



The Role of Actuarial Models in Risk Assessment: A Study on Insurance Pricing and Underwriting

Dr. Shrinivas Patil¹, Saravanan R²

¹ Professor -Finance, ²MBA Student of Finance

Faculty of Management Studies, CMS Business School, Jain (Deemed-to-be University), Bengaluru, Karnataka – 560009

dr.shrinivas_patil@cms.ac.in, saravanan_r23@cms.ac.in

ABSTRACT

The ability to accurately assess risk is a cornerstone of the insurance industry, directly influencing premium pricing and underwriting decisions. Traditional actuarial models, such as Generalized Linear Models (GLMs), have long been used to evaluate risk factors, but they often fail to capture complex, non-linear relationships between variables. With advancements in predictive analytics and machine learning, insurers are increasingly integrating data-driven techniques to improve pricing accuracy and risk assessment. This study explores the role of actuarial models in insurance underwriting, focusing on how age, BMI, and smoking status impact premium calculations.

This research utilizes secondary data from an insurance dataset to analyze the statistical relationships between key risk factors and premium amounts. A T-test was conducted to compare the premiums of smokers and non-smokers, revealing a statistically significant difference ($p < 0.0001$). Correlation and regression analysis further demonstrated that higher BMI and increasing age are associated with higher premium costs, confirming a risk-based pricing approach. Additionally, polynomial regression models provided a better fit than linear models, suggesting a non-linear interaction between risk variables and premium determination.

The findings underscore the importance of incorporating advanced actuarial models in underwriting to enhance pricing efficiency and fairness. Insurers must adapt to evolving risk assessment techniques, leveraging machine learning and predictive analytics to refine premium structures. This study contributes to the growing field of actuarial science by comparing traditional and AI-driven risk assessment methods. Future research should consider additional factors, such as pre-existing medical conditions and behavioral data, to further improve actuarial accuracy.

Keywords: *Actuarial Models, Insurance Risk Assessment, Premium Pricing, Underwriting, Predictive Analytics, Regression Analysis, Machine Learning*

Introduction

Risk assessment plays a crucial role in the insurance industry, where actuaries and underwriters determine premium pricing based on an individual's likelihood of making a claim. Traditional actuarial models, such as Generalized Linear Models (GLMs) and credibility theory, have been widely used for this purpose. These models rely on historical data, probability distributions, and statistical techniques to predict future risks and claim probabilities. However, as insurance markets become more complex, traditional risk assessment methods face limitations, particularly in handling large datasets and capturing non-linear relationships between risk factors and premium amounts.

With advancements in predictive analytics and machine learning, insurers now have the ability to improve pricing accuracy by incorporating advanced actuarial techniques. Modern risk assessment models consider a range of factors, including demographic attributes, health indicators, lifestyle choices, and behavioral data. Among these, age, Body Mass Index (BMI), and smoking status have been identified as significant determinants of insurance premium pricing. Older individuals, those with higher BMI levels, and smokers are more likely to develop health issues, leading to higher medical costs and greater insurance claims. Therefore, understanding how these variables influence risk assessment is essential for ensuring fair and effective premium pricing strategies.

Problem Statement

The challenge faced by insurance companies is to accurately quantify risk and price policies accordingly while maintaining fairness and regulatory compliance. Traditional actuarial models, while effective, often fail to capture non-linear risk patterns and may oversimplify complex relationships between policyholder characteristics and premium rates. For instance, the relationship between BMI and health risks is not always linear, as individuals

with extremely high BMI levels face exponentially higher risks than those in moderate ranges. Similarly, while smoking is widely recognized as a high-risk factor, the extent to which it impacts insurance pricing across different demographic groups needs further examination.

To address this gap, this study investigates how actuarial models assess the impact of smoking, BMI, and age on insurance premiums. By applying statistical analysis and predictive modeling techniques, the study evaluates the effectiveness of traditional vs. machine learning-based actuarial models in pricing insurance policies. Understanding these relationships can help insurers develop more accurate, risk-adjusted pricing models that balance financial sustainability with policyholder affordability.

Research Objectives

This research aims to:

- Evaluate the impact of key risk factors (age, BMI, smoking) on insurance premium pricing.
- Compare the effectiveness of traditional actuarial models vs. predictive analytics in risk assessment.
- Determine whether linear or non-linear models better predict premium variations.
- Provide data-driven recommendations for improving insurance pricing models.

Significance of the Study

This study contributes to both academic research and industry practice by:

Bridging the gap between traditional actuarial models and modern data analytics.

Providing insights on how specific risk factors influence premium pricing.

Helping insurance companies optimize underwriting strategies.

Enhancing fairness and transparency in insurance pricing.

By incorporating machine learning techniques, this research explores how predictive analytics can improve underwriting accuracy, offering insurers a competitive edge in an increasingly data-driven industry.

Literature Review

Frees, Derrig, & Meyers (2019) – Predictive Modeling in Actuarial Science

Frees et al. (2019) explore the role of predictive modeling techniques in actuarial science, emphasizing their significance in risk assessment and underwriting decisions. The study highlights that traditional actuarial model, such as credibility theory and GLMs, remain foundational in insurance pricing, but they have limitations in handling large datasets and non-linear relationships between risk factors. The authors argue that insurers must adopt more flexible and data-driven approaches to improve pricing accuracy and risk segmentation. The study further suggests that machine learning techniques, such as gradient boosting and random forests, can outperform traditional actuarial models when applied to insurance pricing.

Antonio & Beirlant (2017) – The Application of Generalized Linear Models in Insurance

Antonio and Beirlant (2017) discuss the application of Generalized Linear Models (GLMs) in the insurance sector, highlighting their effectiveness in estimating premium pricing based on policyholder characteristics. The study finds that GLMs work well when the relationships between risk factors and insurance claims are linear, but fail to capture complex interactions when risk factors exhibit non-linear dependencies. The authors suggest incorporating polynomial regression or machine learning techniques to improve risk prediction, particularly for variables such as BMI, which have exponential effects on health risks.

Eling & Lehmann (2018) – The Impact of Big Data and Machine Learning on Insurance Pricing

Eling and Lehmann (2018) examine how big data and machine learning are revolutionizing insurance underwriting. The study finds that insurance companies using machine learning algorithms have seen a 20% improvement in predictive accuracy compared to those relying solely on traditional actuarial models. The authors highlight that AI-driven actuarial models enable insurers to personalize premium pricing based on a broader set of risk factors, including behavioral data, health records, and real-time monitoring from wearable devices. However, the study also cautions against the ethical and regulatory challenges associated with AI-based risk assessment.

Shi & Feng (2021) – Deep Learning in Insurance Underwriting

Shi and Feng (2021) investigate the application of deep learning models in insurance underwriting, specifically in predicting policyholder risk and pricing premiums. The study compares traditional actuarial techniques with neural networks and ensemble learning methods, concluding that deep learning

models achieve higher accuracy in complex risk segmentation. The authors emphasize that while traditional actuarial models provide explainability, deep learning techniques capture hidden patterns in large datasets, making them particularly useful for detecting high-risk policyholders.

Wüthrich & Merz (2020) – Machine Learning Methods in Actuarial Science

Wüthrich and Merz (2020) provide a comprehensive analysis of machine learning methods in actuarial science, discussing their impact on risk assessment, premium pricing, and claims prediction. The study finds that random forests, gradient boosting, and support vector machines can significantly improve premium pricing accuracy by capturing non-linear risk dependencies. The authors suggest that while AI-based actuarial models are promising, they require careful validation to ensure fairness and regulatory compliance.

Identified Research Gaps

While existing studies provide valuable insights, several gaps remain in the current literature:

Lack of Non-Linear Actuarial Modeling: Most studies focus on linear regression models, but real-world insurance risks are often non-linear (Eling & Lehmann, 2018). This research aims to bridge this gap by evaluating polynomial regression models.

Comparing Traditional vs. AI-Based Models: Limited research directly compares GLMs with machine learning techniques in actuarial science. This study aims to analyze predictive accuracy across different models.

The Role of Behavioral and Lifestyle Data in Risk Assessment: Most studies focus on demographic and medical factors but do not incorporate behavioral and lifestyle variables. Future research should explore how wearables and digital health data influence risk-based pricing.

Regulatory & Ethical Considerations: As AI-based actuarial models gain popularity, concerns over data privacy and algorithmic bias have emerged. Further research is needed to ensure compliance with ethical underwriting practices.

Research Design

This study adopts a quantitative research approach, utilizing secondary data analysis to examine how actuarial models assess risk and determine insurance premiums. Given the objective of evaluating the impact of key risk factors (age, BMI, and smoking status) on premium pricing, a statistical modeling framework is employed to compare traditional actuarial techniques with advanced predictive analytics.

The research design focuses on hypothesis-driven statistical testing, using techniques such as T-tests, correlation analysis, and regression modeling to analyze the relationship between risk variables and insurance premium amounts. Additionally, a comparative analysis of linear vs. non-linear regression models is conducted to determine the best-fit approach for premium estimation.

Data Collection & Variables

This study relies on secondary data obtained from a publicly available insurance dataset, containing demographic and medical information of policyholders along with their corresponding premium amounts. The dataset provides an appropriate foundation for assessing actuarial risk factors commonly used in insurance underwriting.

Key Variables Used in the Study

Variable Name	Type	Description
Premium Amount	Dependent	The total insurance premium paid by a policyholder (in monetary value).
Age	Independent	The age of the policyholder (measured in years).
BMI	Independent	Body Mass Index (BMI) indicating the individual's health risk.
Smoking Status	Independent	Binary variable: 1 (Smoker), 0 (Non-Smoker).
Children	Control	Number of dependents covered under the policy.
Region	Control	Geographic location of the policyholder (categorized).

These variables are selected based on their strong correlation with risk assessment in actuarial modeling, as demonstrated in previous research studies.

Data Analysis Techniques

To effectively assess the impact of actuarial models on premium pricing, the study employs the following statistical techniques:

Descriptive Statistics

- The dataset is first analyzed using descriptive statistics to summarize key trends and distributions.
- This includes: Mean, median, and standard deviation for numerical variables.
- Frequency distributions for categorical variables such as smoking status.
- Boxplots and histograms to visualize premium variations among different risk groups.

Hypothesis Testing

The study tests three key hypotheses using statistical techniques to determine whether age, BMI, and smoking status significantly impact insurance premium amounts.

T-Test:

Used to compare the premium differences between smokers and non-smokers.

Tests whether the difference in premiums is statistically significant ($p < 0.05$).

Correlation Analysis:

Measures the strength of the relationship between age, BMI, and insurance premiums.

Uses Pearson correlation coefficients (r-values) to assess linear relationships.

Regression Analysis:

Linear Regression: Evaluates how age, BMI, and smoking status influence premium pricing.

Polynomial Regression: Determines whether a non-linear model better predicts premium variations.

Regression Model Selection

Since actuarial models traditionally rely on linear regression, this study first applies a multiple linear regression model to determine how well risk factors predict premium amounts. The general regression equation is:

Model Evaluation Criteria:

R² Score – Measures how well the model explains premium variability.

P-Values – Determines statistical significance of independent variables.

Residual Plots – Checks model assumptions and prediction accuracy.

Data Validity and Reliability

- Handling missing values through mean/mode imputation (if applicable). Checking for outliers using boxplots and histograms.
- Standardizing numerical variables to ensure uniform scale across predictors. Encoding categorical variables (e.g., converting smoking status into binary values).

Ethical Considerations

Since this study relies on secondary data, it does not involve direct human participants or primary data collection. However, ethical considerations are still addressed by:

Using publicly available datasets that comply with data privacy standards.

Ensuring no personally identifiable information (PII) is included in the analysis.

Acknowledging the limitations of using secondary data, such as the lack of real-time behavioral insights.

Results

This section presents the findings from the statistical tests and regression models applied to the dataset. The results focus on how age, BMI, and smoking status influence insurance premiums and compare the performance of linear and polynomial regression models in predicting premium amounts.

Hypothesis Statements and Testing

The study tests three main hypotheses related to insurance premium pricing:

H₁: Smoking increases insurance premiums.

Statistical Test Used: Independent T-Test

Expected Outcome: Smokers will have significantly higher premiums than non-smokers.

H₂: Higher BMI leads to higher insurance premiums.

Statistical Test Used: Correlation Analysis & Regression Modeling

Expected Outcome: BMI will have a positive correlation with premium amounts, meaning individuals with higher BMI will pay more.

H₃: Age is positively correlated with insurance premiums.

Statistical Test Used: Correlation & Regression Analysis

Expected Outcome: Older individuals will pay higher premiums due to increased health risks associated with aging.

Descriptive Statistics Results

Descriptive statistics provide an overview of the distribution of key variables in the dataset.

Variable	Mean	Median	Standard Deviation	Minimum	Maximum
Age (Years)	39.2	39	14.0	18	64
BMI	30.6	30.4	6.1	15.96	53.13
Premium Amount (\$)	13,270.42	9,382.03	12,110.01	1,121.87	63,770.42

Key Observations:

- The average age of policyholders is 39 years, ranging from 18 to 64 years. The average BMI is 30.6, indicating that a significant portion of the dataset may fall into overweight or obese categories.
- Premium amounts vary widely, with the highest premium reaching \$63,770, suggesting that certain risk factors significantly influence pricing.

Hypothesis Testing Results

To test the effect of smoking, age, and BMI on insurance premiums, statistical hypothesis tests were conducted.

T-Test: Smokers vs. Non-Smokers

A T-test was used to compare premium amounts between smokers and non-smokers, testing **H₁**: Smoking increases insurance premiums.

Group	Mean Premium (\$)	T-Statistic	P-Value
Smokers	32,500.75	46.66	0.0000
Non-Smokers	8,434.27		

Interpretation:

Smokers pay significantly higher premiums than non-smokers.

The p-value (0.0000) is less than 0.05, confirming that the difference is statistically significant.

H₁ is supported, meaning smoking significantly impacts insurance pricing.

Correlation Analysis: Age, BMI & Premiums

A correlation analysis was conducted to determine the strength of the relationships between age, BMI, and premium amounts, testing H₂ and H₃.

Variable 1	Variable 2	Correlation Coefficient (r)
Age	Premium Amount	0.29 (Positive Correlation)
BMI	Premium Amount	0.20 (Positive Correlation)

Interpretation:

- Older individuals tend to pay higher premiums, as seen from the positive correlation between age and premium amount.

- BMI also has a positive correlation, though weaker than age, suggesting that higher BMI is associated with increased insurance costs.
- H₂ and H₃ are supported, confirming that both age and BMI influence insurance premiums.

Regression Analysis Results

To assess the predictive power of age, BMI, and smoking status on insurance premiums, regression models were applied.

Linear Regression Model Results

Variable	Coefficient (β)	P-Value
Age	250.3	0.002
BMI	128.5	0.015
Smoking Status	23,800.4	0.000
R² Score	0.7836	

Interpretation:

- Smoking has the strongest impact on premium amounts, increasing costs by \$23,800 on average.
- Both age and BMI are statistically significant, meaning they also influence premium costs.
- The R² value (0.7836) indicates that 78.36% of the variation in premium amounts is explained by age, BMI, and smoking.

Polynomial Regression Model Results

Model Type	R ² Score
Linear Regression	0.7836
Polynomial Regression (Degree=2)	0.8660

Interpretation:

- The polynomial regression model performs better than linear regression, with a higher R² score (0.8660).
- This suggests that premium pricing follows a non-linear trend, meaning age and BMI have a compounding effect on premiums.

Key Findings

Descriptive Statistics:

The dataset shows significant variations in premium pricing, with smokers paying higher premiums.

T-Test Results:

Smokers pay significantly higher premiums than non-smokers (H₁ supported).

Correlation Analysis:

Age and BMI positively correlate with insurance premiums (H₂ and H₃ supported).

Regression Analysis:

Smoking has the strongest impact on premium pricing.

Polynomial regression provides a better model for predicting premiums, confirming non-linear relationships between age, BMI, and premium amounts.

The results confirm that actuarial models effectively predict insurance premium pricing based on age, BMI, and smoking status. Smoking has the largest impact on premiums, followed by age and BMI. Additionally, the study highlights that premium pricing follows a non-linear trend, meaning insurers should consider more advanced actuarial techniques for accurate risk assessment.

Conclusion

This study aimed to analyze the role of actuarial models in risk assessment and their application in insurance pricing and underwriting. Using secondary data, the research focused on understanding the impact of age, BMI, and smoking status on insurance premium amounts. Various statistical techniques, including T-tests, correlation analysis, and regression models, were applied to evaluate these relationships.

The findings confirm that smoking status has the strongest impact on premium amounts, with smokers paying significantly higher premiums than non-smokers. Additionally, age and BMI positively correlate with insurance premiums, indicating that older individuals and those with higher BMI levels are charged higher premiums due to increased health risks. The regression analysis further highlighted that non-linear models (such as polynomial regression) provide a better fit for predicting premium variations compared to linear models, suggesting that insurance risk assessment is more complex than simple linear relationships.

The study also demonstrates the limitations of traditional actuarial models and the growing need for advanced predictive analytics and machine learning techniques in insurance pricing. By integrating data-driven actuarial models, insurers can achieve greater accuracy in risk assessment and more equitable premium pricing.

Overall, the research contributes valuable insights into insurance pricing strategies, supporting the adoption of more sophisticated actuarial techniques that improve the efficiency and fairness of insurance underwriting.

Future Scope

While this study provides a strong foundation for understanding actuarial risk assessment, several areas remain open for further exploration:

Incorporating Additional Risk Factors: Future research should analyze medical history, lifestyle behaviors, and pre-existing conditions to improve the accuracy of premium predictions.

Machine Learning and AI-Driven Actuarial Models: The integration of deep learning and AI-based predictive analytics can help insurers create personalized pricing strategies and detect fraudulent claims more effectively.

Impact of Behavioral Data: With the rise of wearable health devices and telematics, insurers can explore how real-time health and activity data impact risk assessment and premium pricing.

Regulatory and Ethical Considerations: Further research should examine how data privacy laws, algorithmic bias, and fairness in underwriting impact the adoption of advanced actuarial models in insurance pricing.

Cross-National Comparative Studies: Future research can compare insurance pricing models across different countries to understand how demographic, economic, and healthcare factors influence actuarial risk assessment globally.

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