issue or subsequently when the claims emerge

- » A company issues 500 vehicle contracts;
  - » 100 are issued to young drivers at a promotional rate
  - » 400 are priced normally
  - » The 500 contracts are otherwise identical.
  - » Insurer believes <u>profitable contracts will cover possible losses</u> on underpriced contracts

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- » Group A: <u>Under-priced contracts</u> (any losses are recognised immediately)
- » Group B: profits are recognised over the coverage period

In this example it will be 2 groups. The reason for splitting young drivers and normal drivers is the fact that contracts for young drivers are underpriced, isn't it? Are underpriced contracts onerous at initial recognition?

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#### Correct

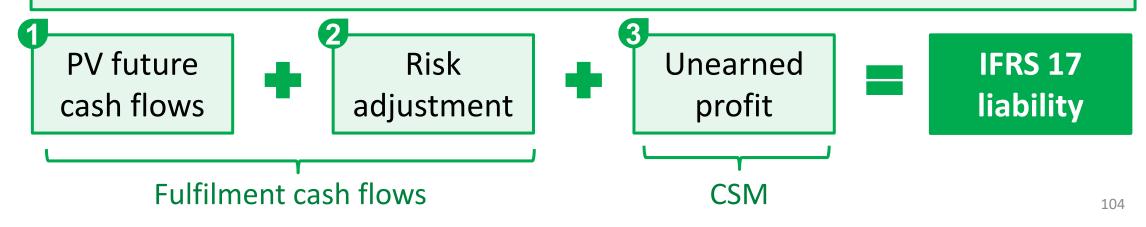
- » A company issues 500 vehicle contracts; by law it cannot discriminate based on gender
  - » 250 issued to male drivers under-priced relative to risk
  - » 250 issued to female drivers over-priced relative to risk
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  - » 250 issued to male drivers under-priced relative to risk
  - » 250 issued to female drivers over-priced relative to risk
  - » 500 contracts are otherwise identical.
- » The 500 contracts are a group; the regulatory requirement means the company does not have to split the contracts into two groups.

# Core Requirements 'Building block Approach'

All insurance contracts measured as the sum of:

- » Fulfilment cash flows (FCF)
  - 1. Present value of probability-weighted expected cash flows
  - 2. Plus an explicit risk adjustment for non-financial risk (eg insurance risk)
- » Contractual service margin (CSM)
  - 3. The unearned profit from the contracts



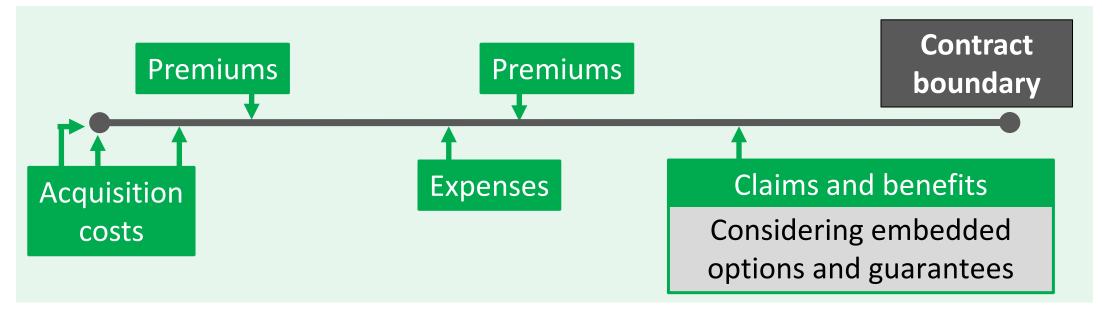
» IFRS 17 liability includes fulfillment cash flows and contractual service margin. So, they are elements of the carrying amount of the liability. Is it mean that initial carrying amount is = 0?

- » IFRS 17 liability includes fulfillment cash flows and contractual service margin. So, they are elements of the carrying amount of the liability. Is it mean that initial carrying amount is = 0?
- » Potentially. Risk adjusted present value of all cash flows plus the risk adjustment is exactly offset by the CSM, so that will often mean that the day one initial carrying amount is zero.
- » The first cash flow that occurs will result in that changing.
- » However sometimes the first cash flow happens before initial recognition which will mean that the day 1 is not zero

» But we should account(include) these liabilities in our accounting systems/books (reflect in our accounts), shouldn't we? And after initial recognition carrying amount will not = 0 because of regular adjustments/"amortization", isn't it?

- » But we should account(include) these liabilities in our accounting systems/books (reflect in our accounts), shouldn't we? And after initial recognition carrying amount will not = 0 because of regular adjustments/"amortization", isn't it?
- » Correct. The day one carrying amount is adjusted for at least:
  - » Actual cash flows
  - » Changes in expectations
  - » Unwinding of discount rates

» Current estimate of future cash flows in contract boundary



- » Probability weighted and unbiased
- » Stochastic modelling for financial options and guarantees, where relevant

» Cash flows should include probability-weighted estimate (ie expected value) of the future cash flows. Should we "weight" both – cash inflows and cash outflows? Should we define/use ALL or the most probable scenarios?

- » Cash flows should include probability-weighted estimate (ie expected value) of the future cash flows. Should we "weight" both cash inflows and cash outflows? Should we define/use ALL or the most probable scenarios?
- » Probability weighting should be applied to both inflows and outflows. It is not necessarily necessary to weight all scenarios, but the weighted scenarios should be representative and should not exclude any significant scenarios.
- » B37 to B40 provide guidance

» Should we include subsequent expenses (e.g. administrative, salary of our personnel) in fulfillment cash flows? Should we reassess them subsequently?

- » Should we include subsequent expenses (e.g. administrative, salary of our personnel) in fulfillment cash flows? Should we reassess them subsequently?
- » Yes, to the extent that they that relate directly to the fulfilment of the contract.
- » B65 of the standard has a list of what must be included, eg B65(h) includes policy administration and maintenance costs.
- » B66 contains a a list of what must not be included eg. B66(d) excludes cash flows relating to costs that cannot be directly attributed such as training costs.

If a company wants to include some administrative costs into fulfilment cash flows, but its sum can be estimates approximately, should it do it at the initial recognition and then adjust it, if needed, or adjust the fulfillment cash flows when the sum can be defined accurately after initial recognition.

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An insurance company is required to include certain expected admin cash flows (see B65).

This will always be a 'best estimate' like most future cash flows, and must be updated at each reporting period.

- » Entity issues a <u>whole life, stable premium</u> contract. Contract includes right to reprice individual contracts after ten years. Insurer is not however permitted to re-underwrite.
- » A substantive obligation ends when:
  - » the insurer has the practical ability to reassess risks of a policyholder and can set/reset price or benefits to fully reflects those risks

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- » Insurer can reprice to reflect risk However can't re-underwrite (ie can't test changed risk), most jurisdictions would not be able to price for risk therefore contract boundary is longer then 10 years
- » May depend on strength of regulator

- » Entity issues 1 year health contracts. Insurer can be forced to renew yearly
  - 1. Insurer cannot reprice renewed contracts
  - 2. Insurer <u>cannot reprice individual repriced contracts</u>, but can fully reprice the portfolio each year
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  - » both:
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- 1. Long boundary, 2. short boundary

- » Entity issues one year vehicle insurance contracts. The insurer prices the contracts on the expectation that 90% of policyholders will renew. The insurer can fully reprice the contracts on renewal, but in practice only does so if it has specific information to indicate this is appropriate.
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- » If IFRS 17 higher, no action required (regulator considers 'higher of').
- » If IFRS 17 reserve is lower, then insurer:
  - Must typically 'top up' prudential requirements; and
  - <u>Can</u> create an IFRS equity reserve for difference between IFRS 17 reserve and prudential reserve.

Are regressive payments from third parties (guilty driver on the auto insurance) included in fulfillment cash flows?

Are regressive payments from third parties (guilty driver on the auto insurance) included in fulfillment cash flows?

It reduces the expected net pay-out of claims, so it is modelled as part of claims experience in Liability for remaining coverage. Once a claim is incurred, then the net expected claim is 'transferred' to Liability for incurred claims.



IFRS 17 has no restrictions on the size of expected Salvage and subrogation (S&S) flows. Should S&S be calculated using the same approach as other components of FCF?

Reasonable to require that S&S not exceed outgoings?

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Reasonable to require that S&S not exceed outgoings?

» No. Typically not expected that recovery cash flows exceed claim cash flows, but if they do <u>and</u> insurer can retain surplus, that should be captured

IFRS 17 permits the recognition of S&S as a separate asset. When is S&S a separate asset, and when is it FCF?

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- » Typically remain FCF until all obligations to policyholder satisfied. If S&S still not settled <u>and</u> policyholder has no further rights, then consider recording as a separate asset
- » Some ambiguity in scope definitions of IFRS 9 and IFRS 17. Some argue IFRS 9 should apply if a contract right exists
- » In practice, both approaches are being applied



Premium taxes/VAT are included in FCF when FCF is recognized. When due, FCF decreases, and IT is not considered to be insurance revenue.

So when premium taxes/VAT are deducted from LRC, do we have the postings as: DT LRC – CR Cash?

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## Present value of future cash flows Acquisition costs

Acquisition costs may after initial recognition. Can it be adding new contracts to a group of contracts? Should we estimate such future acquisition cash flows at initial recognition?

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- » This is an expected future cash flow,
- » It is (likely) directly related to the insurance contract
- » So like other expected future cash flows:
  - » it is estimated at initial recognition
  - » And included in the initial measurement of FCF

# Expected future cash flows Boundary

Should we include subsequent expenses (e.g. administrative, salary of our personnel) in fulfillment cash flows? Should we reassess them subsequently?

## Expected future cash flows *Boundary*

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Cash flows should include probability-weighted estimate (ie expected value) of the future cash flows. Should we "weight" both – cash inflows and cash outflows? Should we define/use ALL or the most probable scenarios?

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## Expected future cash flows Loans to policyholders

How are loans to policyholders accounted for?

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### How are loans to policyholders accounted for?

Journals	Debit	Credit
FCF (Decrease in future benefits)	X	
Cash Paid		X
Accounting for advanced loan (Note: If decrease in benefits not equal to loan, there may also be an experience adjustment)		
FCF (Expected repayment of loan)	X	
FCF (Increase in future benefits)		X
Accounting for expected future repayments		

# Expected future cash flows Loans to policyholders

How are repayments of loans accounted for?

# Expected future cash flows Loans to policyholders

#### How are repayments of loans accounted for?

Journals	Debit	Credit
Cash received	X	
FCF (Expected repayment of loan)		X

Receipt of cash reduced the amount of future cash to be received (consistent with FCF elsewhere)



Available observable discount rate yield curve is shorter then the duration of some insurance products

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- » Some jurisdictions have considered a comply or explain approach. Under this approach, the regulator
  - » publishes a risk-free curve
  - » Entities are allowed to deviate from the curve, but if they do so, they must explain in their financial statements why it is considered appropriate to do so



Discount rates: Should (or can) we use one single rate for discounting all cash flows from the contract or number of rates? Should (or can) we use one rate for discounting of cash flows from all contracts within one group?



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- » In theory, you should should use a different rate for each set of cash flows that have different risk characteristics (so for example, you could use a risk free rate for the claims assumptions, a rate for premiums that considers policyholder credit risk, etc.
- » However, IFRS 17 envisages the use of a 'blended' rate, or a risk free rate that can be applied to all flows (see for eg B77)



For the recognition of finance expenses – do we use the same rate (defined at initial recognition) for each period during the all "life" of contract or the rate is reassessed each period?

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» Interest rate curves are reset at the end of each period to reflect market consistent views at that point in time.



## Risk adjustment

Can/must you use the regulatory risk adjustment?



#### Can/must you use the regulatory risk adjustment?

- » IFRS 17 defines RA as 'the compensation the entity requires for bearing the uncertainty'.
- » Entity specific measure and provides some latitude
- » Many have concluded regulation does establish RA, because prudential requirements are a constraint of doing business
- » However, this does require that entity explicitly consider these requirements when considering appropriateness of pricing



### Contractual service margin

When the insurance contract is recognized, any other asset or liability previously recognized should be derecognized through correcting CSM?

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» Correct. See examples on next slides

# Core model Journals

» Expect premium 2 500, claims 1 500, risk 150, interest 0%,

Journals	Debit	Credit
FCF (PV of future all cash flows)	1 000	
FCF (Risk margin)		150
CSM		850
Initial recognition of an insurance contract		

## Core model Journals

» Expect premium 2 500, claims 1 500, risk 150, interest 0%, pre-contract expenses of 200

Journals	Debit	Credit	
Prepaid expenses asset	200		
Cash Paid		200	
Prepaid expenses cash flow (before contract recognised)			
FCF (PV of future all cash flows)	1 000		
Prepaid expense asset		200	
FCF (Risk margin)		150	
CSM		650	
Initial recognition of an insurance contract			



For example, insurance companies use clinics and pharmacies. If bills are paid before recognition of insurance contract, should prepaid expense be recognized and included in CSM when the insurance contract recognized?

### Contractual service margin

For example, insurance companies use clinics and pharmacies. If bills are paid before recognition of insurance contract, should prepaid expense be recognized and included in CSM when the insurance contract recognized?

» To the extent that the prepaid expense qualifies an asset (or liability), and would have been recognized FCF applying IFRS if incurred after recognition, then the asset/liability must be collapsed into CSM when insurance contract is recognized (see IFRS 17.38(c)(ii) and B66A).

## Contractual service margin Interest accretion

The discount rate determined at initial recognition is used to accrete interest on CSM. Does this mean that no matter how many contracts I will add to the group and what ever else happens to the group, the discount rate will always be the same?

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- » The locked in rate is based on the average rate over the period new contracts are added (see B73: To determine the discount rates at the date of initial recognition of a group of contracts an entity may use weighted-average discount rates over the period that contracts in the group are issued).
- » The rate stops being adjusted when no new contracts are added.



# Present value of future cash flows Changes

Where do we recognize changes in estimates of the future cash flows?

# Present value of future cash flows Changes

#### Where do we recognize changes in estimates of the future cash flows?

- » Changes in estimates of future cash flows are recognized by:
  - » adjustment to Fulfilment cash flows, and
  - » A corresponding change to unearned profit (CSM) if there is CSM available, otherwise adjust profit and loss
- » Note you can 'rebuild' CSM.
- » Change in expected future cash flows changes FCF and CSM, and usually has a net zero impact on total liability
- » But note also experience adjustments (changes to current)



**Experience adjustments on premiums.** If expected premiums weren't received (and don' relate to future services), do we decrease insurance revenue?

### Experience adjustments

**Experience adjustments on premiums.** If expected premiums weren't received (and don' relate to future services), do we decrease insurance revenue?

Yes, with a caveat.

- » If an entity does not receive a premium expected,
- » but expects to receive that premium in a future period,
- » then it does not adjust insurance revenue.



### Contract Liability or asset

IFRS 17.78 states that insurance contracts may be assets or liabilities. When will an insurance contract be an asset?

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IFRS 17.78 states that insurance contracts may be assets or liabilities. When will an insurance contract be an asset?

At initial recognition, the total would typically be zero (CSM offsets fulfilment cash flows).

Thereafter, it depends on the order of cash flows.

- » If a premium is paid first then the it becomes a liability (policyholder has fulfilled their obligation, but insurer hasn't).
- » However, if eg acquisition cash flows are first, then asset (Insurer has fulfilled part of obligation, policyholder not)