



# The COVID-19 Pandemic: Insights and Implications for Insurers

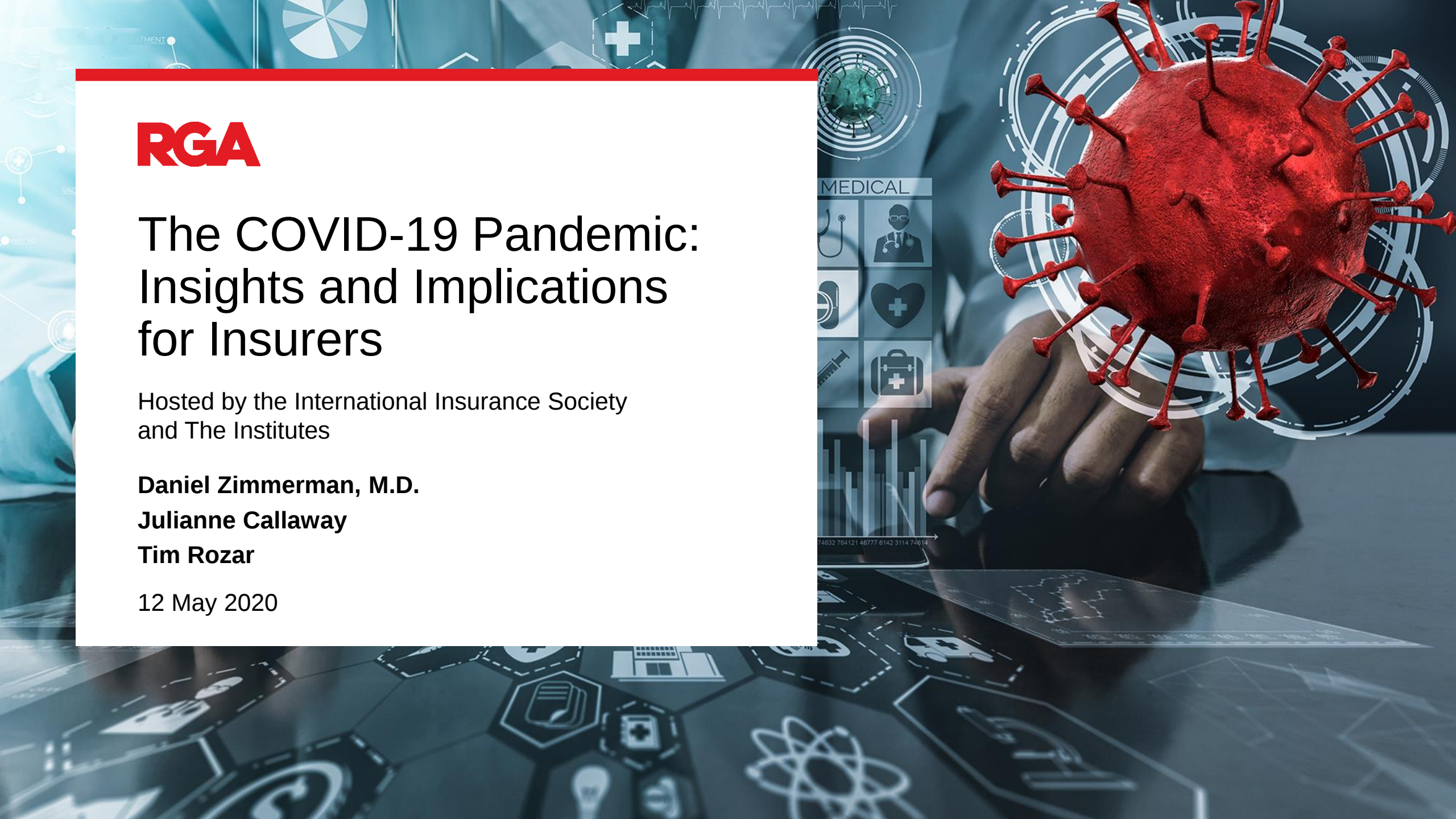
Hosted by the International Insurance Society  
and The Institutes

**Daniel Zimmerman, M.D.**

**Julianne Callaway**

**Tim Rozar**

12 May 2020



# Agenda

## Opening Remarks

**Michael J. Morrissey**, President and Chief Executive Officer, International Insurance Society (IIS)

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## The Medical View

**Daniel Zimmerman, M.D.**, Senior Vice President and Chief Medical Director, Global Support Team

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## Research Highlights

**Julianne Callaway**, Vice President and Actuary, Strategic Research

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## A Look to the Future

**Tim Rozar**, Senior Vice President, Chief of Staff to the CEO

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## Q&A

**Michael J. Morrissey**, President and Chief Executive Officer, International Insurance Society (IIS)



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# The Medical View

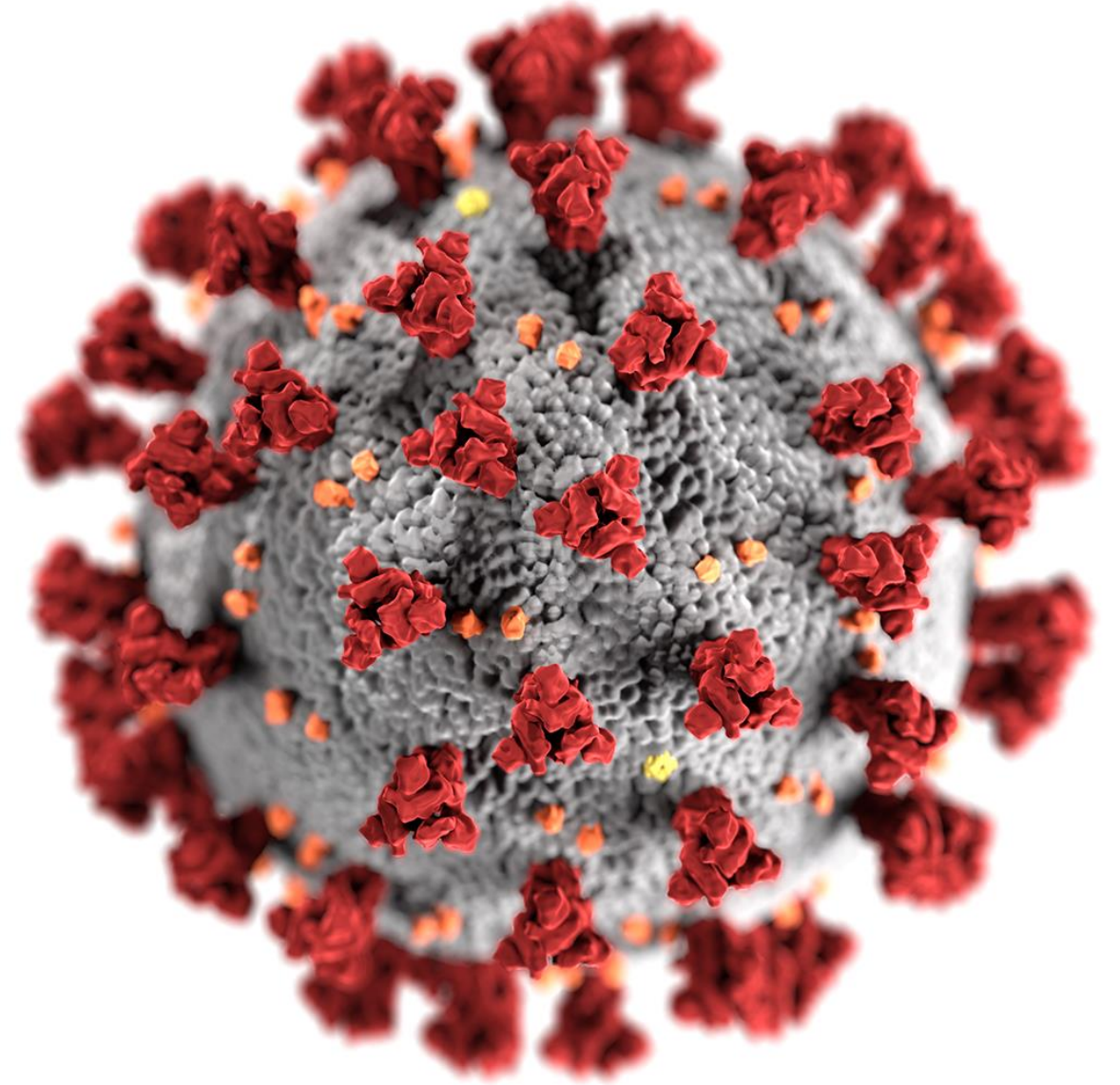
**Daniel Zimmerman, M.D.**

*Senior Vice President and Chief Medical Director,  
Global Support Team*



# The Medical View

- Epidemiology and Trends
- Prevention
- Clinical Manifestations
- Treatment
- Recovery and Immunity



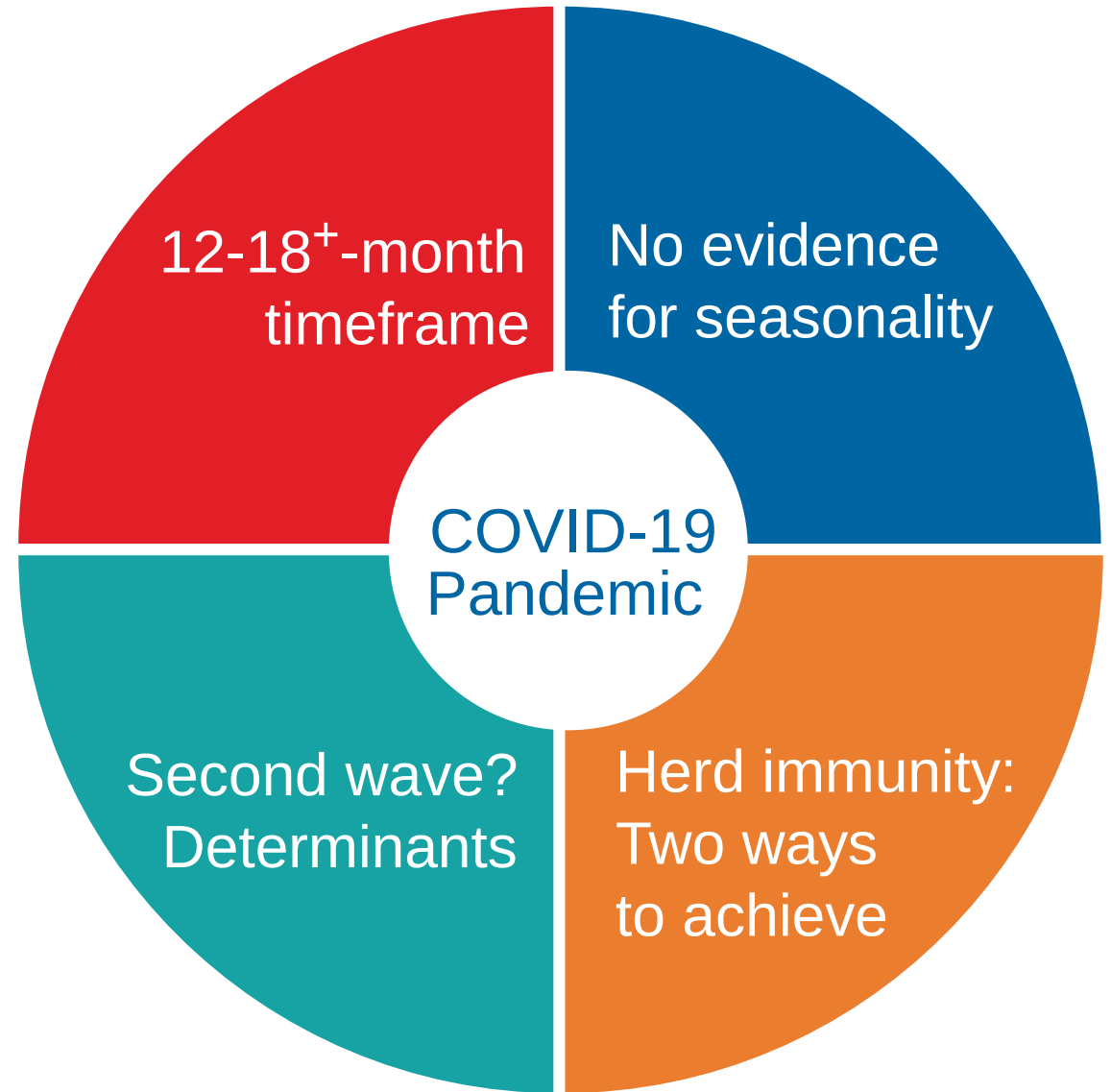
# Epidemiology and Trends

## Terminology

**SARS-CoV-2** – the name of the virus

**COVID-19** – the name of the disease caused by the virus

- Impact of social distancing
  - Differing strategies: Sweden
- Opening-up strategies
  - Testing and contact tracing
  - “Suppress and lift”
  - Mobile phone apps



# Prevention

- Masks and face coverings
- Social distancing
- BCG vaccine – protective?

## Coalition for Epidemic Preparedness Innovation

- Created in 2017
- Stimulate and accelerate the development of vaccines against emerging infectious diseases and enable access to these vaccines for people during outbreaks
- Moving quickly to rapidly develop vaccines against COVID-19
- [www.cepi.net](http://www.cepi.net)

## Vaccine update

- Leveraging prior research
- Accelerating the timeline – collaboration
- Many candidate vaccines and strategies\*
- Safety and efficacy
- Long-term protection needed
- Older individuals – immune response
- Mass production
- Acceptance of vaccine by people?

\*virus, viral vector, nucleic acid, protein-based

<https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/coronavirus-vaccine/art-20484859>

# Clinical Manifestations

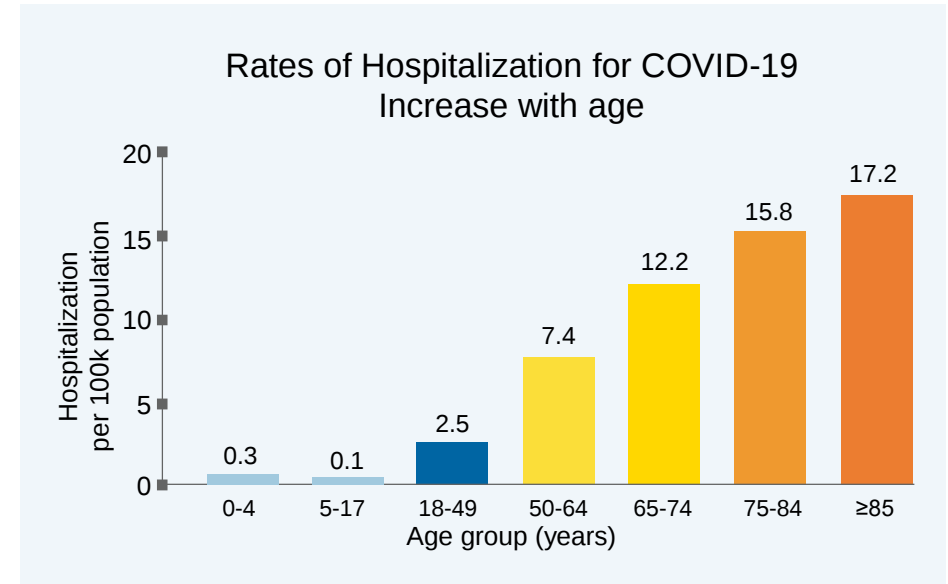
## Risk factors for serious disease

- Age 65 and older
- People in nursing home or LTC facility
- Chronic lung disease
- Serious heart conditions
- Immunocompromised
- Certain cancers
- Obesity, BMI >30
- Diabetes
- Chronic kidney disease
- Liver disease

## Unexpected consequences

- Kidney failure requiring dialysis
- Cardiac “injury”
- Neurological symptoms including stroke
- Abnormal clotting of blood
- Liver damage
- Children with emerging inflammatory condition

## Rates of hospitalization increase with age



CDC – adapted from U.S. Government Image – MMWR 17 Apr 20

# Treatment

Remdesivir  
Convalescent plasma  
Other antivirals  
Azithromycin  
Monoclonal/polyclonal antibodies  
Hydroxychloroquine and  
chloroquine (antimalarials)  
Stem cells and other cells

- Use caution when reviewing and interpreting results of clinical trials

## ***Longer Life Foundation***

RGA collaboration with Washington University  
in St. Louis School of Medicine

Cutting-edge research

[www.longerlife.org](http://www.longerlife.org)

LinkedIn/Twitter

Novel technologies being employed: cloning of SARS-CoV-2 proteins in human cells to identify how they interact to identify druggable targets

# Recovery and Immunity

A very complex issue...

## More questions than answers!

- What is the correlation between resolution of symptoms and length of viral shedding?
- Could there be long-term health consequences in those who recover from COVID-19?
- Are antibodies protective?
- What if someone has a low or undetectable level of antibody?
- Is there a risk of reinfection?
- What is the quality of antibody tests now available?
- Will it be possible to issue “immunity certificates”?



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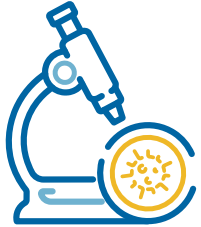
# Research Highlights

**Julianne Callaway, FSA, ACAS, MAAA**  
*Vice President and Actuary, Strategic Research*



# Challenges

Evolving landscape of data and expert guidance



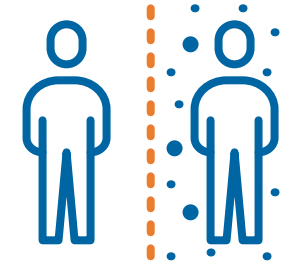
## Procedural Changes

- Limiting tests to hospitals
- Counting probable cases and deaths, not just confirmed



## Under-/Overcounting

- Only counting hospitalized COVID-19 deaths
- Dying from another cause while also having COVID-19



## Government Interventions

- Societal changes impact mortality experience
- These changes impact expert model projections

# Research Approach



## Wide-Ranging Expertise

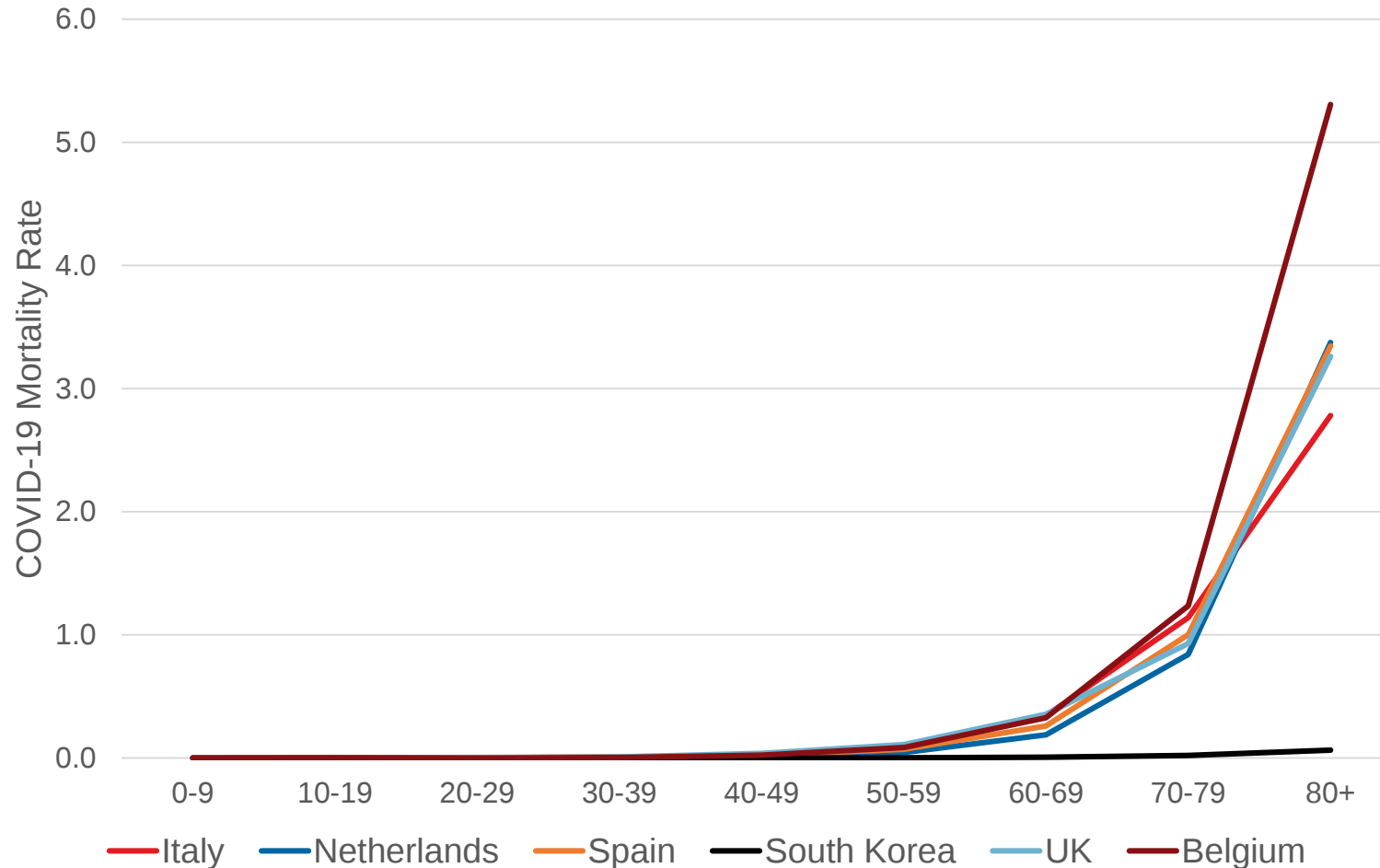
- Epidemiological
- Actuarial
- Advanced analytics



## Data

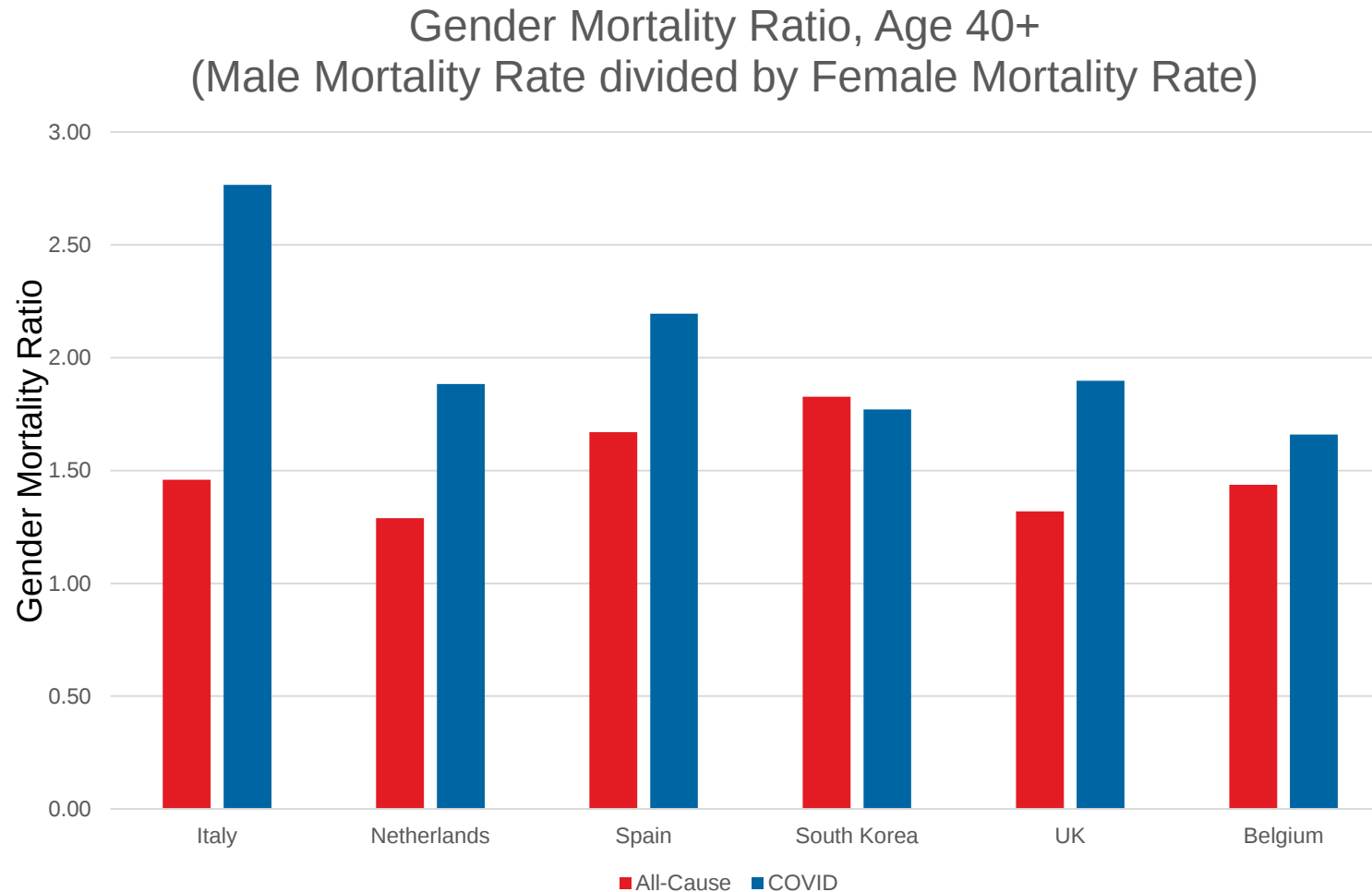
- Government data
- Academic institutions
- Scientific literature

# COVID-19 Mortality Rate by Age for Select Countries



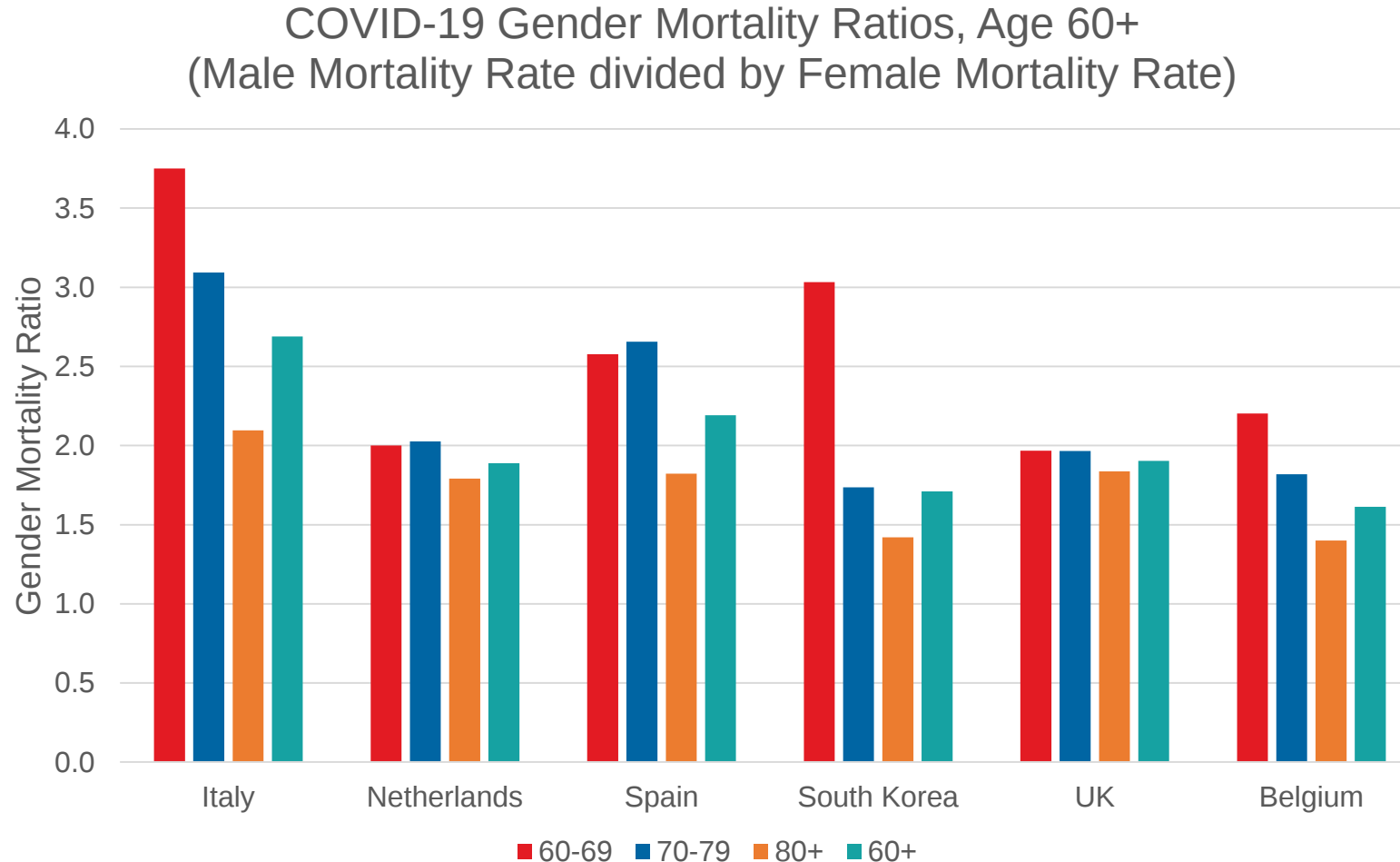
- The COVID-19 mortality rate is much higher (roughly 20 times greater) for people over age 60 compared to those under age 60
- The age shape of COVID-19 mortality experience is very different from that of previous pandemics

# All-Cause and COVID-19 Mortality Differences by Gender



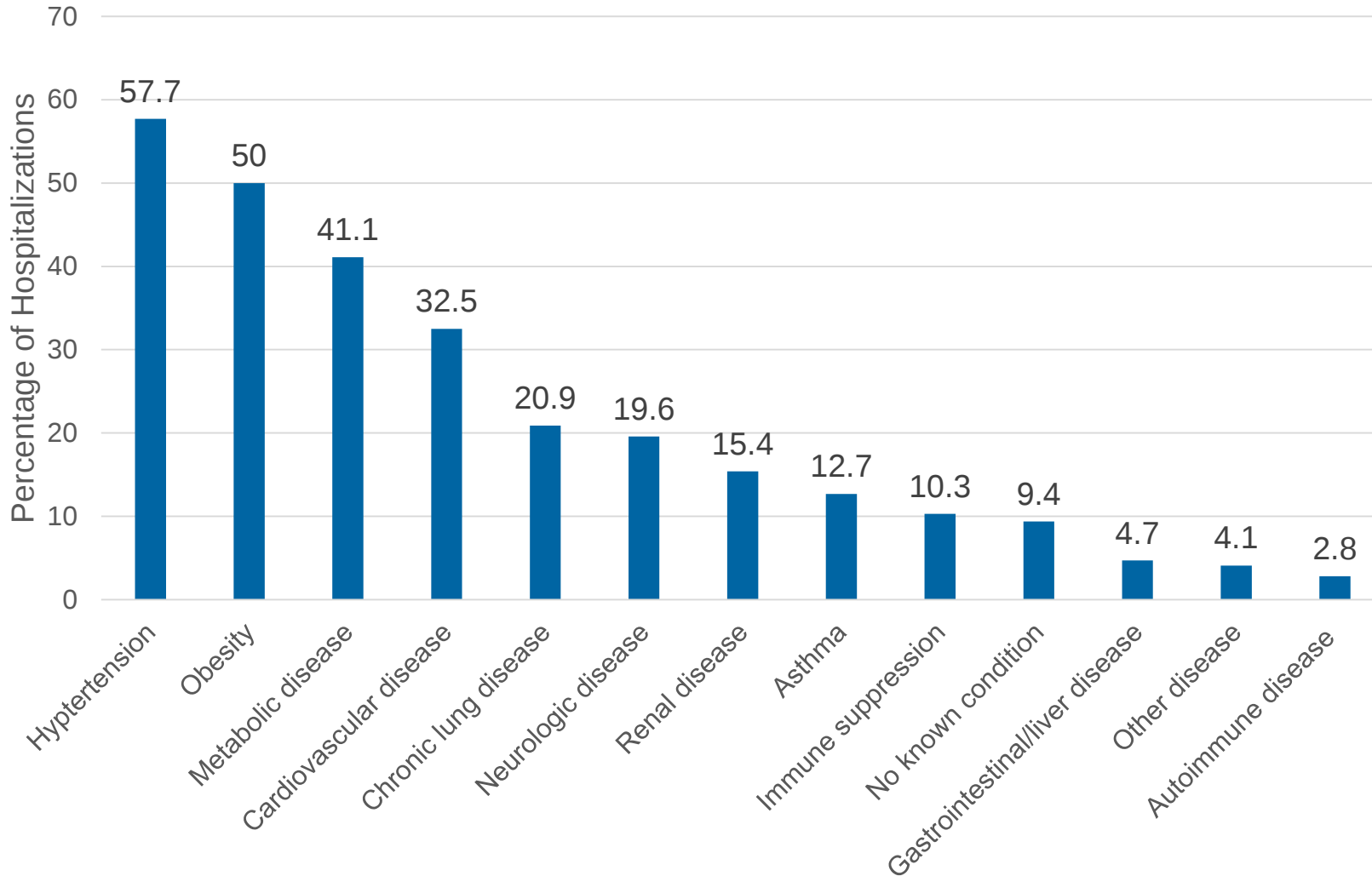
- The COVID-19 Gender Mortality Ratio (GMR) is generally higher than the all-cause GMR, suggesting that there is a bigger sex differential in COVID-19 than in all-cause mortality
- Possible explanations for worse male COVID-19 experience:
  - Lifestyle
  - Behavioral
  - Biological

# COVID-19 Gender Mortality Ratios by Age Group



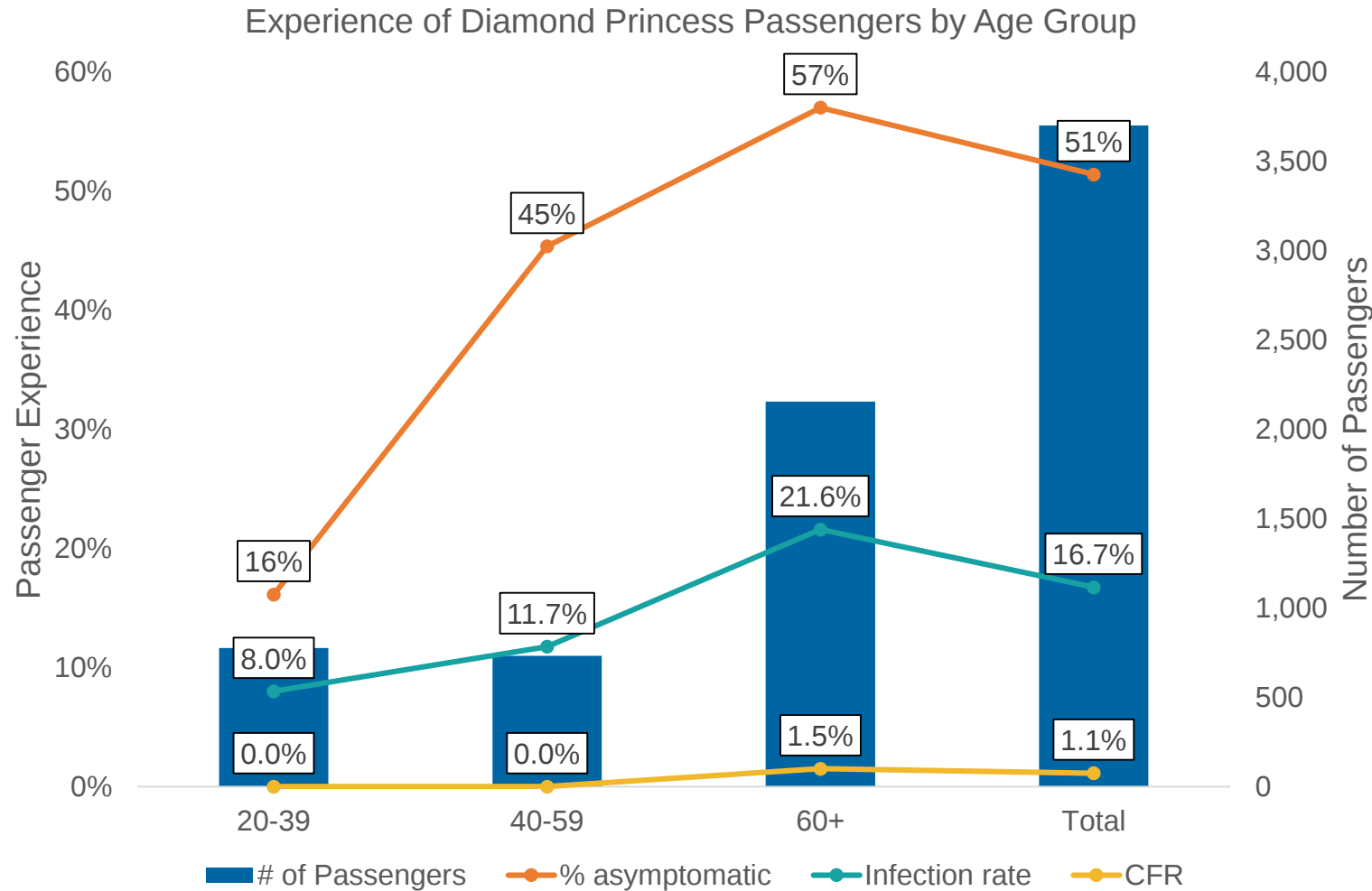
- Male COVID-19 mortality experience is typically about twice the COVID-19 mortality experience of females
- The differences are more pronounced at ages 60-69 than at older ages

# U.S. COVID-19 Hospitalizations with Underlying Medical Conditions



- According to the U.S. CDC, the majority of COVID-19-related hospitalized patients have an underlying medical condition
- Nearly 90% of COVID-19-related hospital admissions in the U.S. involve co-morbidities

# COVID-19 Experience of Diamond Princess Passengers by Age Group



The *Diamond Princess* cruise ship offers a rare opportunity to understand features of the virus that are hard to investigate in the wider population

- Represents experience from affluent, generally healthy people
- All passengers were tested, allowing for analysis of:
  - Asymptomatic prevalence
  - Estimates of Infection Fatality Rates
- Over half of the passengers were aged 60+ and this was the only age group that experienced deaths; many who died had underlying health conditions

# Data Sources

| Country          | Source                                                                                                                                                                 | Date      |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Italy            | <a href="#"><u>Epicentro - Higher Institute of Health</u></a>                                                                                                          | 4.23.2020 |
| Netherlands      | <a href="#"><u>National Institute for Public Health and the Environment</u></a>                                                                                        | 4.29.2020 |
| South Korea      | <a href="#"><u>Korea Center for Disease Control and Prevention</u></a>                                                                                                 | 4.29.2020 |
| Spain            | <a href="#"><u>Ministry of Health, Consumption and Social Welfare</u></a>                                                                                              | 4.29.2020 |
| United Kingdom   | <a href="#"><u>Office for National Statistics</u></a>                                                                                                                  | 4.17.2020 |
| Belgium          | <a href="#"><u>Belgian Scientific Institute of Public Health, Sciensano</u></a>                                                                                        | 4.28.2020 |
| U.S.             | <a href="#"><u>Centers for Disease Control and Prevention</u></a>                                                                                                      | 4.25.2020 |
| Diamond Princess | <a href="https://cmmid.github.io/topics/covid19/diamond_cruise_cfr_estimates.html"><u>https://cmmid.github.io/topics/covid19/diamond_cruise_cfr_estimates.html</u></a> | 3.23.2020 |



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# A Look to the Future

**Tim Rozar, FSA, CERA, MAAA**  
*Senior Vice President, Chief of Staff to the CEO*

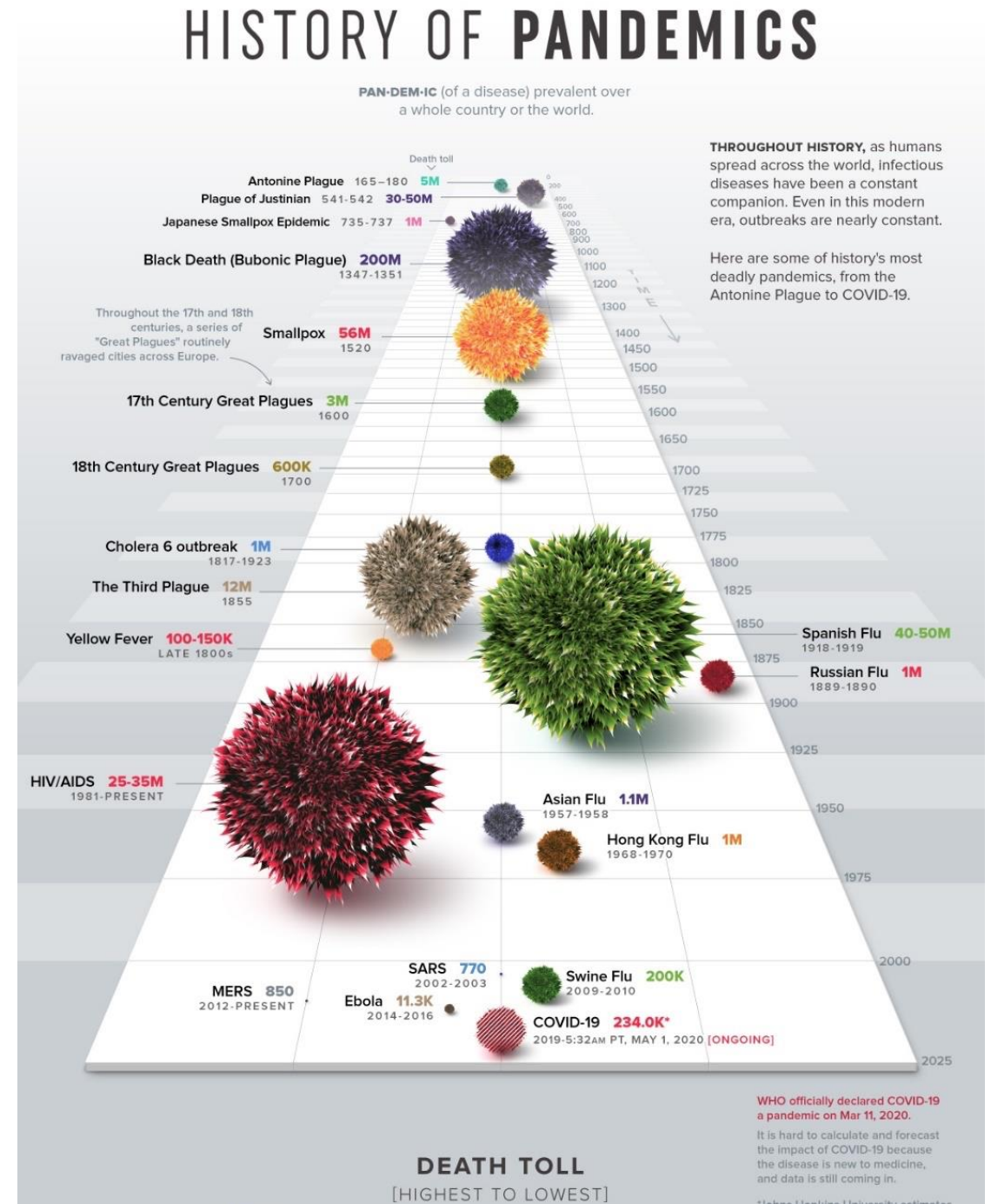


# Looking Back to Look Forward

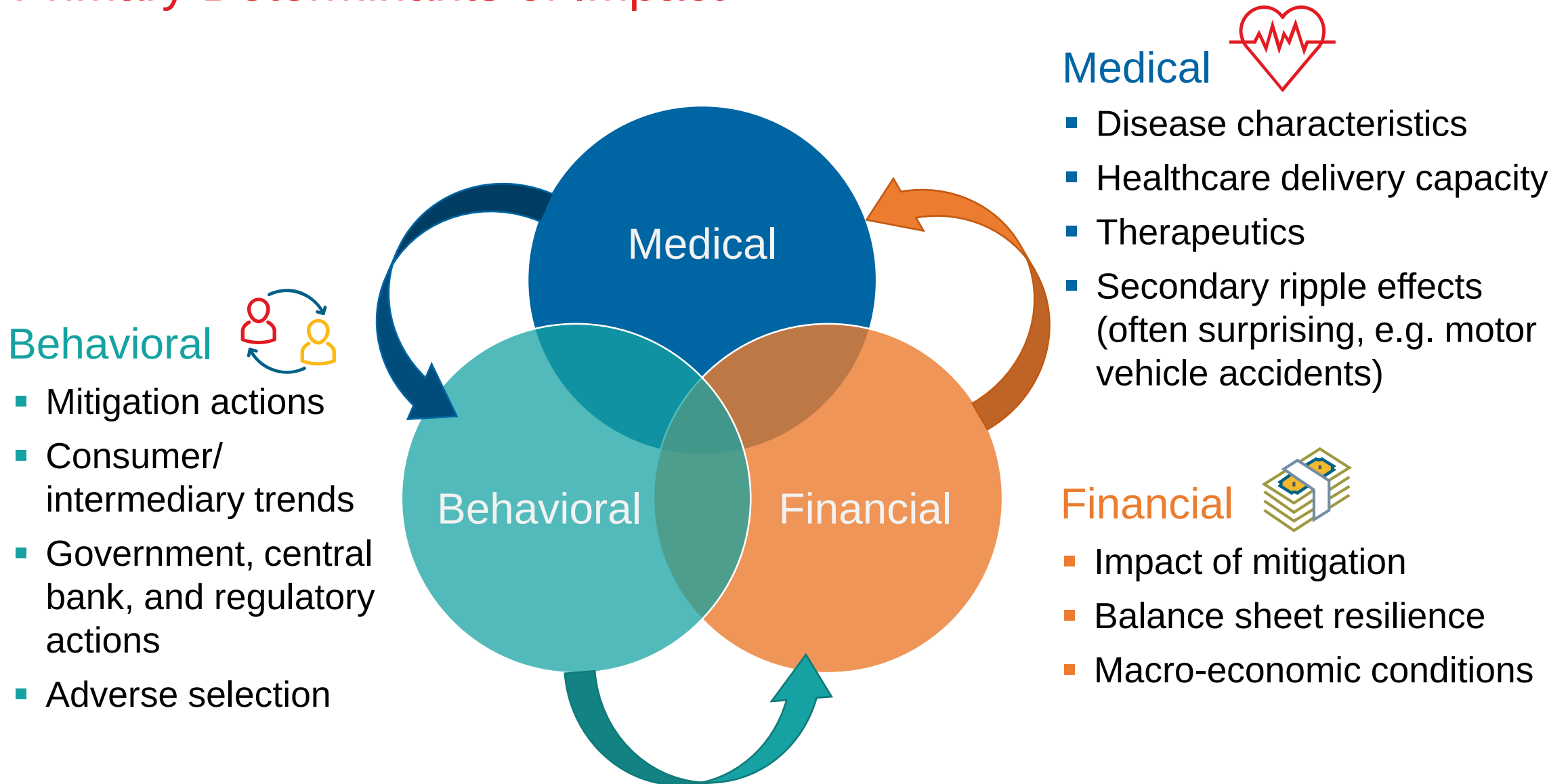
If you've seen one, you've seen...one

- Limited data points to analyze
- Every situation unique
  - Epidemiology
  - External influences
  - Response capabilities
- Must avoid complacency or overconfidence

<https://www.visualcapitalist.com/history-of-pandemics-deadliest/>



# Primary Determinants of Impact



# Potential Long-Term Impact on Insurance Industry

More questions than answers...

## Medical

- Long-term impact on COVID-19 survivors
- Mortality improvement trends
  - Short-term vs. longer-term
  - Research and medical advances
  - Behavioral changes
- Evolution of risk assessment
- Investment in expertise

## Behavioral

- Demand dynamics
  - Perception of value of insurance/reinsurance
  - Distribution channels
  - Risk transfer by companies
- Optionality, adverse selection, and fraud
- Regulatory/ratings
  - Coverage requirements
  - Extended grace periods
  - Capital ratios
- Trust
  - Models, financial strength, social responsibility

## Financial

- Balance sheet impacts
  - Asset portfolios
  - Recalibration of capital models
- Strategic business analysis
- Impact of stimulus efforts
  - Austerity, interest rates, inflation
- Consumer
  - Unemployment
  - Disability
  - Disposable income

# Q & A

## Additional Questions

**[rgare.com/webinar-contacts](https://rgare.com/webinar-contacts)**

# RGIA

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