

Thank you for joining us – the webinar will start shortly



June 3rd, 2020 11am ET / 4pm BST





Your panel



Erik Pickett Webinar chair

Head of Product, Club Vita



Julie Belair Panelist

Vice President,
Actuarial Services
and Plan Policy,
OPTrust



Richard Brown

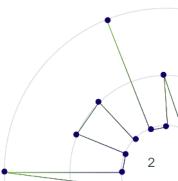
Panelist

Chief Operating
Officer,
Club Vita Canada



Steven Baxter **Panelist**

Head of Innovation and Development, Club Vita





Research paper details





https://www.clubvita.us/collaborative-research/public-vs-private-is-there-a-sector-effect-in-post-retirement-mortality-us



https://www.clubvita.co.uk/collaborative-research/public-vs-private-is-there-a-sector-effect-in-post-retirement-mortality-1



https://clubvita.ca/Collaboration/Research





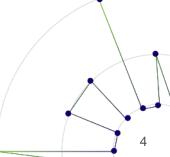


Summary of findings

Public vs Private

- 1. There is a large diversity of pension plans within both the private and public sectors.
- 2. Studies showing different longevity patterns between the sectors are heavily affected by the specific plans analyzed.
- 3. Socioeconomic factors other than sector are better for capturing this diversity. And once you control for these factors, sector has little effect on longevity.



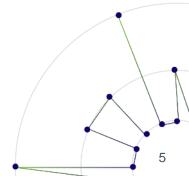




Agenda

- 1. History of public sector / private sector mortality
- 2. Case study: OPSEU Pension Plan
- 3. Capturing diversity
- 4. Analyzing sector effects



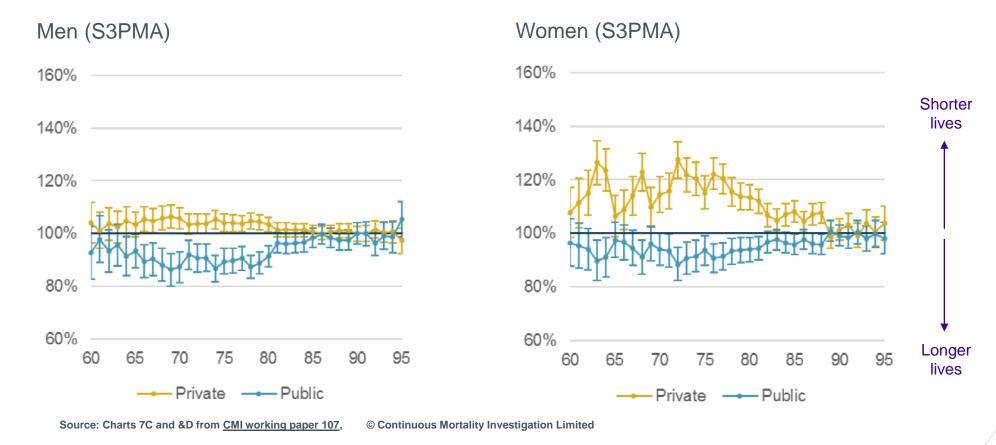






UK evidence: Continuous Mortality Investigation

CMI working paper 107



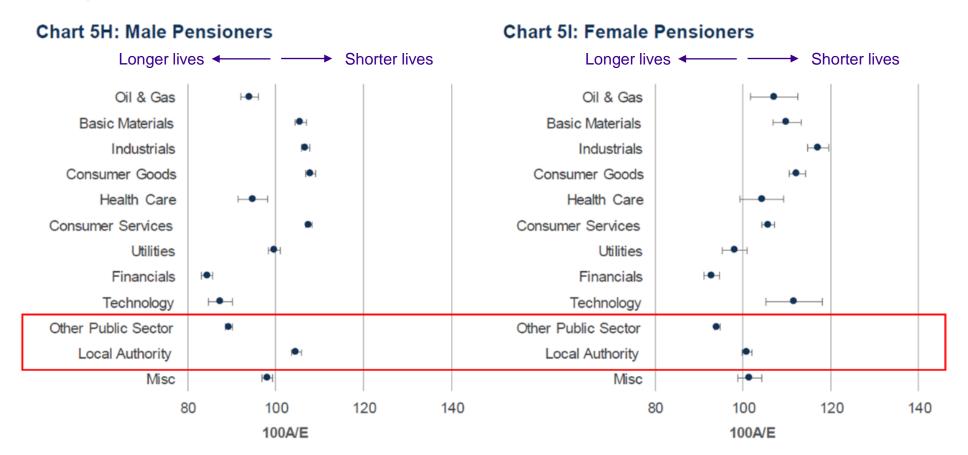


On average people live longer in the public sector



UK evidence: Continuous Mortality Investigation

CMI working paper 113



Source: CMI working paper 113 © Continuous Mortality Investigation Limited. The chart shows the relative weight of mortality rates for different industries in the CMI data set compared with rates expected from their S3 SAPS tables.



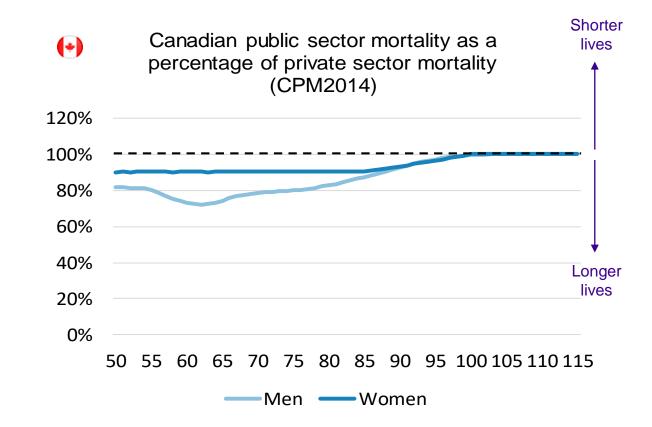
...some public sector plans have longer lives, some have shorter lives

Canadian evidence: Canadian Institute of Actuaries

Canadian Institute of Actuaries split public and private sector data for their 2014 Canadian Pensioners' Mortality (CPM) study due to:

- the significant difference in mortality experience between the sectors; and
- the lack of availability of other factors beyond pension amount.

The development of the CPM tables involved reweighting data to try to counteract disproportionate representation of certain sectors/industries in the underlying data.



Source: Mortality ratios relate to the CIA's public sector (CPM2014Publ) and private sector (CPM2014Priv) amounts based tables.



"On average people live longer in the public sector"

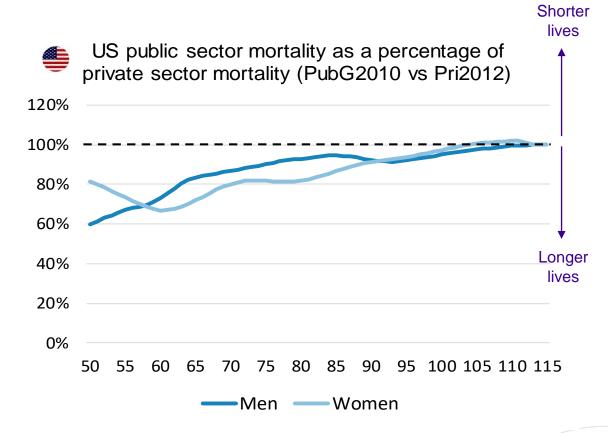


US evidence: Society of Actuaries

The Retirement Plans Experience Committee decided to split out public sector data from the RP2014 analysis of pension plan mortality for the following reasons:

- Gender differences: Age-specific male-to-female mortality ratio too different
- Amounts differences: Differences in benefit profiles
- Age-based differences: Different experience under age 65
- No collar information was submitted for the public plans

Separate data sets used for Pri2012 and Pub2010



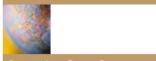
Source: Mortality ratios relate to "General" public sector (PubG-2010) rolled up from 1 July 2010 effective date to 1 January 2012 to be consistent with Pri-2012. In both cases amounts based tables for healthy retirees used.



"On average people live longer in the public sector"

US evidence: academia





CENTERfor at BOSTON COLLEGE

DOES MORTALITY DIFFER BETWEEN PUBLIC AND PRIVATE SECTOR WORKERS?

By Alicia H. Munnell, Jean-Pierre Aubry, and Geoffrey T. Sanzenbacher*

INTRODUCTION

Defined benefit plans pay pension benefits from retirement until death. Thus, the longer workers live, the higher the expense for the plan. On average, states and localities assume their workers will live slightly than longer private sector workers.1 This brief asks a simple question: do state and local workers actually live longer on average than their private sector counterparts? If so, why?

The discussion proceeds as follows. The first section explains the nature and limitations of the available data - the National Longitudinal Mortality Study. The second section presents the percentage of public and private sector workers ages 55-64 who died within and the Census Bureau. The NLMS links demoeither an 11-year period or a separate 6-year period after being interviewed. The third section uses regression analysis to assess how various factors impact the likelihood of dying. The final section concludes that public sector workers - especially women - do live

*Alicia H. Munnell is director of the Center for Retirement Research at Boston College (CRR) and the Peter F. Drucker Professor of Management Sciences at Boston College's Carroll School of Management. Jean-Pierre Aubry is assistant director of state and local research at the CRR. Geoffrey T. Sanzenbacher is a research economist at the CRR.

longer than their private sector counterparts and that most of the difference can be explained by the higher education levels of public sector workers

THE NATIONAL LONGITUDINAL MORTALITY STUDY

The analysis uses the National Longitudinal Mortality Study (NLMS) to analyze public versus private sector mortality. This study is sponsored by the National Institute on Aging, the Center for Health Statistics, to death certificates, providing a way to study how a person's characteristics may relate to his death.

More specifically, the data in this brief come from a publicly available version of the NLMS - the NLMS Public Use Microdata Sample (NLMS PUMS) - which

Search for other publications on this topic at: crr.bc.edu

Conclusion

The public sector takes care to align its mortality assumptions to the mortality experience of its members. In practice, this alignment results in assumptions that public sector workers live slightly longer than private sector workers. The data in the NLMS PUMS seem to support this idea – especially for women. The explanation for this lower mortality turns out to be relatively simple: the public sector tends to employ more educated workers on average than the private sector, and these workers are less likely to die over a given period. After controlling for education, the rates of mortality between public and private sector workers are comparable.

Munnell et al, 2015

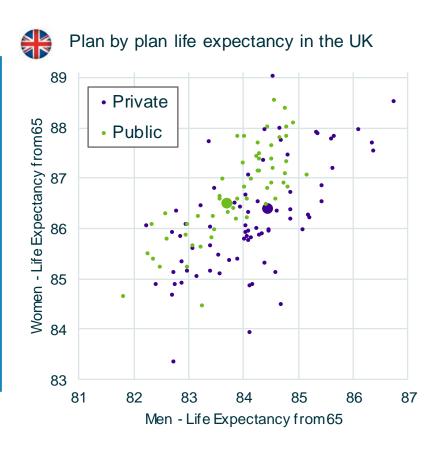
Controlling for socioeconomic factors removes apparent public/private difference.

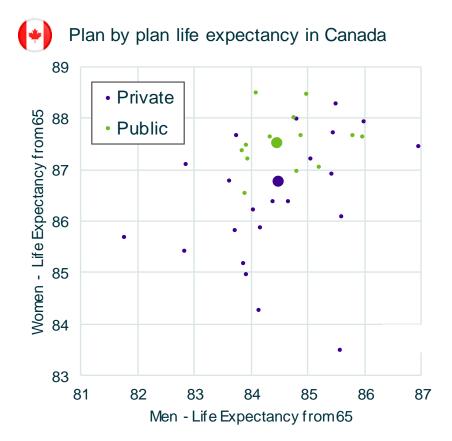




UK and Canadian evidence: Club Vita









Large diversity between different plans

Conclusion: difference in average life expectancy depends on the plans in your data set





About OPSEU Pension Plan and OPTrust





A defined benefit and jointly sponsored pension plan

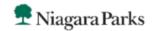




Over 96,000 members



Almost \$22 billion in net assets















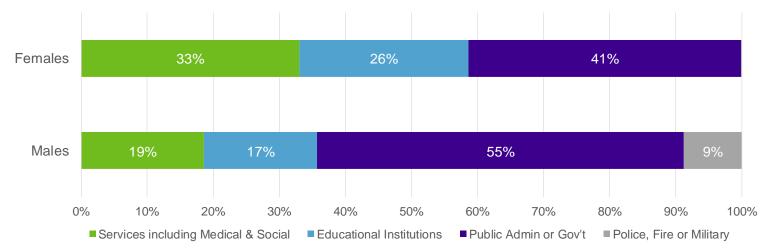




All public sector workforces are not the same

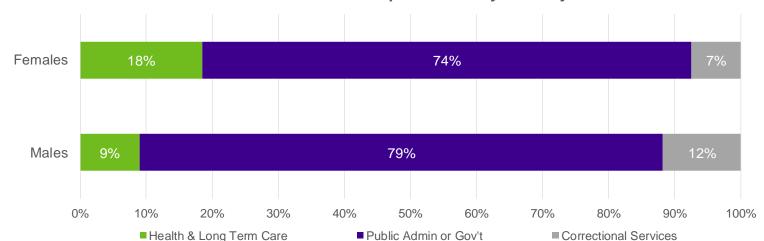


CPM Public

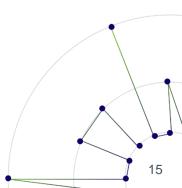


Distribution of OPTrust pensioners by industry

OPTrust

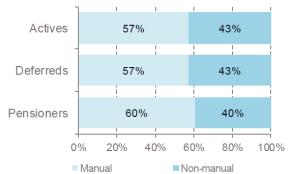




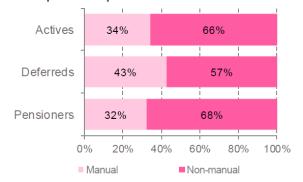


Occupation and affluence profile

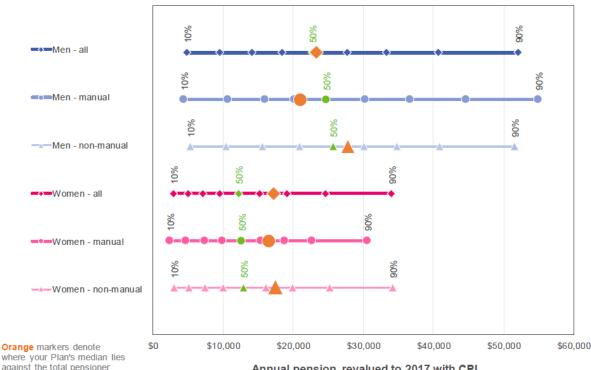




Occupation profile - female members



Distribution of annual pension in payment (All pensioners excluding survivors, revalued to 2017)



Annual pension, revalued to 2017 with CPI

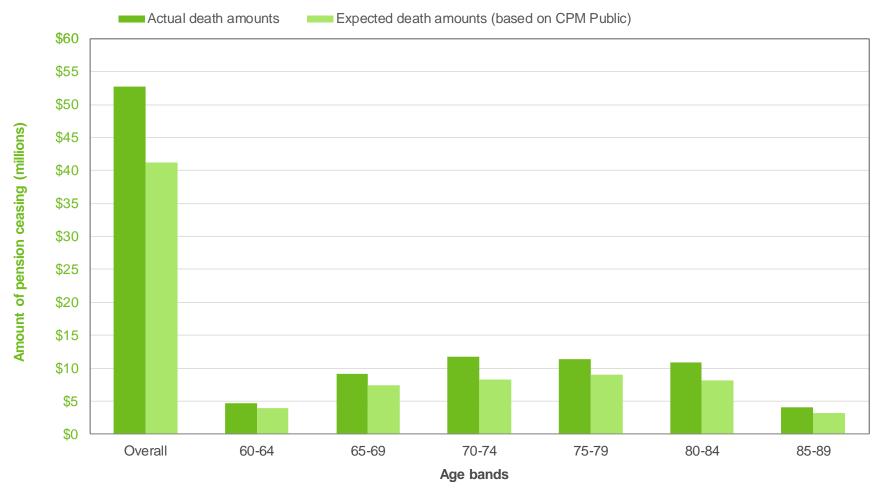
Fairly heavily weighted toward manual (i.e., blue collar) occupations with average pension income level for men and slightly above average for women

■◆■Men - all



CPM Public mortality expectations not representative

Plan experience over five years to December 31, 2017 split by age group

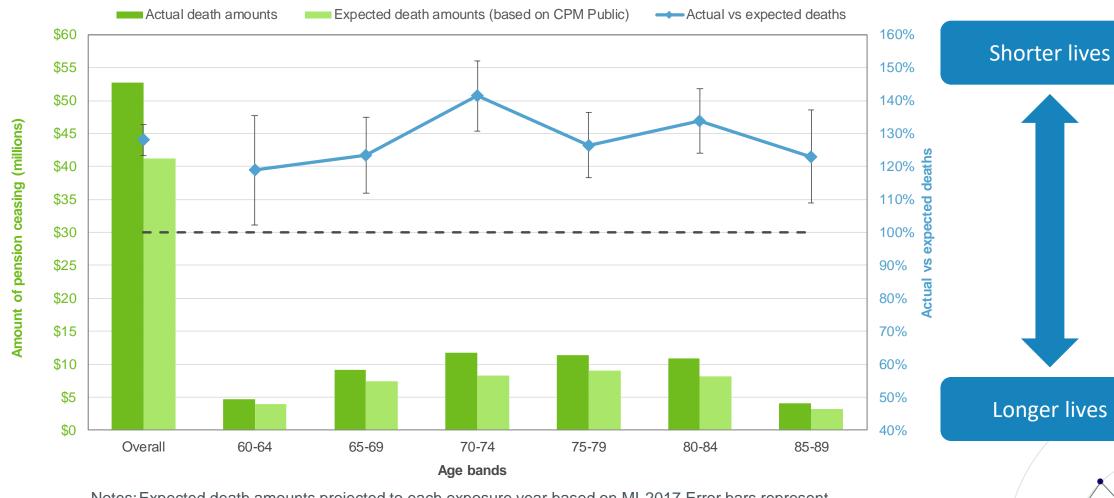






CPM Public mortality expectations not representative

Plan experience over five years to December 31, 2017 split by age group

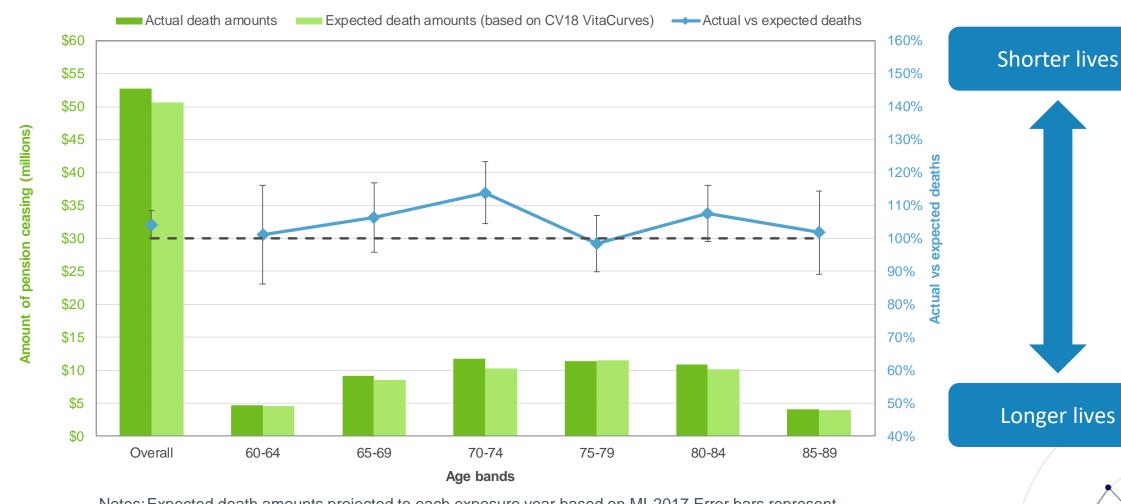




Notes: Expected death amounts projected to each exposure year based on MI-2017. Error bars represent 95% confidence intervals.

Mortality expectations after incorporating membership profile using VitaCurves

Plan experience over five years to December 31, 2017 split by age group





Notes: Expected death amounts projected to each exposure year based on MI-2017. Error bars represent 95% confidence intervals.



What affects how long people live?





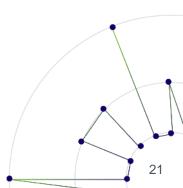












VitaCurves baseline model







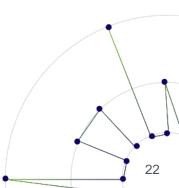






Generalized Linear Modeling used to calculate the effect of each factor on longevity

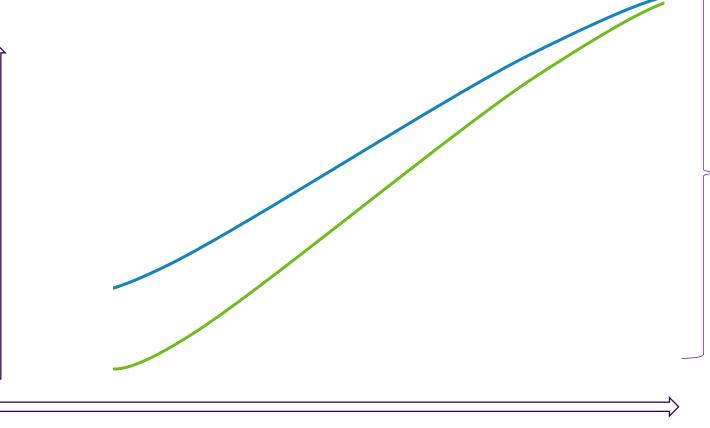




Generalized Linear Model (GLM)

Chance of dying over next year

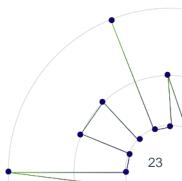
Transformed onto a "log" or "logistic" scale so broadly linear with age



Fit curves to across different combinations of affluence, postal code, occupation etc...
simultaneously

Maximises the predictive power of the data







Developing an international longevity currency

The importance of each of the factors is remarkably similar in each of our countries



| | | | † (| | i 4 | |
|------------------------|-------------|--------|------|-------|------|--------|
| Total spread | 12 y | ears 📥 | 10 y | rears | 91/2 | ears 📥 |
| Gender specific spread | 10½ | 81/2 | 7 | 71/2 | 81/2 | 61/2 |
| Retirement health | 2½ | 3 | 1/2 | 2 | 1 | 1 |
| "Normal health" spread | 8 | 5½ | 6½ | 6 | 71/2 | 6 |
| Lifestyle | 41/4 | 4½ | 23/4 | 3½ | 31/4 | 31/2 |
| Affluence | 3½ | 1/2 | 2 | 2½ | 31/4 | 1½ |
| Occupation | 1/4 | 1/2 | 11/4 | <1/4 | 11/4 | 1 |



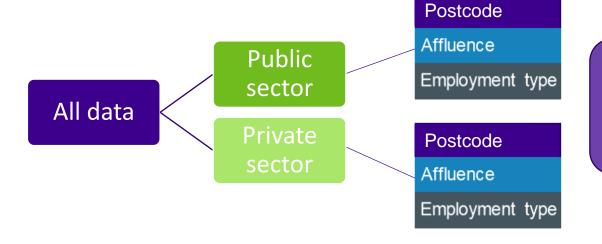
Effects shown are the impact of changing one rating factor in isolation. Precise impacts depend on order of changing variables and so above reflects broad quantum and therefore relative importance of each variable. Sums may not add due to rounding.



Capturing the sector effect

Two ways to introduce public/private sector into Club Vita approach:

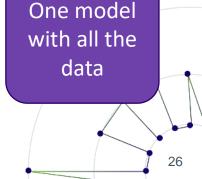
• Split the data ("stratify")



Two models, half the data each

 Introduce public/private as an extra variable ("covariate")





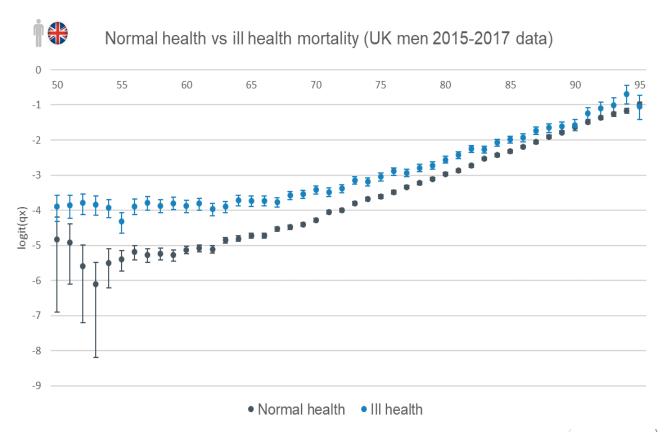


Should we split the data?

Reasons to split the data (stratify):

Fundamental difference in meaning of predictors

2. Fundamental differences to shape of mortality curves (e.g. disabled versus normal health)

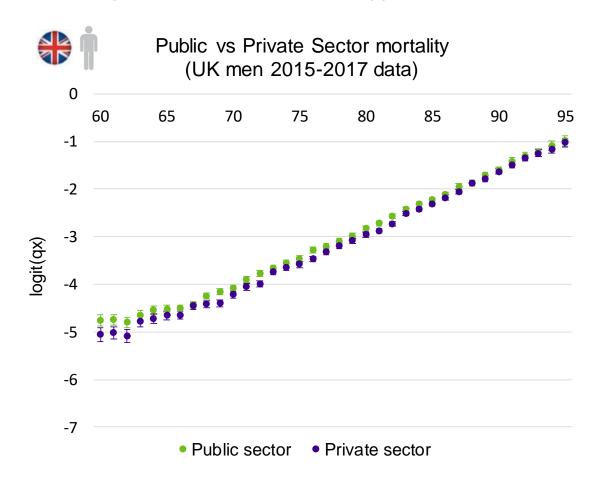


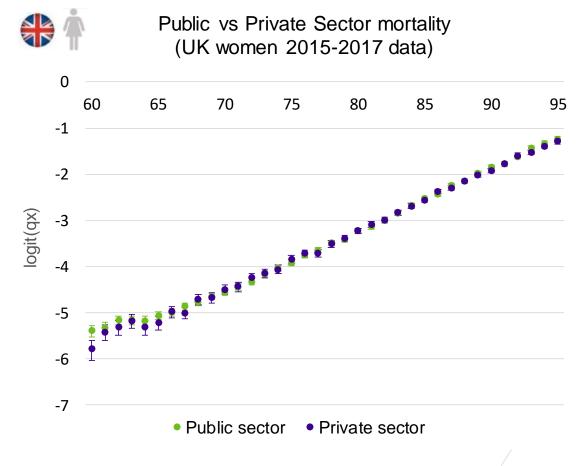
Source: Crude mortality rates with 95% confidence intervals, 2015-2017 Club Vita data





General shape of mortality with age No fundamental difference between public & private



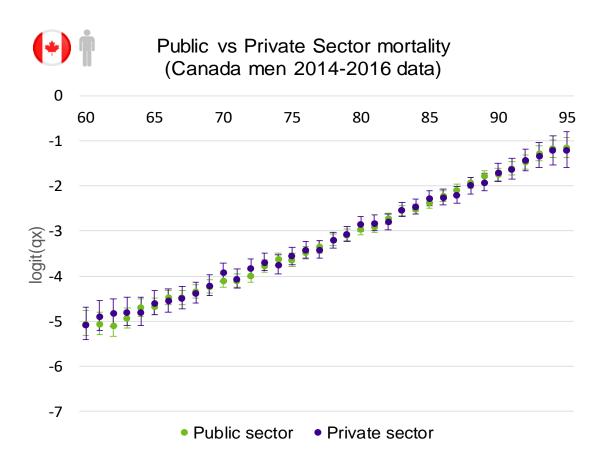


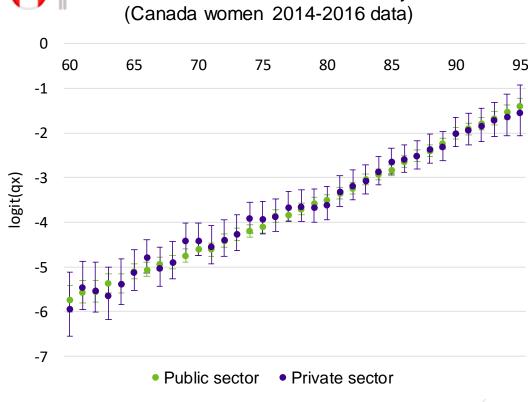


Source: Crude pensioner mortality rates with 95% confidence intervals, 2015-2017 normal health (UK)



General shape of mortality with age No fundamental difference between public & private

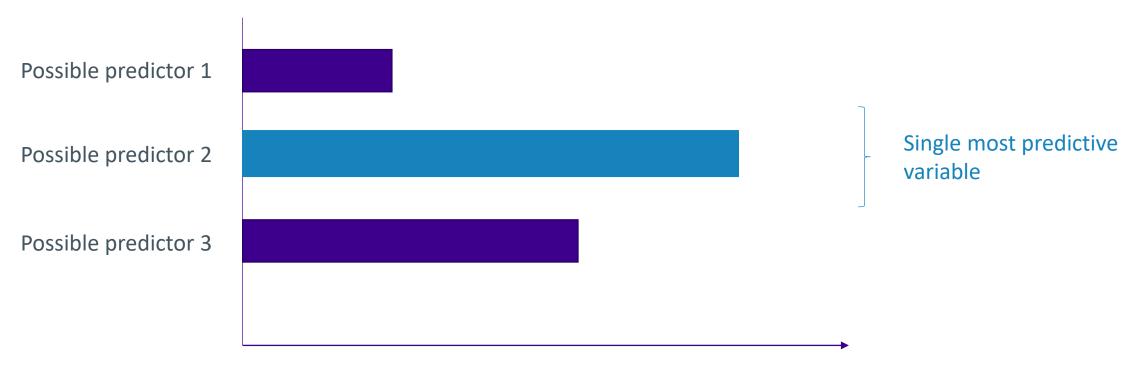




Public vs Private Sector mortality



Should we add sector as a "covariate"?

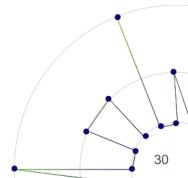


Improvement in **AIC** versus having no predictors

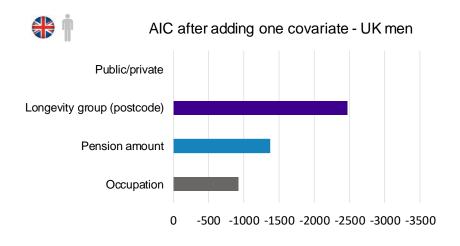


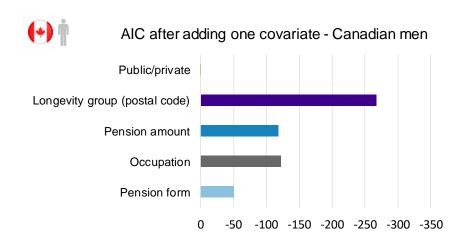
A statistical measure of how well model fits the data (observed deaths) with a *penalty* which prevents spurious complexity

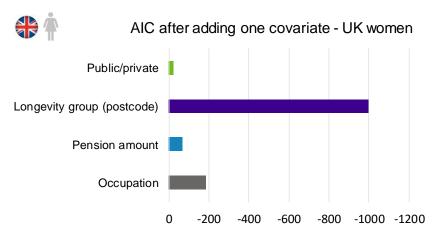


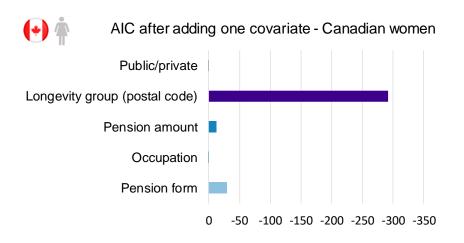


Should we add sector as a covariate?



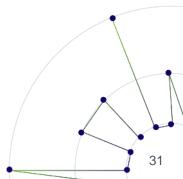




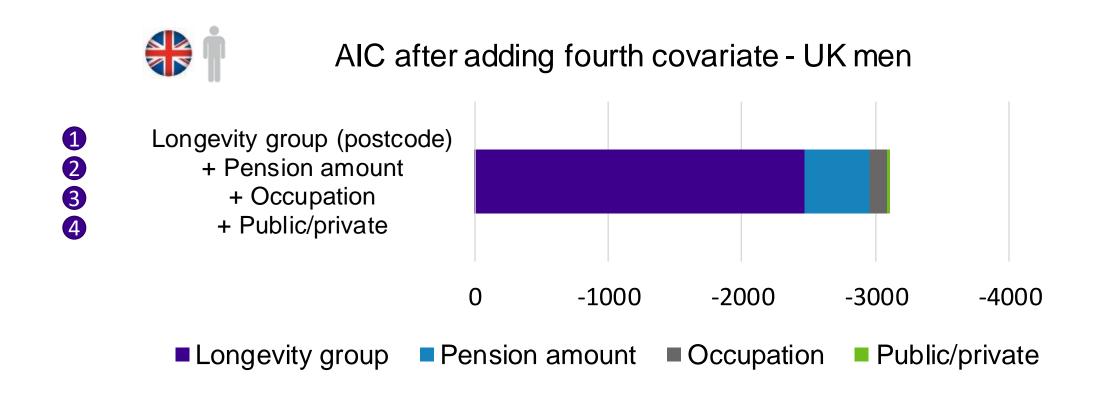




Longevity group (postcode) by far most predictive Public/private sector has very little benefit on its own

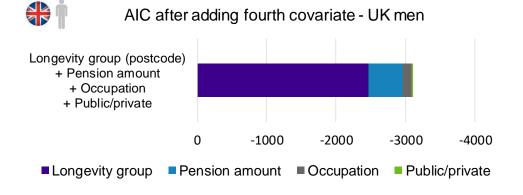


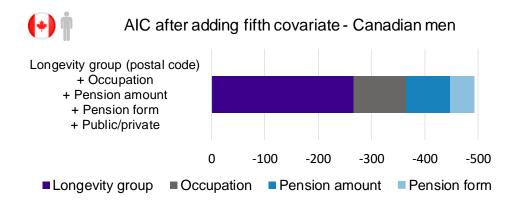
Should we add sector as a covariate?

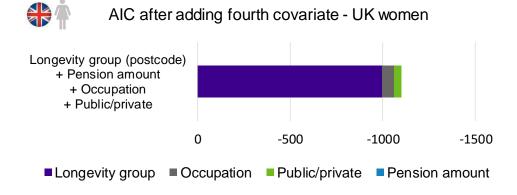


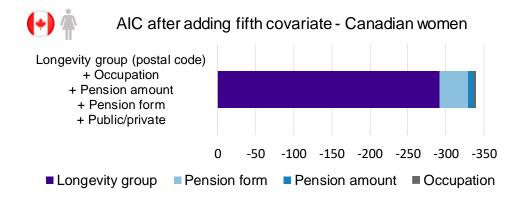


Should we add sector as a covariate?









UK men, Canadian men and Canadian women: Sector adds little to no benefit UK women: Sector adds some marginal benefit



Summary of findings

Public vs Private

- 1. There is a large diversity of pension plans within both the private and public sectors.
- 2. Studies showing different longevity patterns between the sectors are heavily affected by the specific plans analyzed.
- 3. Socioeconomic factors other than sector are better for capturing this diversity. And once you control for these factors, sector has little effect on longevity.









Questions?





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https://clubvita.ca/Collaboration/Research









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