

IFRS 17: What does the long “awaited” standard bring?

24 November 2017, Prague

Agenda

Part 1: Introduction to IFRS 17

Part 2: Measurement methodology

- Overview
- General model (BBA)
- Variable Fee Approach (VFA)
- Premium Allocation Approach

Part 3: Other key considerations

- Unit of Account
- New financial statements
- Part 4: Transition
- Part 5: Illustrative Examples



Part 1: Introduction to IFRS 17

Introduction to IFRS 17

Aim and history of the project

Implementation of IFRS 17

Why new standard for insurers?



Comparability

1. Lack of comparability among insurers

Varying practices in applying IFRS 4

Various approaches even within insurance Groups

2. Lack of comparability between sectors of economy

Revenues include deposits

Different approach to revenue recognition



Updated assumptions

1. Outdated biometric assumptions

Assumptions are not adjusted to changing market environment

No lapse assumptions

2. Outdated Economic assumptions

Fixed technical rates, effects of changes not disclosed



Transparency

1. Lack of important disclosures

Not enough information on analysis of change and its sources

2. Cashflow-based accounting

Financial reporting based on cashflows, and not on providing service during insurance period

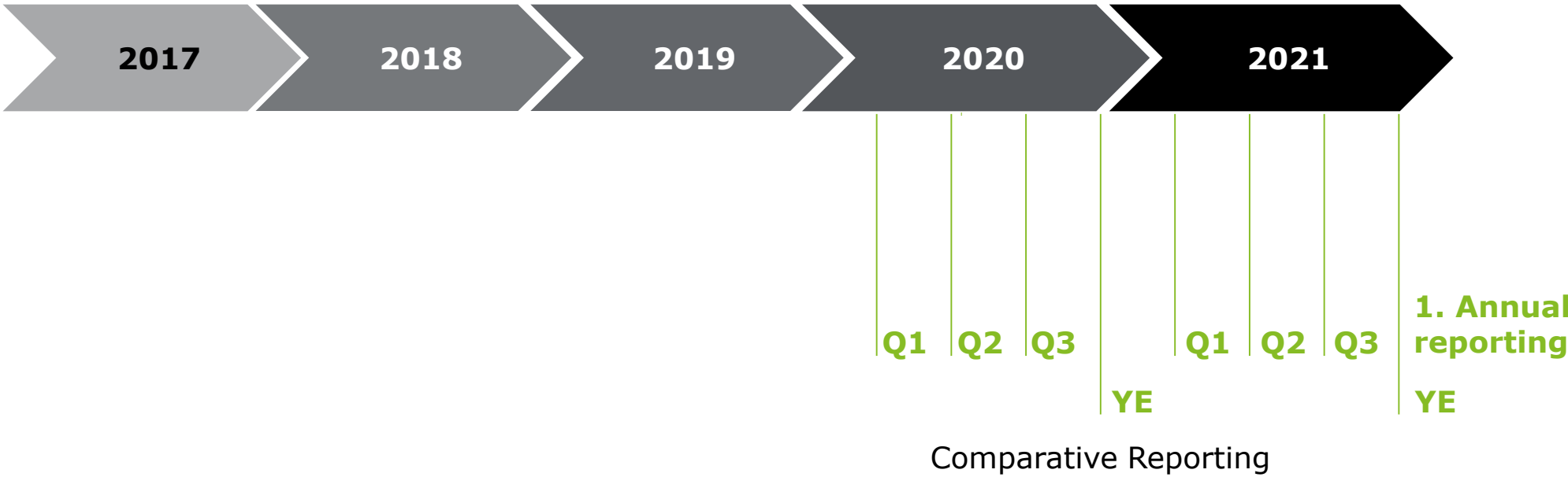
Implementation of IFRS 17

What do we know today?

Publication of the standard
18 May 2017

Implementation of IFRS 9
Possibility of deferral of IFRS9 if insurance activity is prevailing.

Implementation of IFRS 17



Introduction to IFRS 17

What is an insurance contract?

Implementation of IFRS 17

Characteristics of contracts in IFRS 17

Types of contracts

Contracts under IFRS 17

Components of contracts („unbundling”)

Components of insurance contracts which will have to be excluded from IFRS 17 (i.e. service components or investment components)



Contract boundaries

Defining what is the scope of cashflows to be included in the valuation

Implementation of IFRS 17

Contracts in terms of IFRS 17 (1 / 2)



Insurance contract

Reinsurance contract (active)

Reinsurance contract (passive)

An insurance contract with a discretionary participation feature



Insurance contract:

A contract under which one party (**the issuer**) accepts significant **insurance risk** from another party (the **policyholder**) by agreeing to compensate the policyholder if a specified uncertain future event (the **insured event**) adversely affects the **policyholder**.”



Reinsurance contract:

An **reinsurance contract** issued by one entity (the 'reinsurer') to compensate another entity (the 'cedant') for claims arising from one or more **insurance contracts** that are issued by the cedant (underlying contracts).”

- ✓ Risk transfer
- ✓ Significant insurance risk
- ✓ Uncertain event
- ✓ Negative impact on the policyholder or the cedant

Implementation of IFRS 17

Contracts in terms of IFRS 17 (2 / 2)



Insurance contract

Reinsurance contract
(active)

Reinsurance contract
(passive)

**An insurance contract with
a discretionary
participation feature**

“

Insurance contract with a discretionary participation feature:

An insurance contract for which, at inception:

*(a) the contractual terms specify that the **policyholder** participates in a share of a clearly identified pool of **underlying items**;*

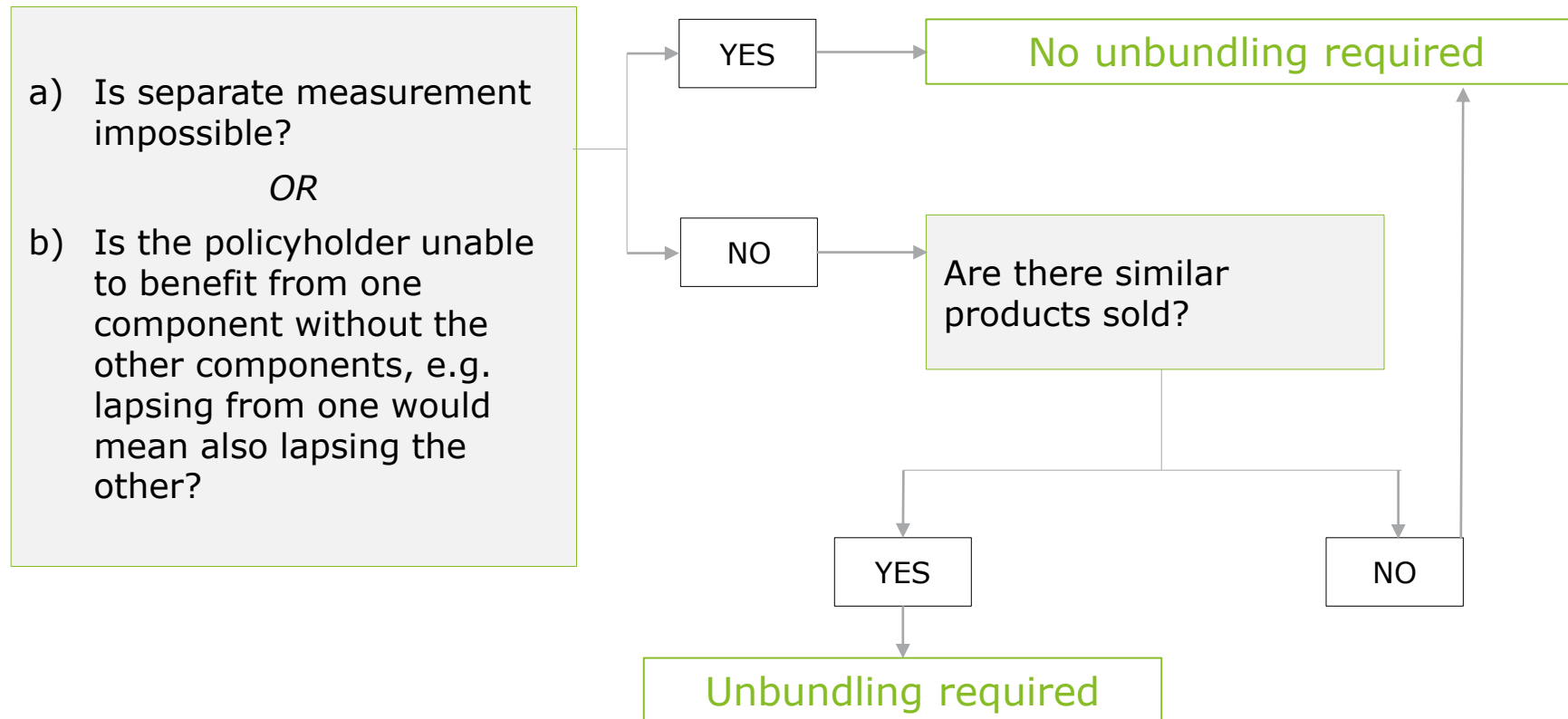
*(b) the entity expects to pay to the **policyholder** an amount equal to a substantial share of the fair value returns on **the underlying items**; and*

*(c) the entity expects a substantial proportion of any change in the amounts to be paid to the **policyholder** to vary with the change in fair value of the **underlying items**.*

- ✓ Additional amounts expected to be a significant portion of the total contractual benefits
- ✓ Possible discretionary element
- ✓ Specified pool of underlying items

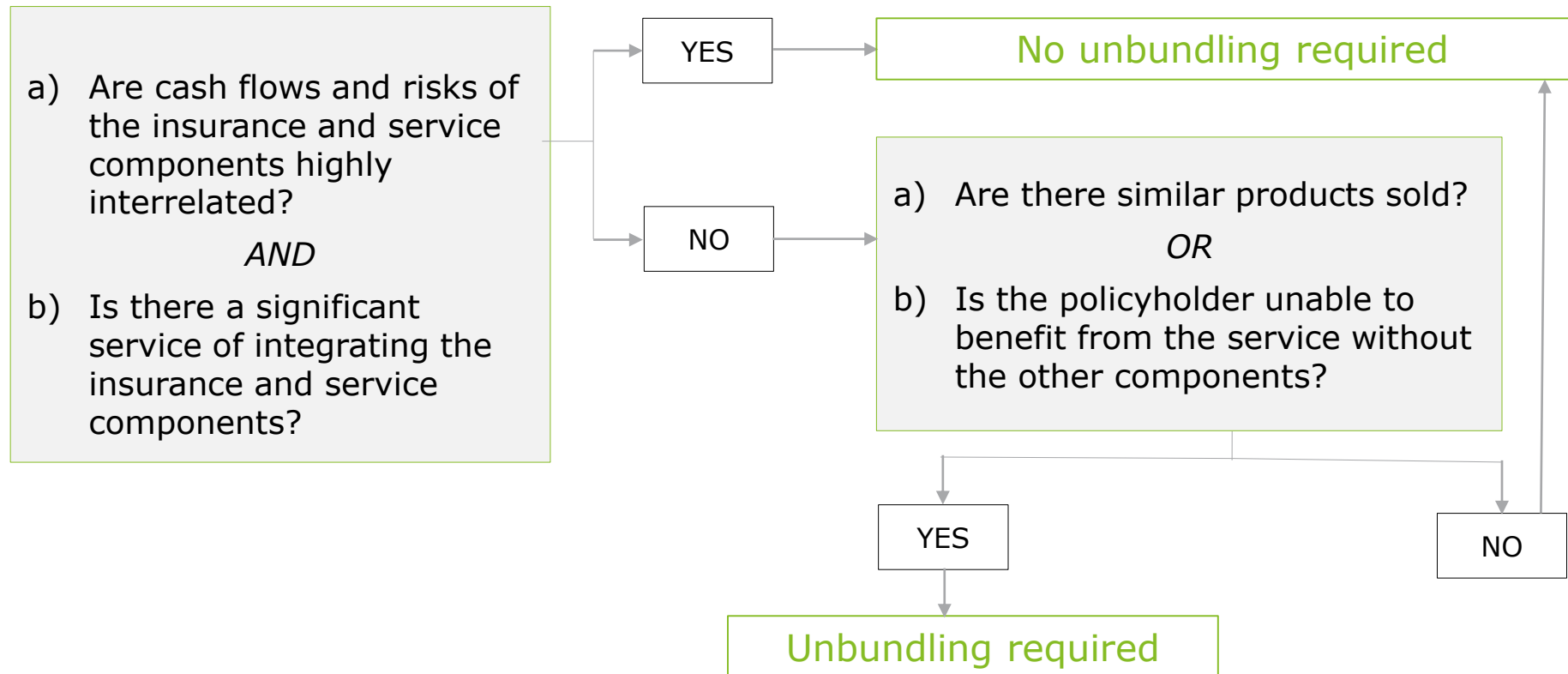
Implementation of IFRS 17

Unbundling – investments components



Implementation of IFRS 17

Unbundling – service components

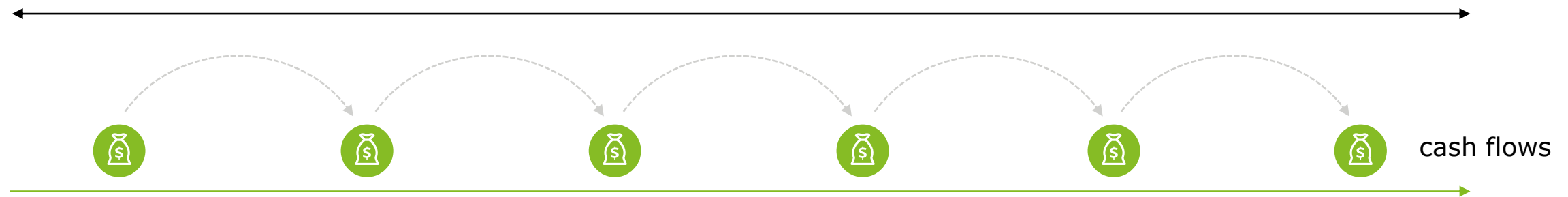


Implementation of IFRS 17

Contract Boundaries

Within the boundary

The policyholder is obliged to pay the premium



Substantive obligation

An insurer needs to provide coverage or other services to policyholders

Contract Boundary

(beginning)

The earliest of :

- the beginning of coverage; or
- the date on which first premium is due,
- date when facts and circumstances indicate that a contract can be onerous

1 Insurer has the right or practical ability to reassess the risks **of the particular policyholder** and, as a result, can set a price or level of benefits to fully reflect the risks.

2a Insurer has the right or practical ability to reassess the risks **for the portfolio of insurance contracts** that contain the contract and set a price or level of benefits to fully reflect the risks of that portfolio, and;

2b Pricing for coverage up to the date that the risks are reassessed **does not take into account the risks that relate to future periods.**

Contract Boundary

(end)

Part 2: Measurement methodology

Measurement Methodology

Overview of methods

Basic methods

Overview



BUILDING BLOCK APPROACH (BBA)

Basing method applied to all products both life non-life insurance.

Possible one exemption – PAA and two modifications:

- VFA (obligatory)
- Modified BBA (optional)



VARIABLE FEE APPROACH (VFA)

Applied in life insurance

Permissible only in products satisfying specific rules (products with clearly defined profit sharing and „UL“ contracts)

Close to „BBA“ enables several modifications



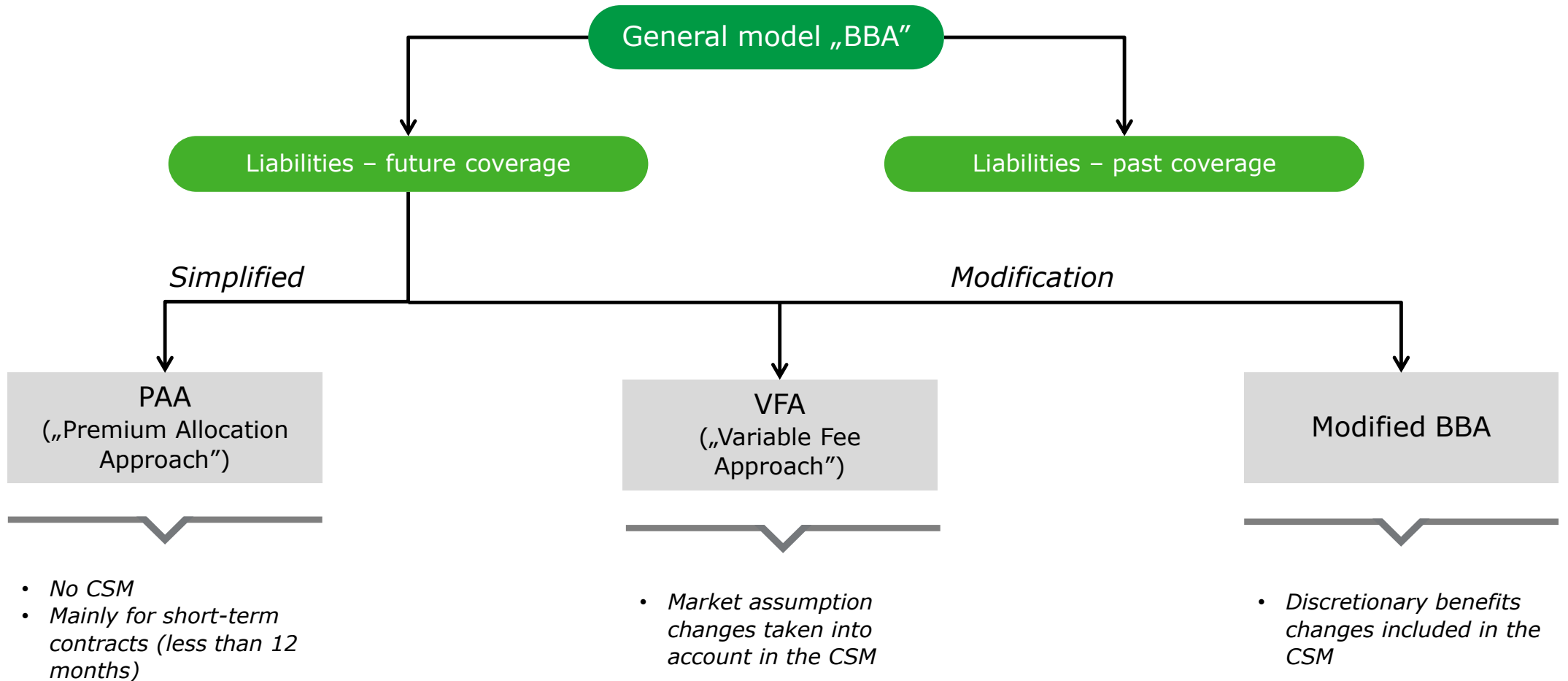
PREMIUM ALLOCATION APPROACH (PAA)

Method for short-term contracts, applied mainly in non-life insurance

Permissible only for liabilities with future cover

Produkt	BBA	VFA	PAA
Life insurance	●		
Endowment with no profit sharing	●		
Endowment with profit-sharing	●	●	
Unit-linked	●	●	
Group products	●		●
Non-life insurance – future coverage	●		●
Non-life insurance – past coverage	●		

Basic methods Diagram

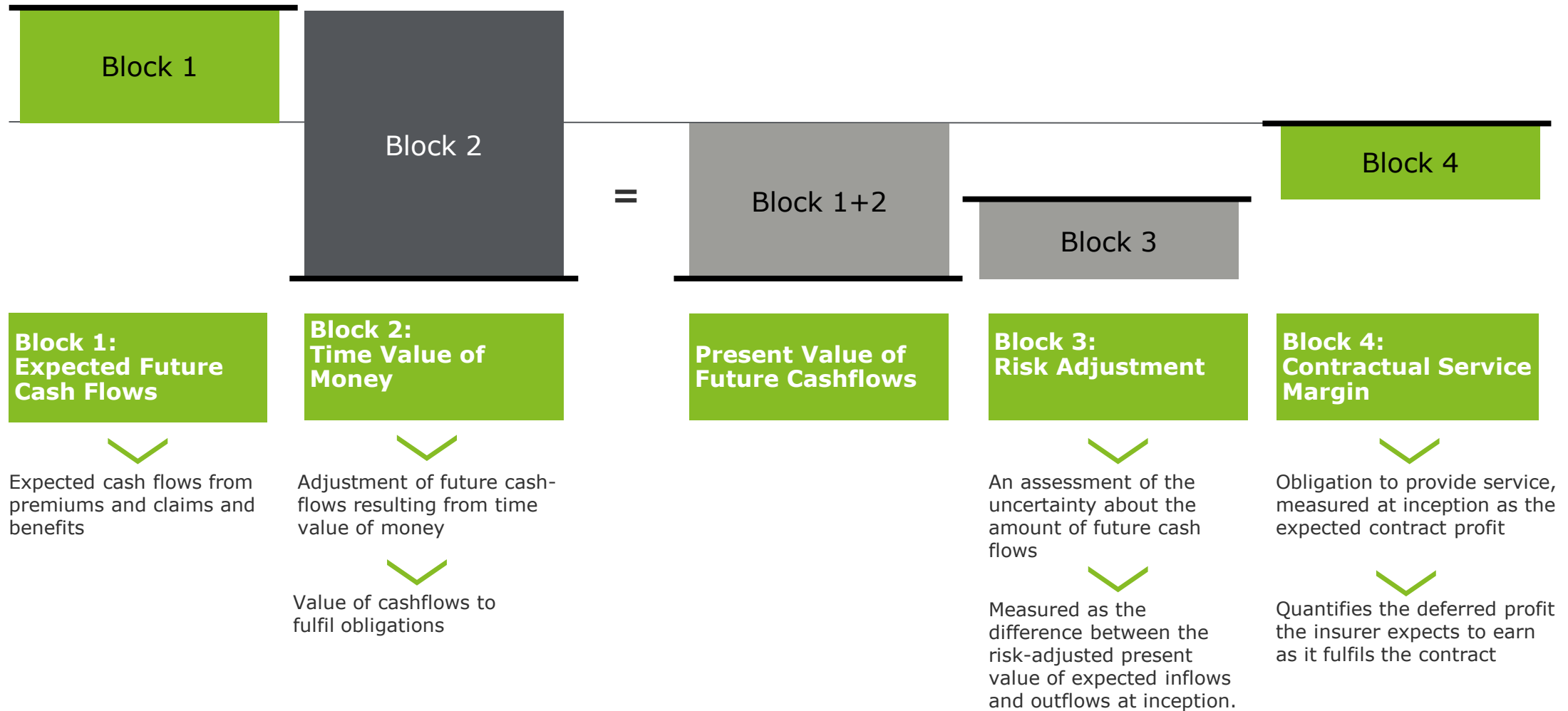


Measurement Methodology

General model

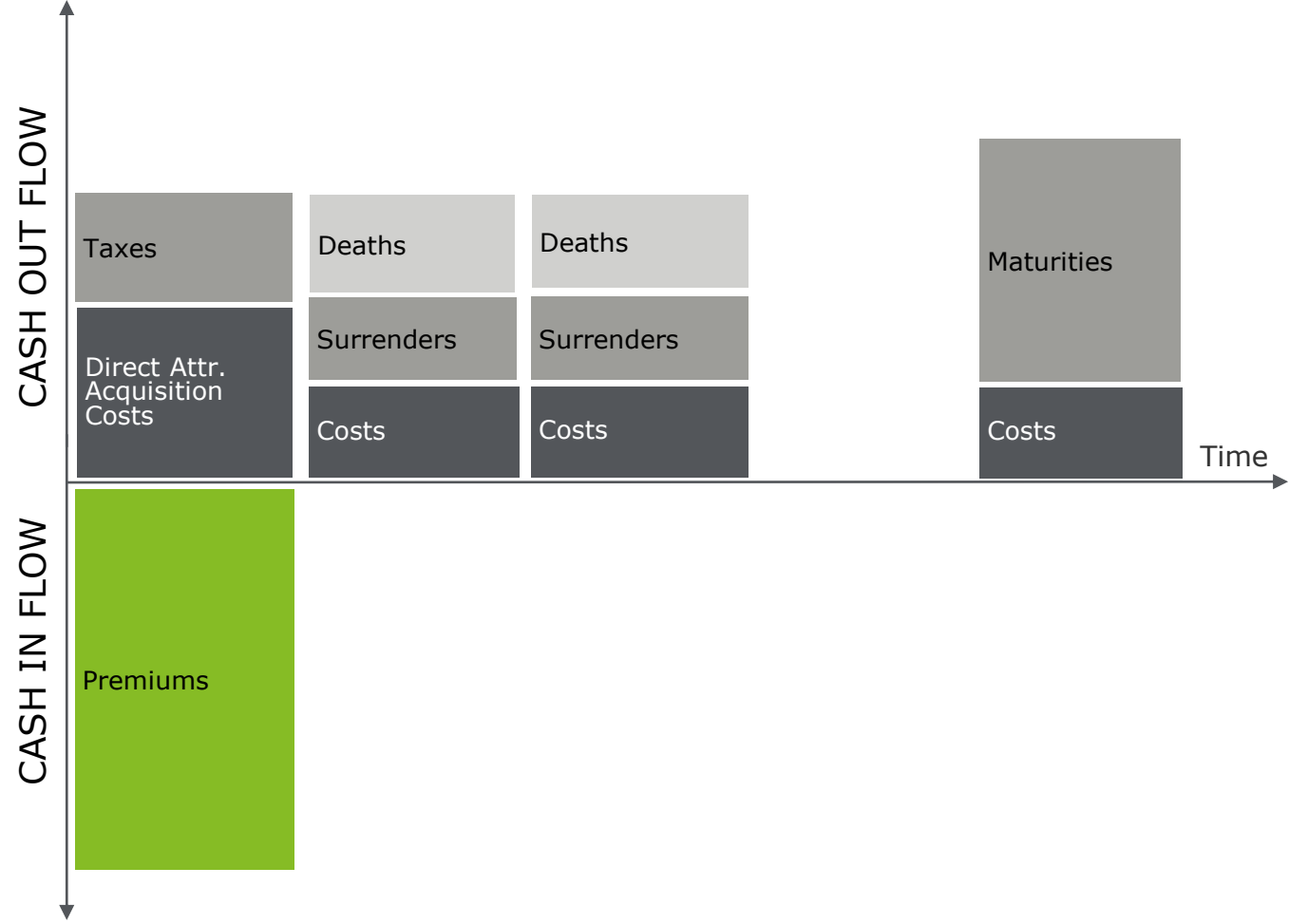
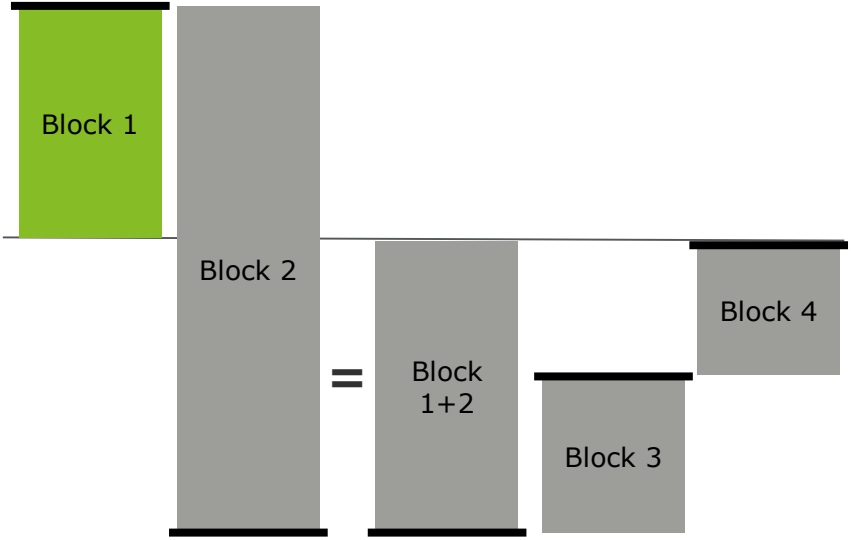
Building Block Approach

Overview measurement at initial recognition



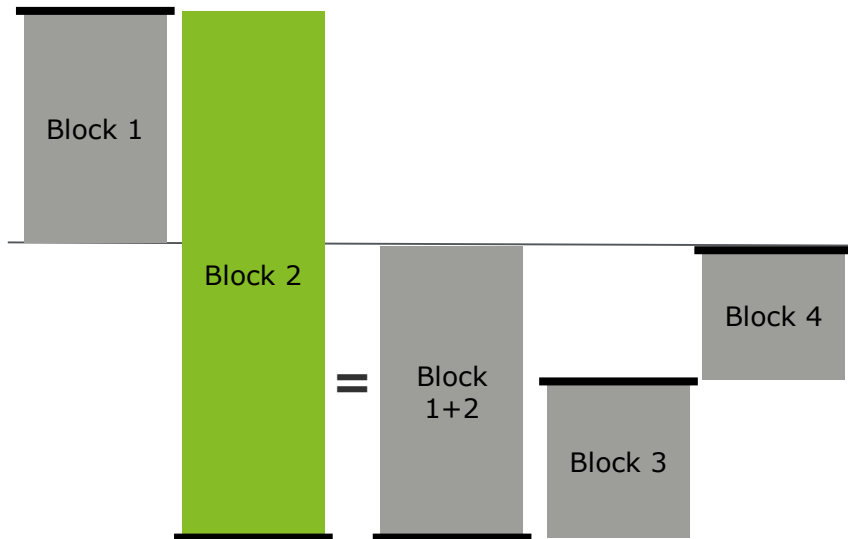
Building Block Approach

Block 1: Future cash flows



Building Block Approach

Block 2: Time value of money



„Top-down“



„Bottom-up“



Reference portfolio rate

-
- Duration mismatches
 - Credit risk (external and own)
 - The other factors that are not relevant to the insurance liability
 - No need to include other liquidity adjustments

Insurance liability – Discount Rate

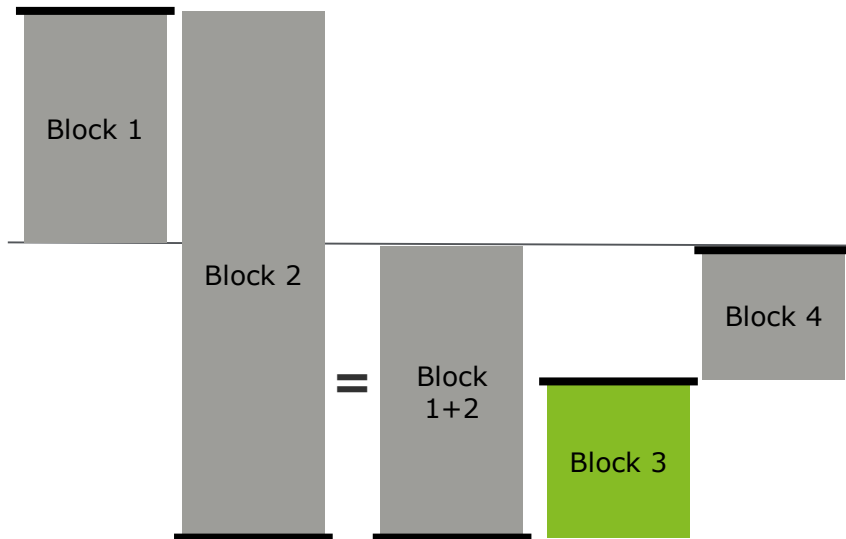
Both approaches should lead to the same outcome

+ Liquidity premium

Risk free rate

Building Block Approach

Block 3: Risk adjustment



Measure of uncertainty



Principle-based approach



Specific for each insurer



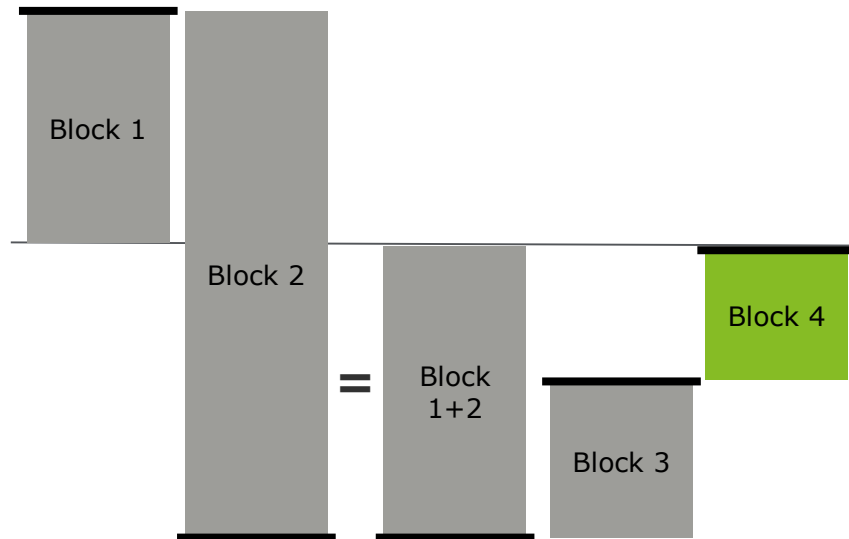
Diversified



Comprehensive

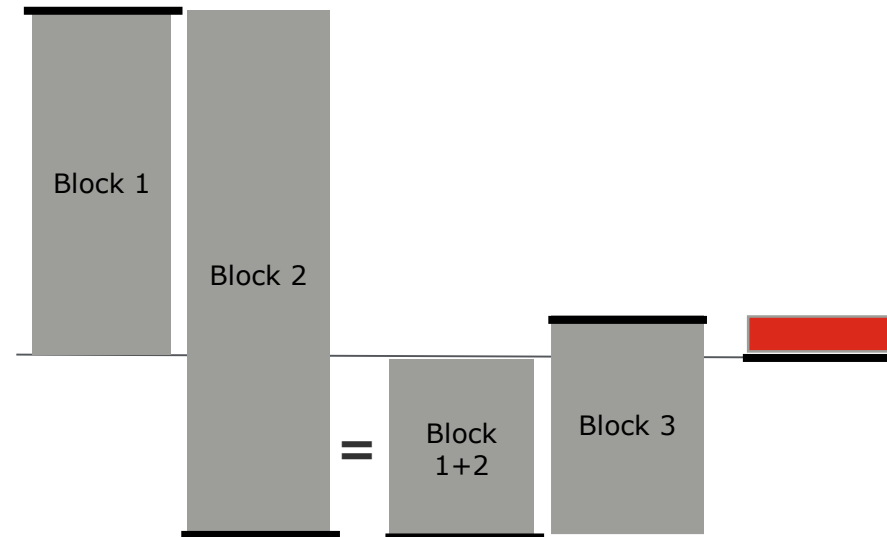
Building Block Approach

Block 4: CSM



Block 1 + Block 2 + Block 3 < 0

Recognise Contractual Service Margin



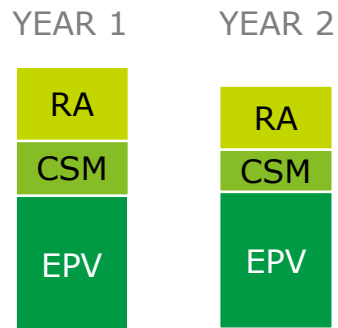
Block 1 + Block 2 + Block 3 > 0

Recognise Day One Loss (Onerous Contract)

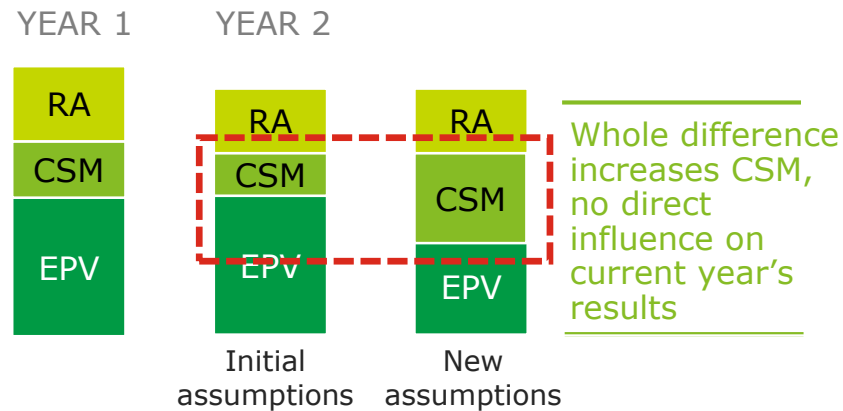
General Model of IFRS 17 liabilities measurement

Building Block Approach: assumption changes may affect profit

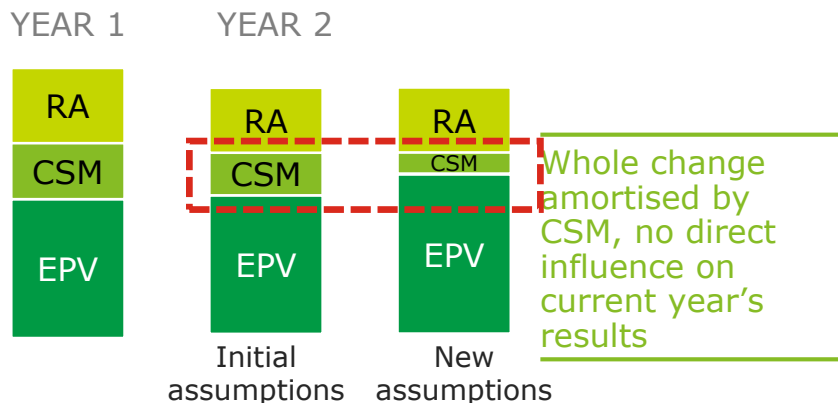
Example 1: No assumption changes



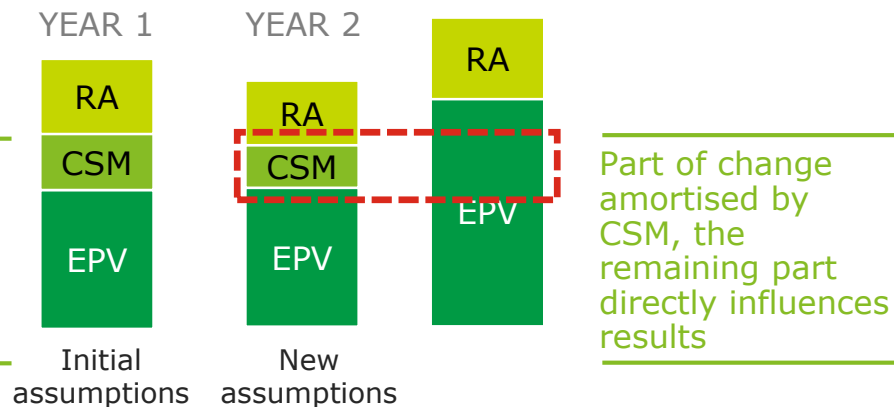
Example 2: Favourable assumption change as of 2nd year



Example 3a: Unfavourable assumption change as of 2nd year



Example 3b: Unfavourable assumption change as of 2nd year



Change of EPV and RA

Events of the current period
Related profit or loss recognised immediately in **P&L**

Non-economic assumptions relating to future periods

Favourable:
Increase **CSM**
If Loss Component exists (CSM=0), it has to be reverted in **P&L** before CSM is re-established

Unfavourable:
Decrease **CSM** until exhaustion (CSM shall not be negative)
Once CSM is exhausted, loss is recognised in **P&L**

Building Block Approach

Summary of changes in estimates

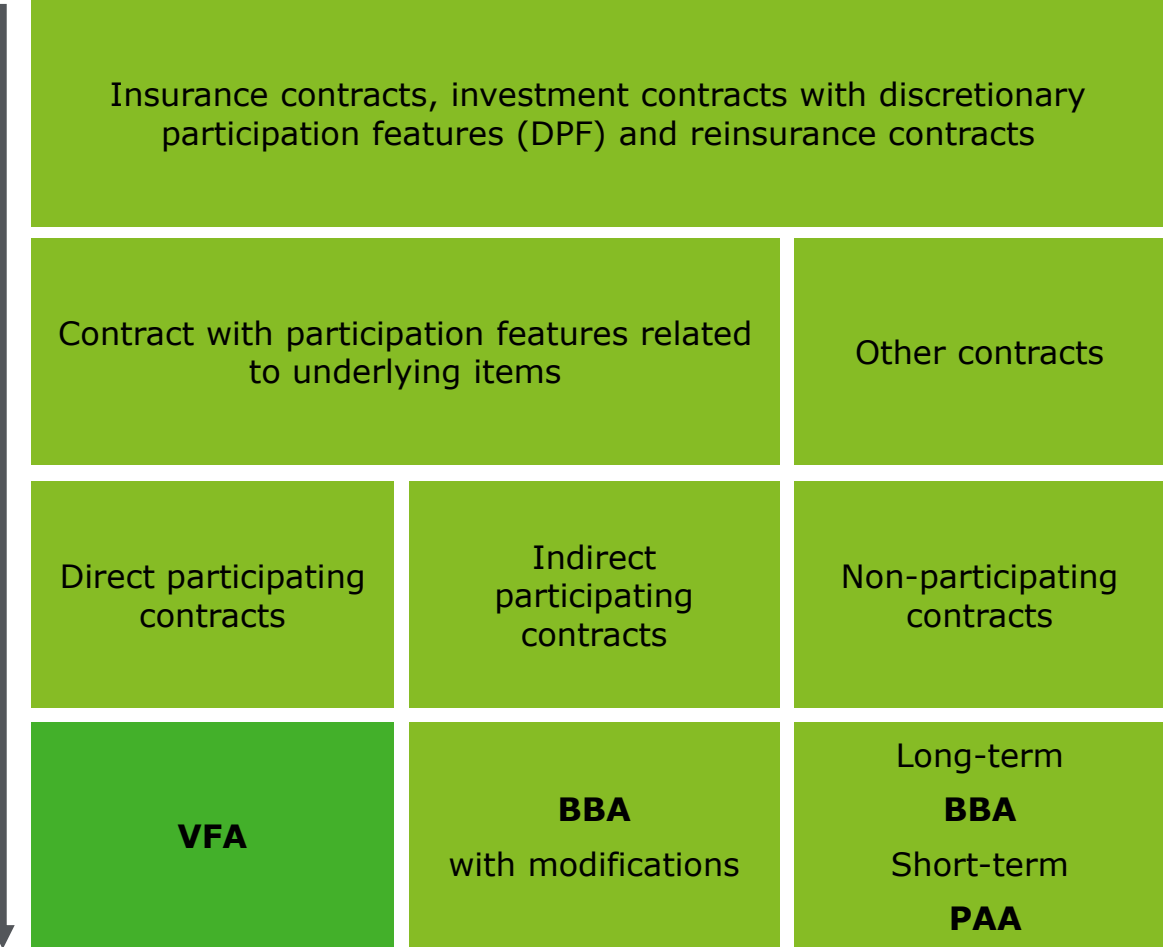
	CSM	OCI	P&L
Lapse/Surrender	●		
Mortality	●		
Morbidity and recovery	●		
Directly attributable maintenance and acquisition expenses	●		
Expense inflation	●		
Risk Adjustment	●		●
Discount rate		●	●
Expected credit losses on RI assets			●
Salvage and subrogation			●
IBNR			●
Other assumptions in respect of past coverage			●

Measurement Methodology

Variable Fee Approach

Variable Fee Approach

Contract classification



Direct participating

Contract with participation features related to underlying items, for which the specific participation features prescribed by IFRS 17 are met

Indirect participating

Contract with participation features related to underlying items, for which the specific participation features prescribed by IFRS 17 are not met

Non-participating

Contract where the fulfillment cash-flows do not depend on the underlying items.

Variable Fee Approach („VFA“)

Conditions for eligibility

Variable Fee Approach (“VFA“) is applied for contracts with direct participation feature.

Above contracts meet the following conditions:

i. the contractual terms specify that the policyholder participates in **a share of a clearly identified pool of underlying items**

ii. the entity expects to pay to the policyholder an amount equal to **a substantial share of the fair value returns** on the underlying items; and

iii. the entity expects a substantial proportion of any change in the amounts to be paid to the policyholder to **vary with the change in fair value of the underlying items.**

VFA is not applicable to reinsurance contracts.

Eg.

1. Unit Linked product: 100% of fund return in
2. 90% policyholder fund's surplus

Eg.

1. Unit Linked product: Death benefit = Max(Fund Value, Sum Assured)
2. Reversionary Bonus, Terminal Bonus

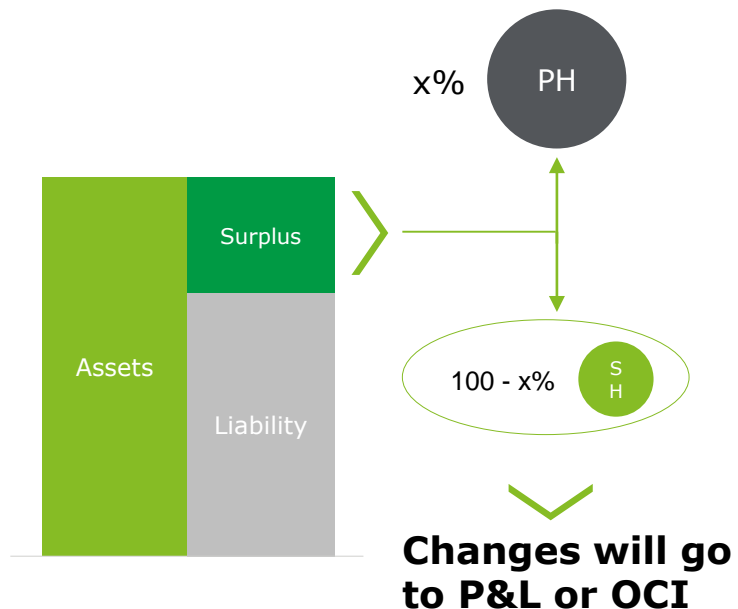
Examples: endowment insurance with profit sharing based on yield rate, endowment insurance with profit sharing based on biometric variables, unit-linked

Variable Fee Approach

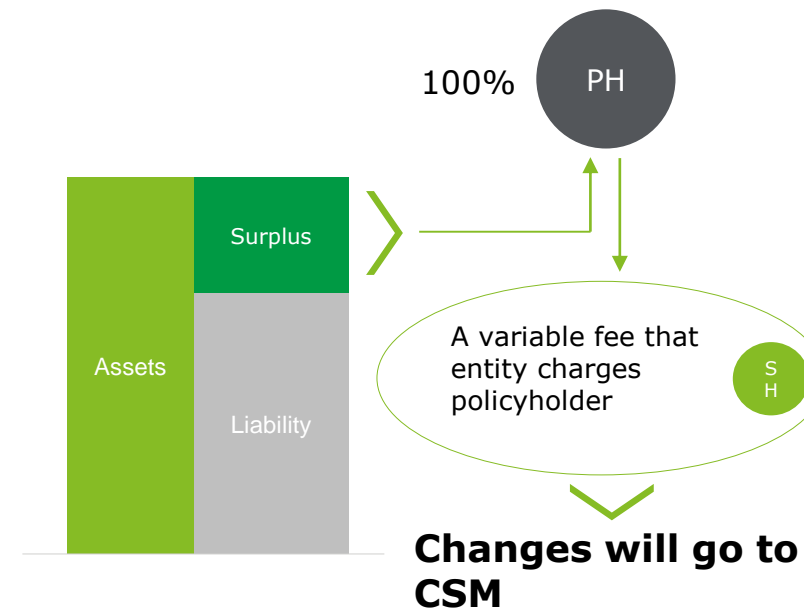
Different underlying model

In variable fee approach, the returns to the entity arising from participating contract is viewed as part of the compensation that the entity charges the policyholder for service provided by the insurance contract, rather than as a share of returns from a standalone investment.

Building Block Approach



Variable Fee Approach



Acronym Key

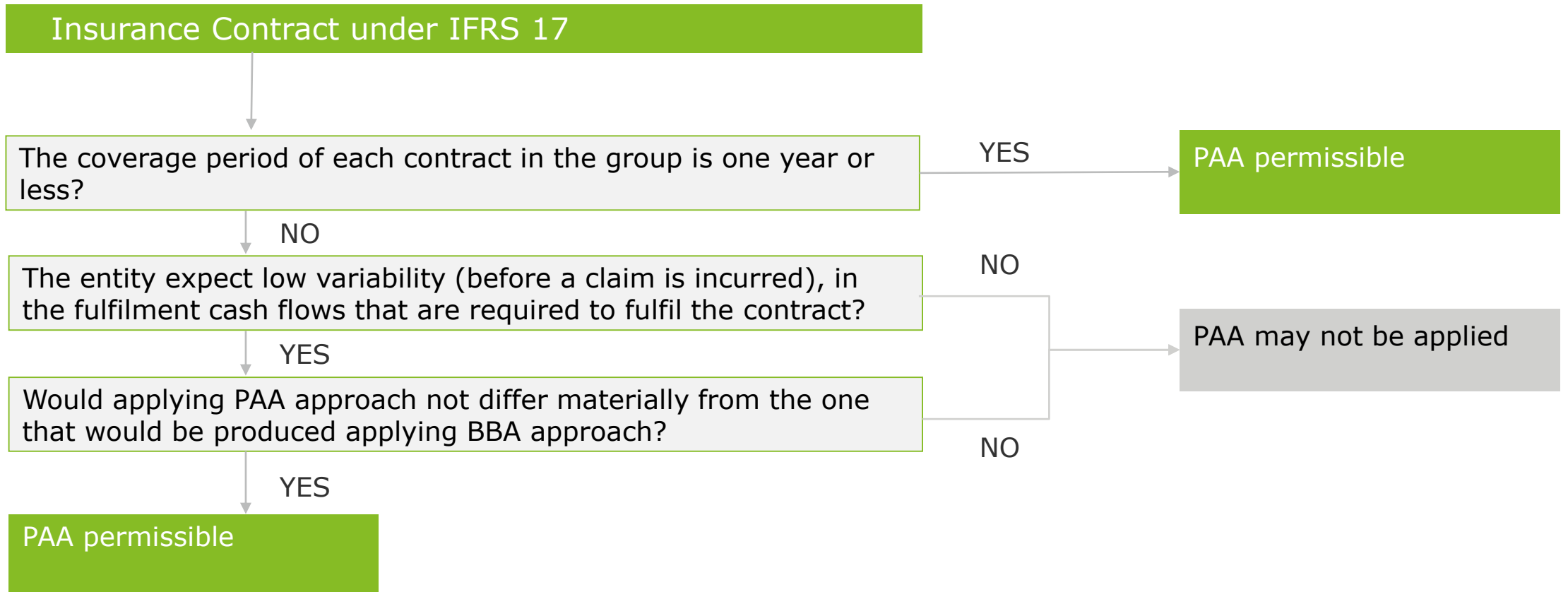
PH	Policyholder	SH	Insurer
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Measurement Methodology

Premium Allocation Approach

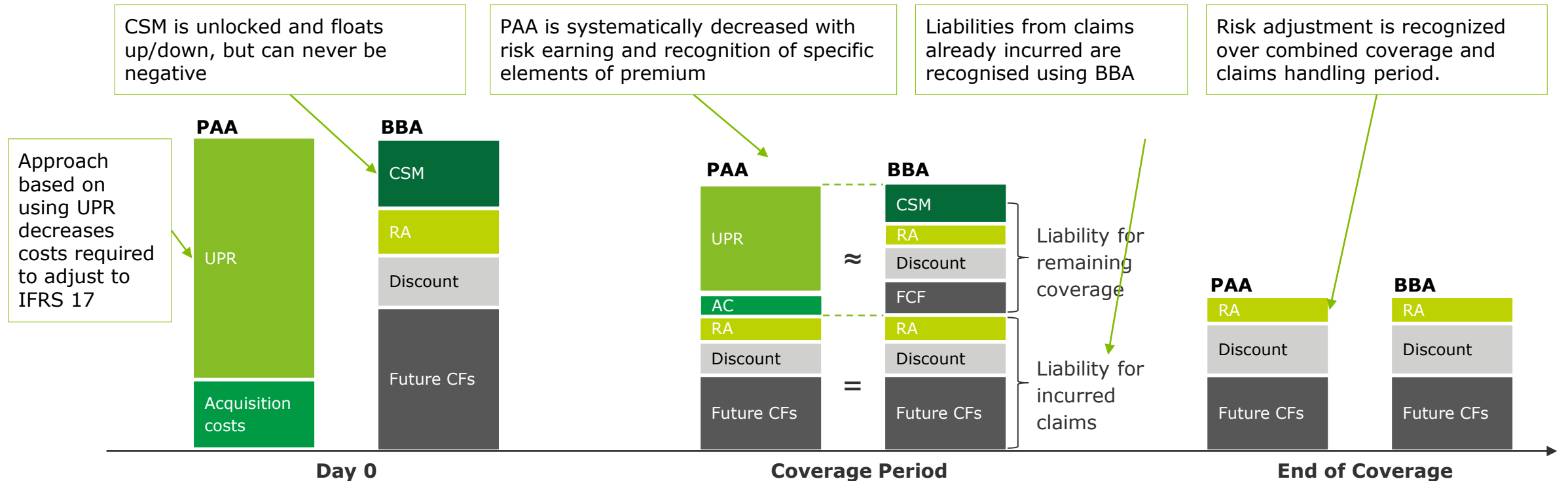
Premium Allocation Approach

Decision tree



Premium Allocation Approach

General rules



Acronym Key

AC	Acquisition costs
FCFs	Future cash flows
CSM	Contractual service margin
RA	Risk Adjustment
UPR	Unearned premium reserve

As BBA approach has to be applied to incurred claims, using both approaches might ultimately still be expensive for a company. Therefore the decision to apply PPA has to be analysed in detail.

If the contract is onerous („onerous contract”), the UPR and acquisition costs estimate will have to be increased by the amount required to fulfil the obligation. This estimate will have to be done based on BBA.

General Model of IFRS 17 liabilities measurement

Alternative valuation models – example of products



Premium Allocation Approach

- Non-life insurance (*coverage period*)
- Short-term life and certain group contracts



Building Block Approach

- Non-life insurance (*incurred claims*)
- Long-term life protection contracts
- Long-term endowments with no profit-sharing
- Annuities with no profit-sharing



Variable Fee Approach

- Unit-linked contracts
- Long-term endowments with specific profit-sharing regulations

Part 3: Other considerations

Other considerations

Unit of Account

Aggregation levels for calculations in IFRS 17

Unit of account

Expected future cashflows

Could be measured at the level of **portfolio of contracts**

Risk adjustment

Measured at the level enabling to include all **expected diversification effects**

Main goal:
Aggregation level should not impact the level of present value of expected future cashflows measured at the individual policy level

...but...

some calculations on individual level may be impracticable or impossible

CSM the point of contract recognition

It is permissible to group contracts of similar profitability, which will respond in similar ways to key drivers of risk

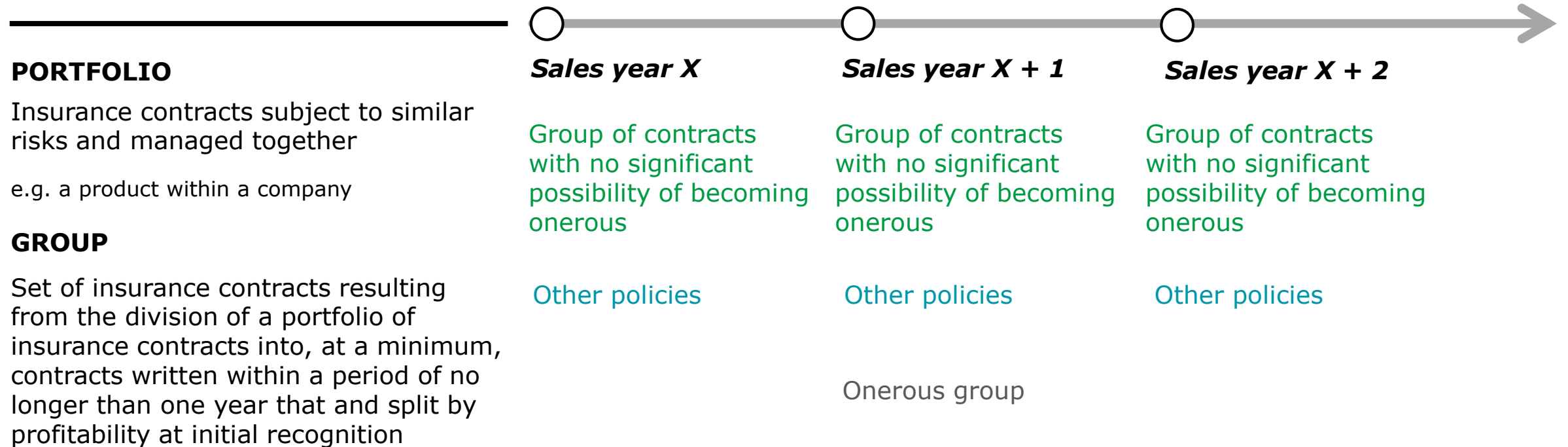


CSM at subsequent periods

The level to be consistent with initial recognition guaranteeing that at the end policy term, CSM is fully recognised

Aggregation levels for calculations in IFRS 17

Unit of account



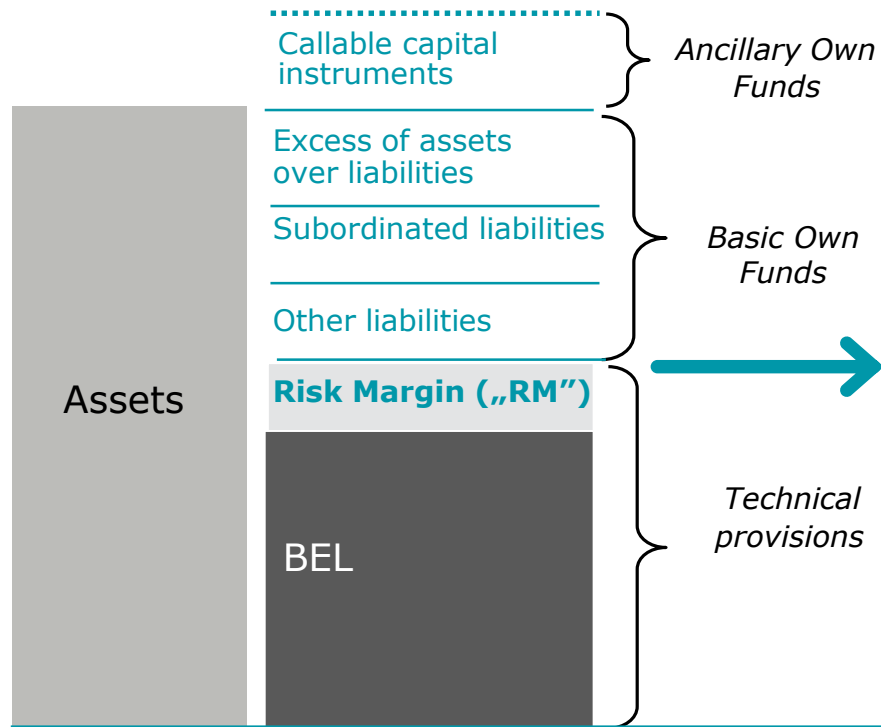
Other considerations

New format of financial statement and other disclosures

Solvency II and IFRS 17

Solvency II

Typical balance sheet

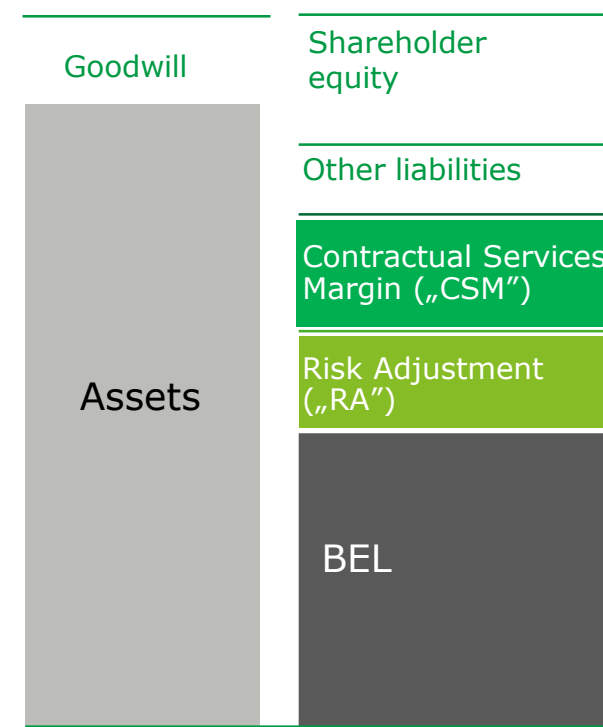


POTENTIAL FINANCIAL IMPACTS

- **No „first-day profit“ thanks to its deferral through CSM**
- Much smoother profit profile

IFRS17

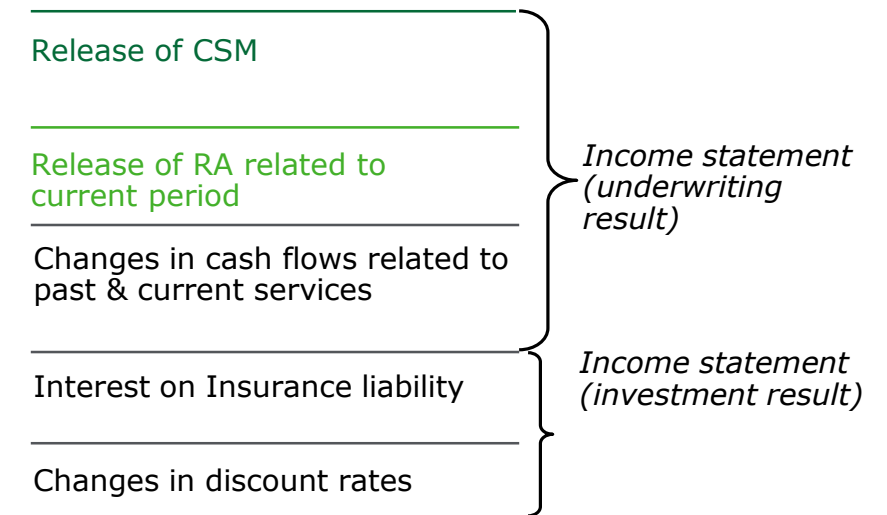
Typical balance sheet



POTENTIAL BUSINESS IMPACTS

- Significant volumes of data to be stored
- **Actuarial assumptions changes directly affecting profit profile**
- Actuarial valuation models to be integrated with accounting systems
- Level of granularity for required disclosures

Income statement

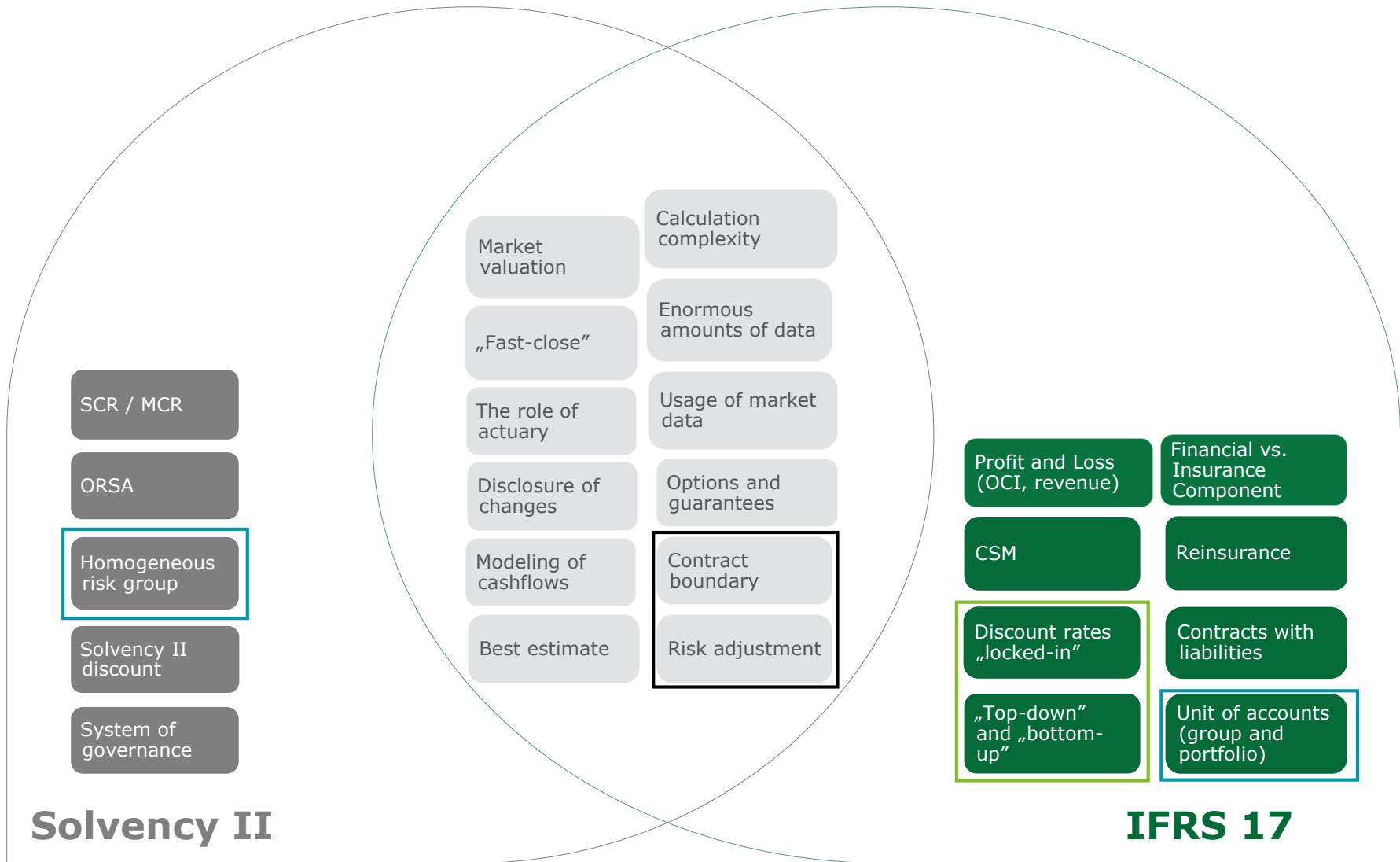


New Presentation and Disclosure Statement of Comprehensive Income

Operating Result	(WU) = (a) - (f)	
Insurance Contracts Revenue	(a) = (b) + (c) + (d) + (e)	Release of part of CSM allocated to current period
Change in CSM	(b)	Release of part of RA related to risk expired in the current period
Change in Risk Adjustment	(c)	
Amortisation of acquisition costs	(d)	
Expected claims and expenses	(e)	Expected claims and expenses in the current period
Insurance expenses	(f) = (g) + (h) + (i) + (j)	Actual incurred claims and expenses in the current period
Incurred expenses and paid claims	(g)	
Incurred acquisition costs	(h)	
Recognised losses from onerous contracts	(i)	Loss for „onerous contracts“
Changes in insurance liabilities	(j)	In case of changes in liabilities for expired cover or in case when CSM cannot absorb negative deviations
Investment Result	(WI) = (k) - (l)	
Investment income	(k)	
Investment expenses	(l) = (m) + (n) + (o)	Cost related to the unwind of the discount rate in valuation of liabilities
Accretion of CSM	(m)	
Accretion of RA	(n)	
Accretion of insurance liabilities	(o)	
Total Income	(WU) + (WI)	

Solvency II vs. IFRS 17

Synergies and differences



Part 4: Transition

Introduction to Transition

Introduction

Important dates

Contract sales

Comparative information

IFRS 17 comes into force



2020

2021

Q1

Q2

Q3

„Early application“

Permitted for entities that apply IFRS 9 Financial Instruments and IFRS 15 Revenue from Contracts with Customers on or before the date of initial application of IFRS 17

„Transition date“

The beginning of the annual reporting period immediately preceding the date of initial application

„Date of initial application“

The beginning of the annual reporting period in which an entity first applies IFRS 17

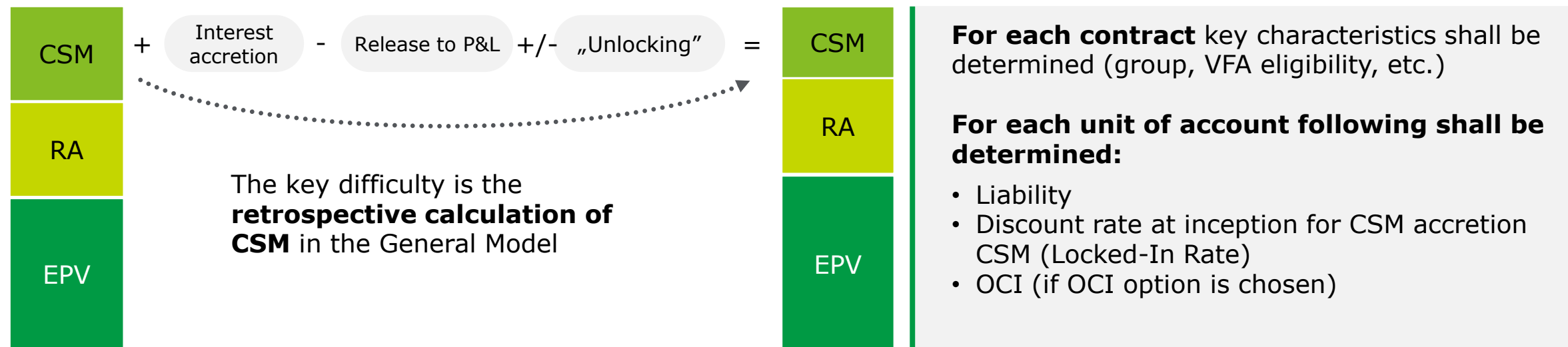
First annual reporting

An entity shall apply IFRS 17 for annual reporting periods beginning on or after 1 January 2021.

Introduction

Valuation on the Transition date

Contract sales



Principle: identify, recognise and measure each group of insurance contracts as if IFRS 17 had always applied

Introduction

Basic definitions

Three possible approaches to be applied:

The **retrospective approach** should be applied to groups of insurance contracts, unless **it is impracticable** or if groups at inception of contracts in force on transition cannot be identified.

When **impracticable** to apply the retrospective approach, an entity is then permitted to choose between the **modified retrospective approach** and the **fair value approach**.

Key definitions in transition

“ *IFRS 13: **Fair value** is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. (IFRS 13.A)*

“ *IAS 8: Applying a requirement **is impracticable** when the entity cannot apply it after making every reasonable effort to do so. (IAS 8.5).*

Overview of Methods

Method 1: Full retrospective approach

Basic assumptions

To apply IFRS 17 retrospectively, an entity shall at the transition date:

01.



identify, recognise and measure each group of insurance contracts as if IFRS 17 had always applied;

02.



derecognise any existing balances that would not exist had IFRS 17 always applied; and

03.



recognise any resulting net difference in equity.

Method 2: Modified retrospective approach

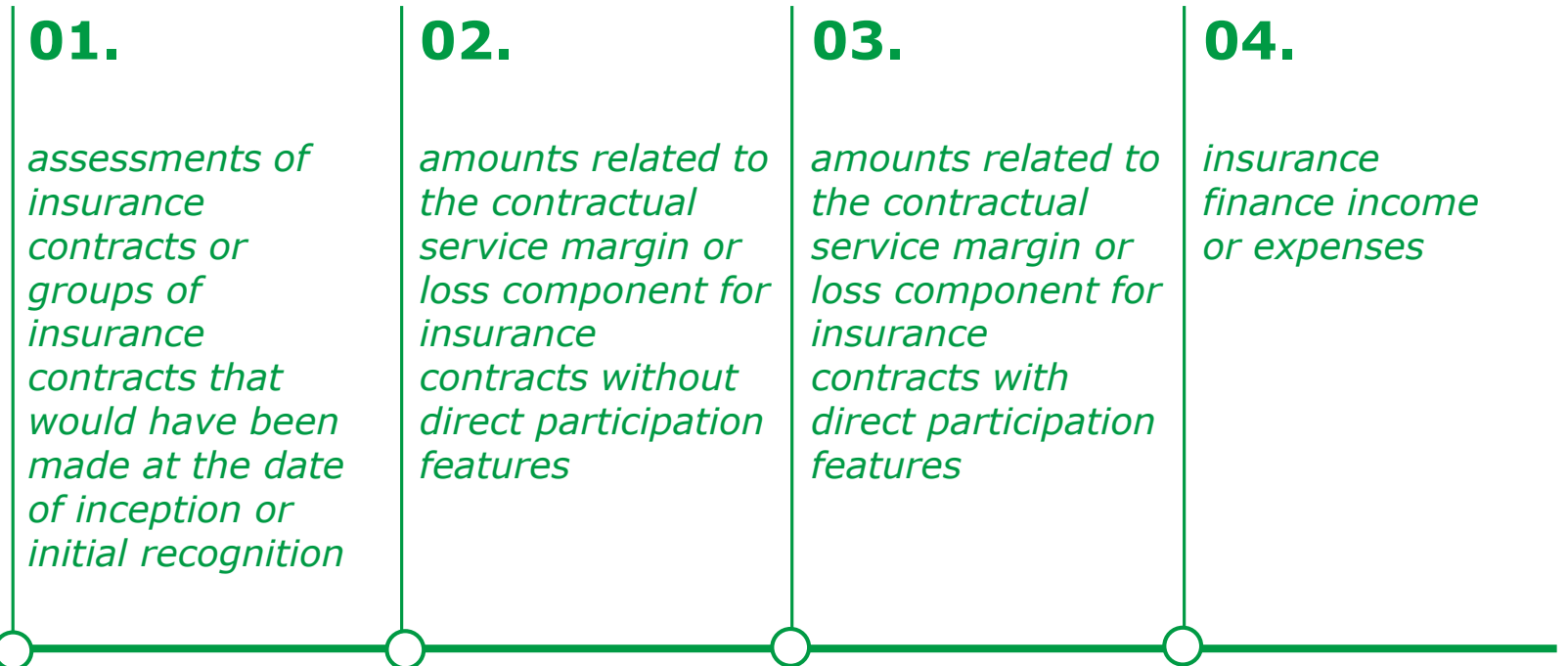
Basic assumptions

The objective of the modified retrospective approach is to achieve the closest outcome to the retrospective application possible.

An entity shall:

- A. use reasonable and supportable information;
- B. maximise the use of information that would have been used to apply a fully retrospective approach, but need only information available without undue cost or effort.

Permitted modifications to the retrospective method:



An entity is permitted to use each modification only to the extent that an entity does not **have reasonable and supportable** information to apply a retrospective approach.

Method 3: Fair value approach

Basic assumptions



The CSM or loss component is difference between:

- the fair value of a group of insurance contracts at that date; and
- the fulfilment cash flows measured at that date



To determine:

- ✓ how to identify groups of insurance contracts
- ✓ whether a contract meets the definition of a contract with direct participation features
- ✓ how to identify discretionary cash flows for contracts that do not meet upper definition

An entity may determine the matters based on data on:

- ✓ inception,
- ✓ transition.

An entity may include in a group contracts issued more than one year apart.

Comparison of methods available

Basic assumptions



Fully retrospective approach:

Pros

In most cases gives highest level of CSM to allocate/spread in future years
Additional future reconciliation and disclosures not required after transition
Comparable with new cohorts
Not required proof of lack of impracticability

Cons

Big amount of data required
May be more complex computationally



Modified retrospective approach:

Less data required
Relatively high freedom in choosing approach

Needs proof that fully retrospective method is impracticable
Requires future disclosures
Less comparable with new cohorts



Fair value approach:

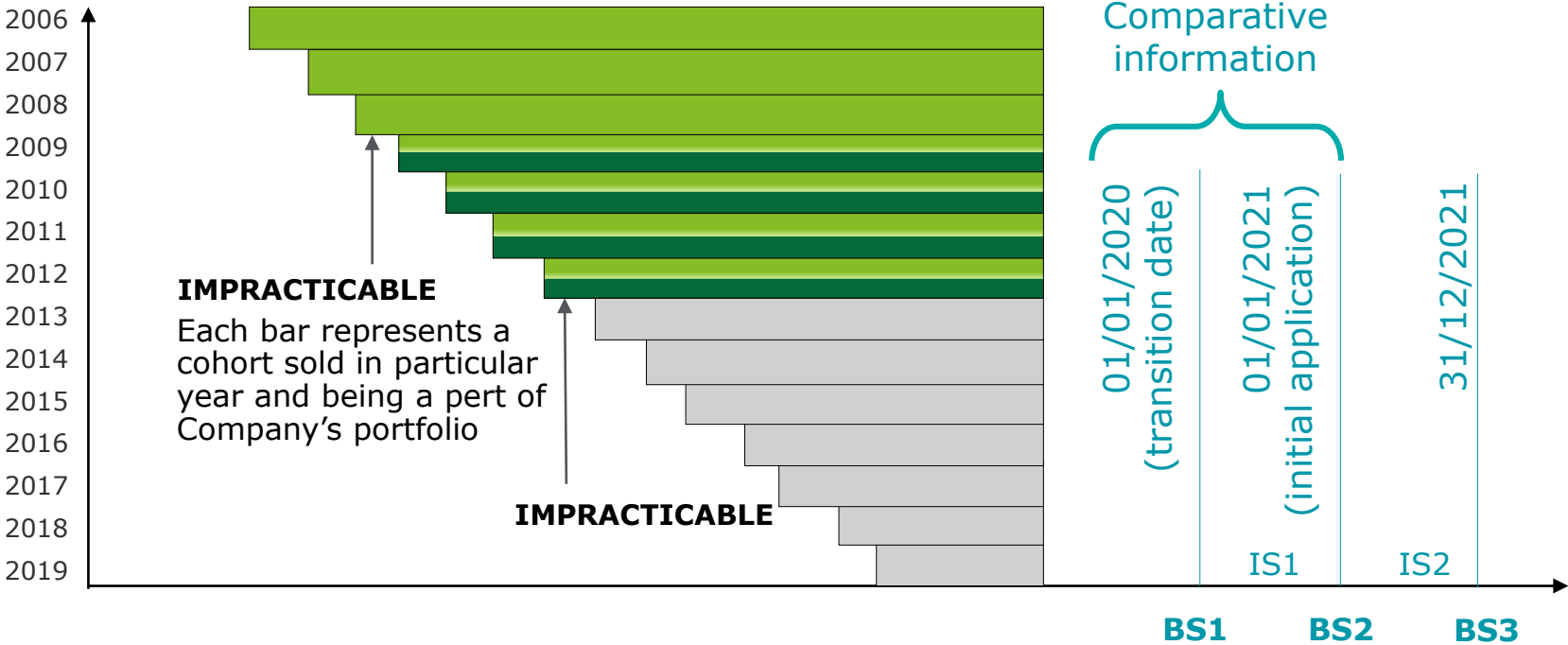
Simplest method
Historical data not required

Needs proof that fully retrospective method is impracticable
Requires future disclosures
Incomparable with new cohorts
Challenges connected with Fair Value for insurance liabilities
Lack of/low CSM to allocate?

Introduction

Basic principles (1/2)

Sales cohort for a portfolio



Full retrospective application of the new requirements is required, unless this is impracticable.

Where impracticable, the Company can either apply:

- the simplified approach, and fair value approach from next impracticability point onwards, or
- the fair value approach.

Approach:

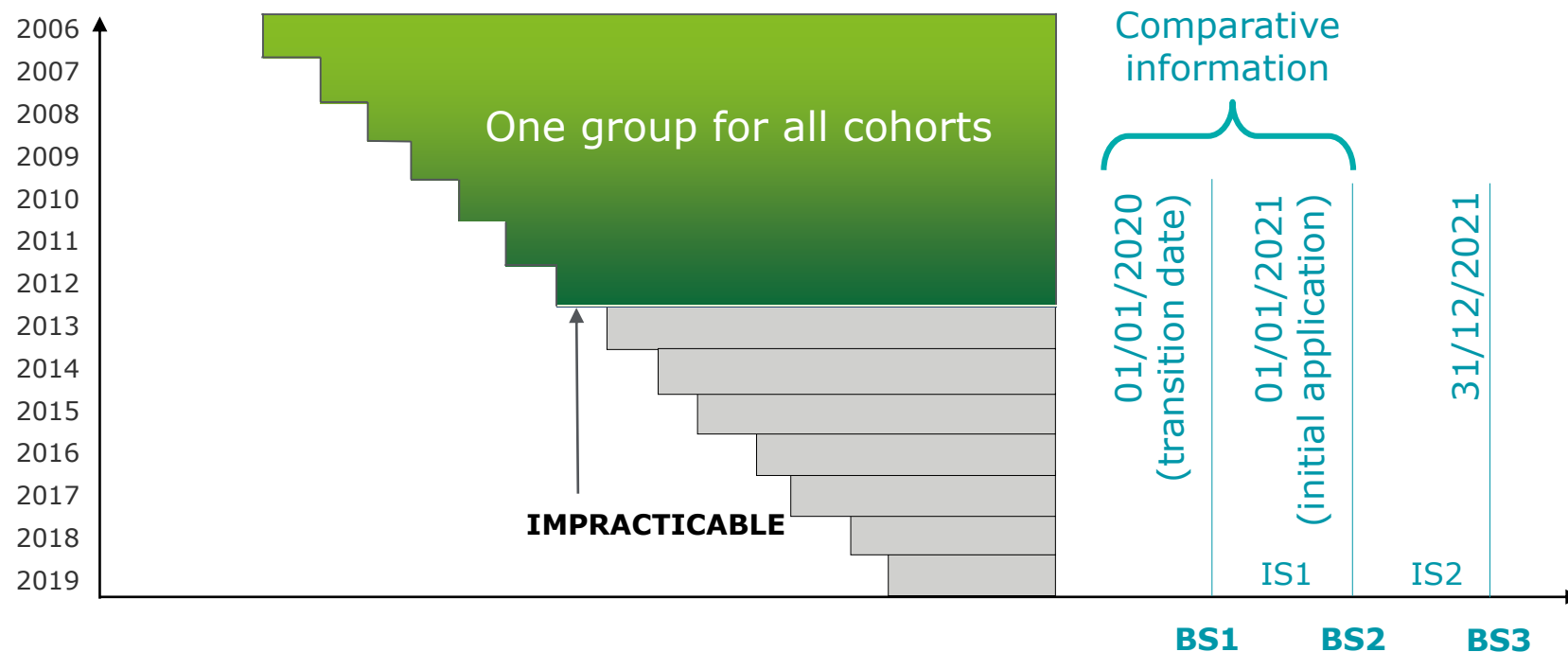
- Fully retrospective
- Modified retrospective
- Fair value

BS = Balance Sheet
IS = Income Statement

Introduction

Basic principles (2/2)

Sales cohort for a portfolio



Grouping by sales periods may not always be possible (e.g. IT system limitations, loss of data). Such situation may prevent from setting CSM amortisation factor and discount rate curves „locked-in“.

For such documented cases, simplification is permissible

Approach:

- Fully retrospective
- Modified retrospective
- Fair value

BS = Balance Sheet
IS = Income Statement

Part 4: Examples

Example 1: Simple insurance contract accounting

Simple insurance contract

Contract
<ul style="list-style-type: none">• Single premium 100,0• Duration: 3 years• Acquisition costs: 4,0
Expected outflows
<ul style="list-style-type: none">• 1. year: 10,0• 2. year: 23,0• 3. year: 50,0
Risk adjustment
<ul style="list-style-type: none">• 1. year: 5,0• 2. year : 6,0• 3. year : 7,0
Discounting

Building Block Approach Insurance Liability

PV of cash inflows:	
Single Premium	-100,0
PV of cash outflows	
Acquisition costs	4,0
Expected outflows	83,0
Discounting	-7,7
Total	79,3
Risk adjustment	
Risk adjustment for 3 years	18,0
Discounting	-1,4
Total	16,6
Contractual service margin	
	4,1
Insurance liability at inception	
	0,0

a) Comprehensive income at contract inception

<u>Assets</u>	<u>Liabilities</u>	<u>Expenses</u>	<u>Revenue</u>
	Profit 0,0		
	OCI 0,0		
	Capital 0,0		
	Insurance Liability		
	a) PV CF inflows -100,0		
	a) PV CF outflows 79,3		
	a) Risk adjustment 16,6		
	a) CSM 4,1		
	Total 0,0		

b) Premium received and commission payed out

<u>Assets</u>		<u>Liabilities</u>		<u>Expenses</u>	<u>Revenue</u>
		Profit	0,0		
		OCI	0,0		
		Capital	0,0		
Cash		Insurance liability			
b) Premium	100,0	a) PV CF inflows	-100,0		
b) Commission	-4,0	a) PV CF outflows	79,3		
		b) Prem. Payment	100,0		
Cash	96,0	b) Comm. Payment	-4,0		
		EPV CF	75,3		
		a) Risk adjustment	16,6		
		a) CSM	4,1		
		Insurance liability	96,0		

c)-h) After 1st year (actual = expected)

Assets		Liabilities	
Cash		Profit	2,5
b) Premium	100,0	OCI	0,0
b) Commission	-4,0	Capital	2,5
g) Claims	-10,0	Insurance liability	
Cash	86,0	a) PV CF inflows	-100,0
		a) PV CF outflows	79,3
		b) Prem. Payment	100,0
		b) Comm. Payment	-4,0
		g) Discount unwind	3,0
		h) Claims	-10,0
		EPV CF	68,3
		a) Risk adjustment BoP	16,6
		d) RA release	-5,0
		g) Discount unwind	0,7
		Risk adjustment	12,3
		a) CSM BoP	4,1
		d) CSM release	-1,4
		g) Discount unwind	0,2
		CSM	2,9
		Insurance Liability	83,5

Expenses		Revenue	
		Insurance Revenue	
c) Claims	10,0	c) Claims	10,0
f) Interest	3,9	d) RA Release	5,0
		e) CSM Release	1,4
Total	13,9	Total	16,4

c) Claims – costs
d) Release of Risk Adjustment
e) Release of CSM
f) Interest accreted
g) Claims payment (including any fund)

Example 2: Where did my premiums disappear

Illustrative example - introduction

- Term insurance product

Annual premium 100

Death benefit 1000

- *No risk adjustment & no discount assumed for simplicity*

Projected number of policies at inception

Year	1	2	3	4	5	6	7	8	9	10
# of policies	10	10	10	10	10	5	5	5	5	5
# of deaths	0	0	0	0	0	0	0	0	0	0
# of surrenders	0	0	0	0	5	0	0	0	0	0
# of maturities	0	0	0	0	0	0	0	0	0	5

Projected CFs at inception

Year	1	2	3	4	5	6	7	8	9	10
Premium	1000	1000	1000	1000	500	500	500	500	500	500
Claims	0	0	0	0	0	0	0	0	0	0

=> Fulfillment CFs = -7000 (block 1, 2, 3)

=> CSM = 7000 (block 4)

Illustrative example – Actual = Expected

Actual number of policies

Year	1	2	3	4	5	6	7	8	9	10
# of policies	10	10	10	10	10	5	5	5	5	5
# of deaths	0	0	0	0	0	0	0	0	0	0
# of surrenders	0	0	0	0	5	0	0	0	0	0
# of maturities	0	0	0	0	0	0	0	0	0	5

Actual CFs

Year	1	2	3	4	5	6	7	8	9	10
Premium	1000	1000	1000	1000	500	500	500	500	500	500
Claims	0	0	0	0	0	0	0	0	0	0

Illustrative P&L

Year	1	2	3	4	5	6	7	8	9	10	Total
Expected claims and expenses	0	0	0	0	0	0	0	0	0	0	0
Experience adjustments - P&L	0	0	0	0	0	0	0	0	0	0	0
Contractual service margin release	966	966	966	966	724	483	483	483	483	483	7000
Total revenue	966	966	966	966	724	483	483	483	483	483	7000
Claim expenses	0	0	0	0	0	0	0	0	0	0	0
Total expenses	0	0	0	0	0	0	0	0	0	0	0
Operating result	966	966	966	966	724	483	483	483	483	483	7000

Illustrative example – More surrenders

Actual number of policies

Year	1	2	3	4	5	6	7	8	9	10
# of policies	10	10	10	10	10	4	4	4	4	4
# of deaths	0	0	0	0	0	0	0	0	0	0
# of surrenders	0	0	0	0	6	0	0	0	0	0
# of maturities	0	0	0	0	0	0	0	0	0	4

Actual CFs

Year	1	2	3	4	5	6	7	8	9	10
Premium	1000	1000	1000	1000	400	400	400	400	400	400
Claims	0	0	0	0	0	0	0	0	0	0

Illustrative P&L

Year	1	2	3	4	5	6	7	8	9	10	Total
Expected claims and expenses	0	0	0	0	0	0	0	0	0	0	0
Experience adjustments - P&L	0	0	0	0	-100	0	0	0	0	0	-100
Contractual service margin release	966	966	966	966	724	383	383	383	383	383	6500
Total revenue	966	966	966	966	624	383	383	383	383	383	6400
Claim expenses	0	0	0	0	0	0	0	0	0	0	0
Total expenses	0	0	0	0	0	0	0	0	0	0	0
Operating result	966	966	966	966	624	383	383	383	383	383	6400

Loss of premium of 100 in the 5th year (loss recognized immediately in P&L through correction of insurance revenue)

CSM in 5th year is decreased by 500 because of less premium in future years

CSM amortization pattern stays the same

600 of annual premium lost => -600 in profit

Illustrative example – Less surrenders

Actual number of policies

Year	1	2	3	4	5	6	7	8	9	10
# of policies	10	10	10	10	10	6	6	6	6	6
# of deaths	0	0	0	0	0	0	0	0	0	0
# of surrenders	0	0	0	0	4	0	0	0	0	0
# of maturities	0	0	0	0	0	0	0	0	0	4

Actual CFs

Year	1	2	3	4	5	6	7	8	9	10
Premium	1000	1000	1000	1000	600	600	600	600	600	600
Claims	0	0	0	0	0	0	0	0	0	0

Illustrative P&L

Year	1	2	3	4	5	6	7	8	9	10	Total
Expected claims and expenses	0	0	0	0	0	0	0	0	0	0	0
Experience adjustments - P&L	0	0	0	0	100	0	0	0	0	0	0
Contractual service margin release	966	966	966	966	724	583	583	583	583	583	7500
Total revenue	966	966	966	966	824	583	583	583	583	583	7600
Claim expenses	0	0	0	0	0	0	0	0	0	0	0
Total expenses	0	0	0	0	0	0	0	0	0	0	0
Operating result	966	966	966	966	824	603	603	603	603	603	7600

Gain of premium of 100 in the 5th year

CSM in 5th year is increased by 500 because of more premium in future years

CSM amortization pattern stays the same

600 of annual premium more => +600 in profit

Thank you!
Questions?

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