## Longevity literacy: Preparing for 100-year lives?

The TIAA Institute recently published a study on financial and longevity literacy. ${ }^{1}$ Improving knowledge about these topics enables and promotes saving, investing, and planning behaviors that lead to better financial outcomes in retirement. Unfortunately, the survey indicated that most adults have poor longevity literacy, and those with low longevity literacy tended to be more financially fragile. Therefore, a basic understanding of how long one might live is rather important to household financial security.

While the question "When am I going to die?" is impossible to answer on the individual level, we can provide answers based on an average. Note that the average age at death may not be that meaningful, as it will depend on the underlying mortality table used in the calculation, will vary by current age, and few people die at the average age.
Many are familiar with the recently released Centers for Disease Control and Prevention (CDC) data that says life expectancy in the United States is now lower than age $77 .{ }^{2}$ This is a reduction from prior years, due to COVID-19 and other factors. We can compare the CDC's table to the 2019 Social Security Administration (SSA) table, which was the last table not "corrupted" by pandemic data. ${ }^{3}$ (The SSA believes that, over the long term, the U.S. mortality distribution will eventually return to pre-COVID-19 levels.) This table indicates that the average retiree (full retirement at age 67) will live until roughly age 85 (around 84 for males and 87 for females). Yet another mortality table is one that TIAA uses, indicating the average age at death for retirees is closer to $90 .{ }^{4}$ The different answers of 77 , 85 and 90 seem large, so we will start with some basics to explain why.

[^0]To begin, Figure 1 provides a view of male and female mortality curves derived from the 2019 SSA mortality table. Note that while the numbers may be different, the shape of this
curve would be similar no matter which mortality table (CDC, SSA or TIAA) we used.

Figure 1


As you can see on the graph, if we start with 100,000 males, at around age 80 only 50,000 remain; using this table, a male born in 2019 has a $50 \%$ chance of living to about age 80 , but you can also see that 25,000 , or $25 \%$, of them are still alive at 88 and $10 \%$ remain at 93 . For females, the same probabilities occur at ages 85,91 and $96 .{ }^{5}$
Now let's move on to retirement planning. Should a 67-yearold male retiree think that on average he will live only another 13 years, until age 80 ? The general answer is no and, to
clarify, let's ask the question another way: Should a 79-yearold retiree expect to die in a year? Taking this to an extreme, what should a 81-year-old be thinking about their remaining life expectancy? To answer these questions, Figure 2 uses data from the 2019 SSA mortality table to show the likelihood that a person age 67 will make it to a future age. For example, there is about a $66 \%$ chance a 67 -year-old man will live to age 80 and about a $75 \%$ likelihood that a 67 -year-old female lives to that age.

Figure 2


When we start with a cohort of retirees and use the SSA table, $50 \%$ of the males will still be alive at 84 . Using a life expectancy of 84 as opposed to 80 means planning for an extra four years of life, and instead of 13 years of postretirement spending we now need to fund for 17 years. Importantly, there is a major difference in the calculations when using life expectancy at birth versus life expectancy at retirement. As
one ages, the number of expected years of future life decreases, but the expected age at death increases.

Table 1 and 1A below, based on the SSA 2019 tables, highlight the impact of future life expectancy over time (rounded to the nearest age and using a $50 \%$ probability of death, or the median, for the average).

Table 1. Male

| Age | Average future years | Average age at death |
| :--- | :--- | :--- |
| 0 | 80 | 80 |
| 50 | 32 | 82 |
| 67 | 17 | 84 |
| 75 | 11 | 86 |
| 85 | 5 | 90 |
| 90 | 3 | 93 |

Table 2. Female

| Age | Average future years | Average age at death |
| :--- | :--- | :--- |
| 0 | 85 | 85 |
| 50 | 36 | 86 |
| 67 | 20 | 87 |
| 75 | 13 | 88 |
| 85 | 6 | 91 |
| 90 | 4 | 94 |

Tables 1 and 1A, and Table A3 in the Appendix, highlight the importance of understanding the impact of longevity on retirement planning. We must note that $50 \%$ of people will outlive life expectancy; after all, only $50 \%$ of the people in a birth cohort have died, while the other half remain alive. For those who want the added security of not outliving income (or having to cut back later in life), insuring against this longevity risk and planning for life beyond the average is encouraged. As seen in Figure 2 above, using a starting age of 67, a male retiree has a $25 \%$ chance of being alive at 90 and a $10 \%$ chance of still being alive at 94 . For females, the results are ages 92 and 96. Quite often in financial planning age 95 is used as a horizon; hopefully, readers now have a better understanding of why. The negative impact of outliving income is much larger than the negative impact of over saving (and, at worst, leaving the remaining balance to a beneficiary or estate).
Up to this point, my analysis has used the 2019 SSA mortality table; we still must address TIAA's expected mortality assumption. While the SSA is tracking the average American, at TIAA we are dealing with participants whose life expectancy is "above average." There are many factors that help increase life expectancy, including education level, type of work (white collar versus blue collar), pay, access to medical
care, and others. Many of these factors trend positive for TIAA participants, particularly annuitants who self-select into the product. This helps explain why the mortality table that TIAA uses assumes a 67-year-old retiree will live, on average, to about age 90 , with a $25 \%$ chance of being alive at 95 and almost a $10 \%$ likelihood of making it to 100 . To be clear, we are not suggesting that working at an institution with a TIAA plan will result in a longer life-only that the type of people who work at institutions TIAA services have characteristics that often result in a longer life.
The longer a retiree lives, the more savings are needed to fund that retirement; the earlier one starts planning for this eventuality, the lower the cost and the better prepared for it they are. Therefore, it is very important for even younger workers to understand the impact of longevity on retirement saving. An example of the additional saving and assets needed as life expectancy increases is given in Table A3 in the Appendix.
When considering joint life expectancy for a couple consisting of a male and female (both age 67), the odds of needing income for one of the two living into their 90 s, or even until 100 , increases relative to each person's own needs. SSA Tables A1 and A2 (included in the Appendix) indicate there is a $24 \%$
chance the male will be alive at age 90 and a $35 \%$ chance the female will be alive. To arrive at the $24 \%$ figure, for example, we divide 18,895 (the number of men alive at age 90) by 77,366 (the number of men alive at age 67). Assuming independence, the odds of both having died is:

$$
\begin{gathered}
(100 \%-24 \%) \times(100 \%-35 \%)= \\
76 \% \times 65 \%= \\
49 \%
\end{gathered}
$$

This means the odds of at least one member of the couple being alive at age 90 is $51 \%$. Using these same tables, we can also determine that the odds of one or both being alive at age 100 is about $5 \%$. By comparison, using the TIAA tables, the likelihood of one or both being alive at age 100 is about $16 \%$, or 1 in 6 ! Same gender couples would have a lower likelihood of reaching age 100 for two males (12\%) and a higher likelihood for two females ( $20 \%$ ).

In summary, understanding the differences among life expectancy at birth, life expectancy at retirement, and likelihood of living past a particular age are critical to good
financial planning and financial well-being in retirement. The CDC life expectancy number was not meant to be used for retirement planning, as it can confuse rather than enlighten employees planning for retirement. It refers to life expectancy at birth, not at retirement. Furthermore, the CDC number is a snapshot of current health; data released following two years of high deaths due to COVID-19, with the underlying assumption that this trend will continue, further confuses the issue. Even the pre-COVID-19 SSA table may be underestimating life expectancy for much of our readership; adding a few years for an average life expectancy is likely warranted. In addition, retirement planning should not use averages, as there is a $50 \%$ chance that one will live beyond the average, so that too must be taken into consideration. Importantly, we note that we have not addressed the potential increase in life expectancy over the coming decades as advances in science and medicine continue; this may result in more centenarians that ever before. See Table A4 in the Appendix for a history of advances in life expectancy over the past 90 years.

## Appendix

Table A1. SSA 2019 life table-Males

| Age | \# of people | Age | \# of people | Age | \# of people |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 0 | 100,000 | 35 | 96,438 | 70 | 72,915 |
| 1 | 99,392 | 36 | 96,231 | 71 | 71,283 |
| 2 | 99,350 | 37 | 96,017 | 72 | 69,559 |
| 3 | 99,324 | 38 | 95,794 | 73 | 67,732 |
| 4 | 99,305 | 39 | 95,564 | 74 | 65,791 |
| 5 | 99,289 | 40 | 95,327 | 75 | 63,725 |
| 6 | 99,275 | 41 | 95,081 | 76 | 61,519 |
| 7 | 99,262 | 42 | 94,825 | 77 | 59,165 |
| 8 | 99,249 | 43 | 94,557 | 78 | 56,669 |
| 9 | 99,238 | 44 | 94,275 | 79 | 54,041 |
| 10 | 99,227 | 45 | 93,979 | 80 | 51,288 |
| 11 | 99,218 | 46 | 93,665 | 81 | 48,404 |
| 12 | 99,207 | 47 | 93,331 | 82 | 45,385 |
| 13 | 99,193 | 48 | 92,973 | 83 | 42,243 |
| 14 | 99,171 | 49 | 92,588 | 84 | 38,996 |
| 15 | 99,139 | 50 | 92,171 | 85 | 35,663 |
| 16 | 99,096 | 51 | 91,720 | 86 | 32,273 |
| 17 | 99,041 | 52 | 91,232 | 87 | 28,858 |
| 18 | 98,974 | 53 | 90,702 | 88 | 25,457 |
| 19 | 98,894 | 54 | 90,125 | 89 | 22,119 |
| 20 | 98,802 | 55 | 89,497 | 90 | 18,895 |
| 21 | 98,695 | 56 | 88,814 | 91 | 15,840 |
| 22 | 98,575 | 57 | 88,075 | 92 | 13,006 |
| 23 | 98,444 | 58 | 87,278 | 93 | 10,439 |
| 24 | 98,306 | 59 | 86,422 | 94 | 8,172 |
| 25 | 98,162 | 60 | 85,506 | 95 | 6,226 |
| 26 | 98,014 | 61 | 84,527 | 96 | 4,615 |
| 27 | 97,862 | 62 | 83,482 | 97 | 3,327 |
| 28 | 97,704 | 63 | 82,376 | 98 | 2,336 |
| 29 | 97,541 | 64 | 81,212 | 99 | 1,598 |
| 30 | 97,372 | 65 | 79,994 | 100 | 1,068 |
| 31 | 97,198 | 66 | 78,714 | 101 | 696 |
| 32 | 97,017 | 67 | 77,366 | 102 | 442 |
| 33 | 96,830 | 68 | 75,950 | 103 | 272 |
| 34 | 96,638 | 69 | 74,468 | 104 | 163 |

Table A2. SSA 2019 life table-Females

| Age | \# of people | Age | \# of people | Age | \# of people |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 0 | 100,000 | 35 | 98,138 | 70 | 82,950 |
| 1 | 99,495 | 36 | 98,029 | 71 | 81,733 |
| 2 | 99,461 | 37 | 97,914 | 72 | 80,407 |
| 3 | 99,440 | 38 | 97,793 | 73 | 78,967 |
| 4 | 99,423 | 39 | 97,667 | 74 | 77,410 |
| 5 | 99,409 | 40 | 97,534 | 75 | 75,729 |
| 6 | 99,397 | 41 | 97,396 | 76 | 73,906 |
| 7 | 99,386 | 42 | 97,249 | 77 | 71,923 |
| 8 | 99,376 | 43 | 97,094 | 78 | 69,776 |
| 9 | 99,366 | 44 | 96,928 | 79 | 67,463 |
| 10 | 99,357 | 45 | 96,750 | 80 | 64,978 |
| 11 | 99,348 | 46 | 96,557 | 81 | 62,306 |
| 12 | 99,337 | 47 | 96,350 | 82 | 59,434 |
| 13 | 99,326 | 48 | 96,125 | 83 | 56,362 |
| 14 | 99,312 | 49 | 95,882 | 84 | 53,099 |
| 15 | 99,295 | 50 | 95,618 | 85 | 49,655 |
| 16 | 99,275 | 51 | 95,333 | 86 | 46,043 |
| 17 | 99,251 | 52 | 95,024 | 87 | 42,285 |
| 18 | 99,224 | 53 | 94,689 | 88 | 38,410 |
| 19 | 99,192 | 54 | 94,324 | 89 | 34,460 |
| 20 | 99,156 | 55 | 93,927 | 90 | 30,489 |
| 21 | 99,116 | 56 | 93,496 | 91 | 26,561 |
| 22 | 99,071 | 57 | 93,029 | 92 | 22,746 |
| 23 | 99,023 | 58 | 92,524 | 93 | 19,115 |
| 24 | 98,971 | 59 | 91,980 | 94 | 15,737 |
| 25 | 98,917 | 60 | 91,396 | 95 | 12,669 |
| 26 | 98,860 | 61 | 90,767 | 96 | 9,965 |
| 27 | 98,800 | 62 | 90,090 | 97 | 7,656 |
| 28 | 98,737 | 63 | 89,369 | 98 | 5,744 |
| 29 | 98,669 | 64 | 88,607 | 99 | 4,212 |
| 30 | 98,595 | 65 | 87,807 | 100 | 3,021 |
| 31 | 98,515 | 66 | 86,963 | 101 | 2,115 |
| 32 | 98,429 | 67 | 86,065 | 102 | 1,443 |
| 33 | 98,337 | 68 | 85,103 | 103 | 957 |
| 34 | 98,240 | 69 | 84,069 | 104 | 615 |

Table A3. Additional savings needed as life expectancy increases

| Life expectancy: <br> years postretirement | Additional accumulation <br> needed at retirement <br> compared to baseline | Additional monthly <br> savings needed over a <br> $35-$-year career | Additional monthly <br> savings needed over <br> 15 years |
| :--- | :--- | :--- | :--- |
| 13 | N/A | N/A | N/A |
| 17 | $\$ 18,000$ | $\$ 13$ | $\$ 62$ |
| 20 | $\$ 29,000$ | $\$ 20$ | $\$ 99$ |
| 23 | $\$ 38,000$ | $\$ 27$ | $\$ 131$ |
| 28 | $\$ 50,000$ | $\$ 35$ | $\$ 172$ |
| 33 | $\$ 59,000$ | $\$ 41$ | $\$ 203$ |

Assumes a 6\% earnings rate on assets.

The amounts in the table above are based on an original goal to save $\$ 100,000$ to fund 13 years of postretirement spending. But if life expectancy at retirement is more than 13 years, a larger accumulation will be needed for the same annual spending.
For example, if you don't realize until retirement that you might need to plan for 23 more years of income versus 13, it
may be too late to find an extra $\$ 38,000$ to fund your annual income need. However, by starting to save early-\$27 a month for a full working career-one can achieve this goal. Waiting until there are only 15 years left until retirement would increase the additional required savings to $\$ 131$ a month.

Table A4. SSA tables—Life expectancy at age 65

| Year | Male future life <br> expectancy | Female future life <br> expectancy |
| :--- | :--- | :--- |
| 1933 | 12.0 | 13.2 |
| 1943 | 12.1 | 13.7 |
| 1953 | 12.9 | 15.3 |
| 1963 | 12.8 | 16.0 |
| 1973 | 13.2 | 17.4 |
| 1983 | 14.3 | 18.6 |
| 1993 | 15.2 | 18.9 |
| 2003 | 16.3 | 19.2 |
| 2013 | 17.7 | 20.3 |
| 2019 | 18.1 | 20.7 |

[^1]
## Endnotes

1 Yakoboski, P.J., Lusardi, A., \& Hasler, A. (2023). Financial literacy, Iongevity literacy, and retirement readiness: The 2022 TIAA Institute-GFLEC Personal Finance Index. TIAA Institute; Global Financial Literacy Excellence Center. TIAA.org/public/institute/publication/2023/financial_ literacy_longevity_literacy_and_retirement_readiness
2 National Center for Health Statistics. (2023). Life expectancy. Centers for Disease Control and Prevention. cdc.gov/nchs/fastats/lifeexpectancy.htm
3 Social Security Administration. (2022). Actuarial Life Table, 2019. 2022 Trustees Report. ssa.gov/oact/STATS/table4c6_2019_TR2022.html
4 TIAA mortality is based on the 2012 Individual Annuity Mortality Basic Tables for males and females developed by the Society of Actuaries (Tables 2581 and 2582), available at: mort.soa.org/. TIAA merges the male and female tables, and adjusts the resulting table based on our experience over time. As these adjustments are proprietary, this table cannot be shared.
5 Note that throughout this paper when we refer to life expectancy for Social Security or TIAA life tables we use the median life expectancy, the age at which half the people from a starting age - whether at birth or retirement - will be deceased and half still alive. The CDC calculation uses the average number of expected future years. While these numbers are similar, especially at middle age and beyond, they are not exact.

## About the author

Benjamin (aka Benny) Goodman is a Fellow of the Society of Actuaries (FSA) and a Member of the American Academy of Actuaries (MAAA).

He is a Vice President at the TIAA Institute, serving as a subject matter expert on lifetime income.
Benny has been with TIAA since 1988, and has served in a variety of actuarial positions, including life insurance pricing, pension plan pricing, product development and dividend setting. For a number of years he managed the Actuarial Consulting Services area with a focus on pension plan design and meeting individual retirement income needs. Benny also has spent time in non-actuarial roles, including Operations and Institutional Sales.

He earned a B.S. in Mathematics and Computer Science from Touro College. Benny has co-authored a number of papers for the TIAA Institute, and has been a featured speaker at college and university seminars and events across the country, as well as industry conferences (Society of Actuaries, LIMRA, SPARK, etc.)
Benny is married to Yvette (a retired actuary currently teaching high school mathematics), and is the proud father of four, and grandfather to the eight most adorable grandchildren in the world (pictures upon request).

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[^0]:    Any opinions expressed herein are those of the author, and do not necessarily represent the views of TIAA, the TIAA Institute or any other organization with which the author is affiliated.

[^1]:    Note: In addition to the continuing overall improvement in longevity, the difference between males and females has been reduced over the past few decades.

[^2]:    With many thanks to Peretz Perl for his vast knowledge and invaluable insight, as well as Brent Davis and Dave Richardson for the improvements they made to the original paper.

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