The Mental Health Calculator:

User Guide





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1 General

The complexity, which an underwriter faces with mental health disclosures cannot be assessed by a purely univariate underwriting approach. Combinations of multiple diagnoses that include mental illness, risk factors (such as sleep disturbance, lack of concentration or bullying), functional and dependency disorders are much too complex to accurately assess by rating each component individually.

A univariant approach could lead to risks being overestimated or underestimated, which in the worst case could lead to an unjustified declinature of cover for the applicant (overestimated) or a negative impact on the portfolio (underestimated).

That is why we at Munich Re have developed a multivariate approach that encompasses all the main factors influencing mental health underwriting.

2 Structure of the Mental Health Calculator

The Mental Health Calculator (MHC) in MIRA has a semi-static user interface. Individual sections can be expanded and collapsed as needed, while the contents of the sections cannot be changed. For this reason, the variables that can be entered in the respective sections are divided into mandatory and optional entries, as some entries are not mandatory, or present, for all diagnoses. In all sections, the mandatory entry fields are arranged on the left and the optional input fields are listed on the right (depending on disease entry).

Enter the date of the last symptoms

Dates can be entered in a month format or as year only. Please note that if only the year is entered, the last possible date is assumed (i.e. December of the respective year). In cases where loadings are reducing between the first and second year since symptoms, this may result in a higher rating if only the year and not the month is entered. Therefore, when available, the loading better reflects the risk, if the exact date (incl. month) is provided.

Everything is possible – nothing is necessary Inputs even without a main psychiatric diagnosis

The calculator can also be used to assess risk when there is no psychiatric diagnosis (yet). This is a prognostic function that enables the underwriter to assess a potential risk for the development of a mental illness if there are indications (e.g. multiple risk factors or related functional disorders). Depending on the data entered, the corresponding rates and/or additional information texts are then displayed on the results page.

Sections in the calculator:

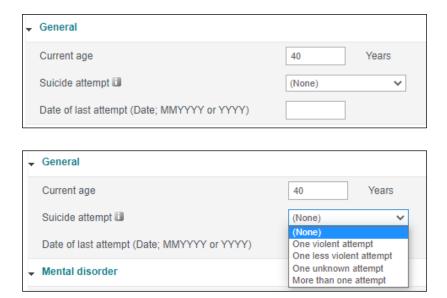
The calculator is divided into four main sections. (i) mental disorders (main diagnoses), (ii) risk factors, (iii) substance-related and non-substance-related dependence disorders, and (iv) functional disorders. The disorders covered by the calculator are summarised in Table 1 of the Appendix.

Section 1 - General information

In the first section, age and, due to the significant impact on risk assessment, suicide attempts are asked.

Suicide attempts are divided into violent and less violent attempts, which in turn affects the severity of mental diseases. Examples for violent and less violent attempts are provided in the info button.

With the exception of age, no mandatory information is required in this section.



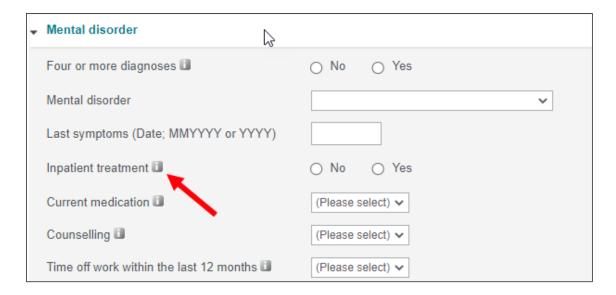
Section 2 - Mental illness

In the section "Mental Disorders", a total of three different illnesses can be selected. By default, only the input mask of the first mental disorder is opened. If there is a need to enter more, the other sections can be expanded.

If four or more diagnoses are present, this can be stated immediately at the top of the section and no further assessment is necessary as no cover is possible under these circumstances.



In the case of entering less than four diagnoses, the information in the individual sections can each be entered independently. This is important because, for example, "incapacity to work in the last 12 months" refers to the specified illness and does not apply generally to all. In case of ambiguities, the information icons provide you with the necessary help text with regards to the entries as shown by the red arrow.



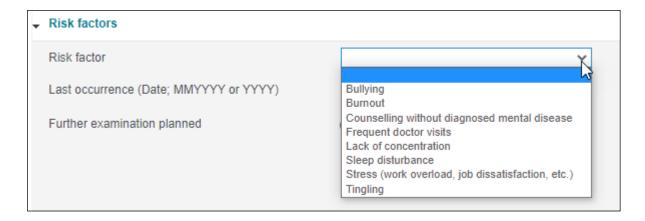
Once a psychiatric diagnosis has been selected, the entries on the left hand side in this section are mandatory whilst it should be noted that the prognostic factors on the right hand side are not mandatory. If you forget to select an entry, the calculator will inform you before it continues to the results page as shown in the screenshot below.



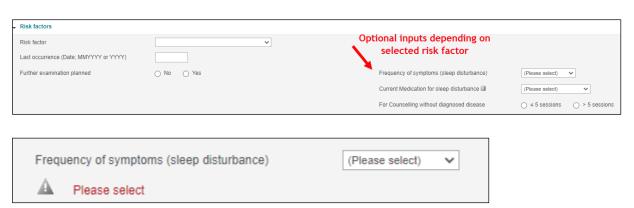
Section 3 - Risk factors

For risk factors, also three entries are possible. Risk factors are assessed independently from mental disorders, except for burnout. As burnout is not listed as an F-diagnosis under ICD-10, this diagnosis cannot be found under the mental disorders in the calculator, however in the background it is handled like one due to the severity of the diagnosis. This also includes that burnout is considered for comorbidities.





On the left hand side of the input field are the general details to be inputted for all risk factors. On the right hand side are additional input fields which are only to be used if sleeping disorders or counselling without diagnosed disease are selected. If entries were made here by mistake and were provided although not required, they will simply not be taken into account. However, if the Risk Factor is sleeping disorders or counselling without diagnosed disease and there is no information inputted into the fields on the right hand side, an error message will be generated as per the below screenshot.



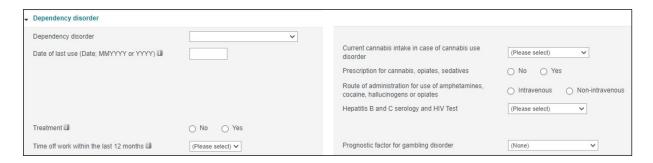
Section 4 - Dependency disorders

Drugs

In the section "Dependency disorders", a total of two different disorders can be entered. For three or more dependencies cover cannot be offered.

Like in the previous sections, there is mandatory fields to be completed on the left hand side of the input field. Optional additional entries are on the right hand side and the fields to be completed are dependent on the dependency disorder selected.

The dependency disorder description (for example cannabis or cocaine) will provide a description of what additional entries are required to be filled out on the right hand side of the input field.

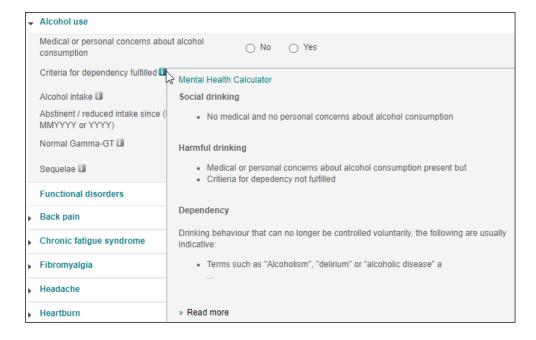


Alcohol abuse

Due to the information required to assess alcohol abuse, this section is listed separately in the calculator.



Here too, help texts provide guidance on how to fill in the form correctly, for example for "criteria for dependence fulfilled" or alcohol consumption.





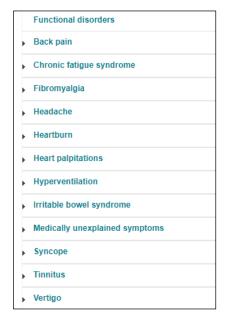


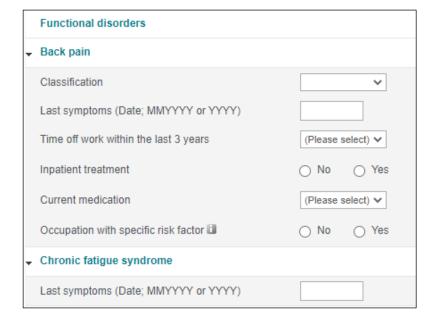
Section 5 - Functional disorders

Section 5 lists the most common mental health-related functional disorders. The main difference to the previous sections is that each functional disorder is listed individually. This is necessary as the calculator takes into account both the mental and somatic components of the respective functional disorder in order to provide the most accurate risk assessment possible. Furthermore, this allows the underwriter to fully assess the risk using the MHC without the necessity of having to look up additional MIRA rating pages.

As each functional disorder requires specific input fields, they cannot be simply summarised within one section. All disorders are therefore listed individually, but collapsed by default.

In this section, all corresponding entries are relevant for an accurate assessment and therefore on the left hand side of the entry field.





3 Special functionalities of the calculator

For details and information on the functionalities of the calculator as well as studies that were conducted to support the MHC, please refer to the MIRA Risk Review Paper 'Mental Health Calculator'".

Below however is a summary:

Comorbidities

The Mental Health Calculator is a holistic approach that closes a gap in the application process. Until now, it was not possible to correlate several mental illnesses and to assess them in a risk-adequate and fair way. Not every combination of mental illnesses can be assessed by just adding the risks; instead, there are combinations that are potentially more severe than their sum and other combinations in turn have a lower risk. The calculator has therefore been designed with special comorbidity matrices at a product level that cover all possible combinations of comorbid risk. In order to ensure maximum transparency for the underwriter, the rates stored on the individual rating pages and the rates determined via the comorbidity matrix are displayed separately on the results page.

Mental illness and functional disorders

Mental illnesses are often accompanied by functional disorders that are directly related. Because the functional disorders listed here all have a direct relationship to the development or severity of mental illness, the rates are divided into two components: A somatic component, which is also shown on the MIRA rate pages, and a mental component, which covers the risk of relapse, worsening, or development of a new mental illness. Yet, the increased risk depends on the temporal context and the evaluation of the potentially increased risk refers only to the mental rate component of the functional disorder. That is to say:

If the last symptoms of a functional disorder were more recent than those of the mental disorder, the risk for a recurrence of the mental disorder is higher. In this case, the additional mental disorder rating component of the functional disorder is taken into account. Where the opposite is true and the last symptoms of a functional disorder are not more recent than the mental disorder symptoms, there is no additional risk and therefore no additional rating required. However, the somatic rate is always given independently of the mental component according to the most recent respective MIRA rating page.

The final ratings can be viewed on the results page and is broken down individually for full transparency.

Increased risk in the absence of mental illness

Everything is possible, nothing is necessary. The Mental Health Calculator is designed in such a way that an accurate rating is provided no matter how much, or little information is provided. However, the calculator can also be used if there is no mental diagnosis, but the underwriter finds indications of an increased risk in the application. At a certain threshold of risk factors and functional disorders, a warning is given to consider a mental exclusion clause. These recommendations are displayed together with the rates on the results page.

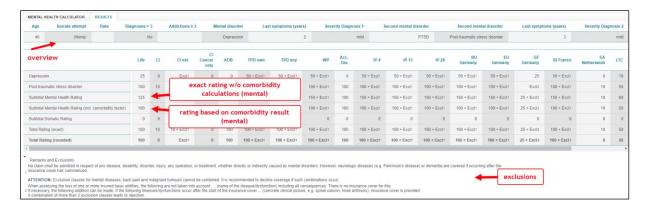
4 Results page

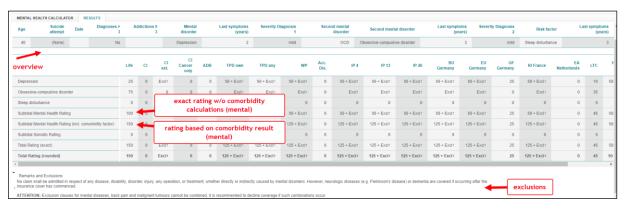
An example of a simple results page with exact and rounded rates

The results page is intended to provide full transparency about our final rate calculation. In the upper lines, the most important inputs are displayed again, which are also transferred to the Risk Synopsis together with all other inputs.

Below are examples of calculations of ratings for all individual diagnoses as well as their aggregation. In our examples below, we have two mental illnesses each. The first one is a combination of a depression + post-traumatic stress disorder, the other depression + obsessive-compulsive disorder. For all mental illnesses, a separately calculated rate is shown, which is aggregated in the next step (Subtotal Mental Health Rating). Then the comorbidity risk is taken into account (subtotal rate incl. comorbidity weighting). In example 1, the total rate is lower than the aggregation, in the second example it is higher due to the increased risk of this combination.

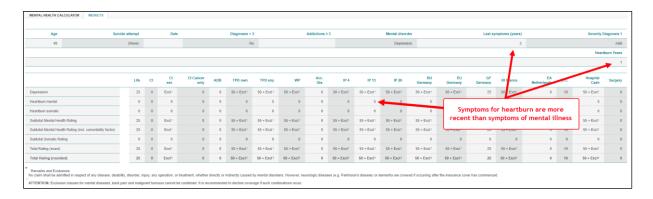
In a final step, the comorbidity-adjusted total rate is rounded to provide the total mental health rating.

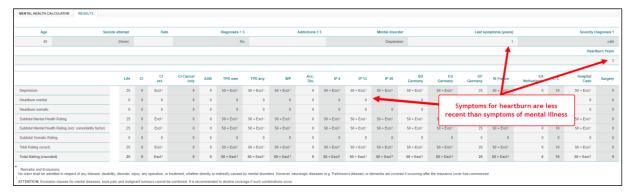




Example of the special rule: chronological order of symptoms

The timing of diagnoses and risk factors or functional disorders can play a role for risk assessment. In our example below, the last symptoms of heartburn occurred after the last symptoms of the mental illness (1st example) and once before (2nd example). When the symptoms of heartburn occur after, the risk is significantly increased and therefore the rating is added, whereas in the 2nd example, it is not increased and therefore not added.

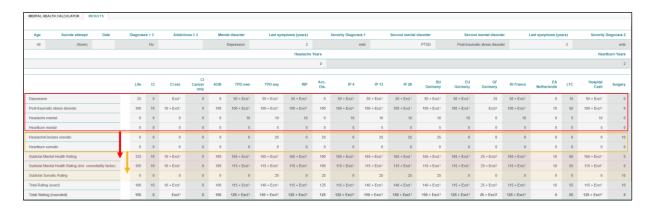




Example functional disease

In the case of functional disorders, a somatic rate is provided in addition to the mental rate component. For each functional disorder, separate ratings are calculated for the mental component and the somatic condition. These separate ratings are then aggregated to the intermediate results and then rounded (via a comorbidity weighting for the mental illness rating) to a total rate.

In addition, a completely aggregated total rate as a combination of the separate mental illness and somatic rates is shown at the bottom.



Warning: Increased risk

Even if no mental diagnosis is present, an accumulation of risk factors and functional complaints can be an indication of a mental illness. In these cases, we explicitly point out the recommendation of an exclusion clause for mental illnesses on the results page, as can be seen in the screenshot.



5 FAQ

Does using the MIRA rating pages for risk assessment of mental health conditions produce different results than using the MHC? Can I estimate only a single psychiatric disorder with the calculator?	When UW only a single mental health condition, using the MIRA rating page is the right way to go. However, the moment, more than one mental health diagnosis is present or additional risk factors, drug abuse or functional disorders, only the calculator will produce the correct result for risk assessment. This is because, risks are over proportional compared to the mere addition of the risks, in other cases the overall risk may be lower. Therefore, whenever faced with more than one diagnosis using the MHC is the strongly preferred option. The Mental Health Calculator can be used to enter and asses a single, but up to three psychiatric diagnoses. In addition, the MHC can be used even in the absence of a diagnosed mental health condition to assess only risk factors (such as sleep and concentration disorders) or functional disorders related to the development of a psychiatric disorder.
Can the calculator be used for risk assessment in the absence of a mental health condition disclosure?	The calculator contains a predictive function that contributes significantly to risk assessment even in the absence of a psychiatric diagnosis. If four or more risk factors or functional disorders are present that have a known link to mental health conditions, a warning is issued indicating to consider an exclusion clause for claims due to mental illness.
Which input fields are mandatory in the calculator and which ones are not?	The calculator is static and therefore all possible inputs have to be displayed. To clarify which input fields are mandatory and which are not, the view of the calculator has been split into two columns. As soon as an input is made within a section, all inputs on the left side are mandatory, the inputs on the right side depend on the diagnosis that was selected. For example, for the risk factor sleeping disorder, the entries about the frequency of symptoms and medication used are required, but not in the case for the input of other risk factors.
What should I do if not all required information is available?	In some cases, not all the information may be available. In principle, the MHC distinguishes between mandatory entries on the left and dependent entries on the right, depending on the selected condition. In some cases, the calculator offers "unknown" as a selection in mandatory input fields. This offers a possibility for using the calculator and getting an assessment even with some data missing. However, these inputs could contribute to a less accurate risk assessment and it should be considered if this information should be acquired. Examples in which "unknown" is allowed are the indication of incapacity for work in the last 12 months or whether counselling is carried out.
What is the difference between a prognostic and a risk factor?	Prognostic factors are used to better assess certain mental health conditions. For example, prognostic factors include indications of BMI, financial or employment status. These factors may play an important role in the assessment. For an eating disorder, a BMI of less than 15 is critical; for a buying and hoarding disorder, a poor financial situation or unemployment is important information for the assessment of the condition. Risk factors are assessed independently of psychiatric diagnoses. Risk factors include for instance sleeping disorders or burnout syndrome. Those factors themselves may result in a higher risk for a claim due to a mental health condition and are therefore considered in the MHC. Furthermore, risk factors can be used for assessment even in absence of a main psychiatric diagnosis.
Where can I see how long postponement will last for the respective products?	On the results page you will find an indication of the period for which the application should be postponed for each product. For example, the notice text may look like this: "For mental diagnosis rates: Deferral for Depression: 1 year for IP, TPD
Which data is the MHC based on?	own, TPD any products." The MHC is based on the evaluation of more than 100 publications and internal data analyses. The studies conducted by Munich Re are based on a data set of 4.7 million insurance policies and were evaluated using statistical methods.

Do I need to look up MIRA rating page, e.g., for functional conditions that are also being assessed in the calculator?	The calculator is designed so that MIRA rating pages do not have to be looked up.
	Instead, you will find a breakdown of somatic and mental disorder rates on the results page. Of course, this only applies if the functional disorder is also represented in the calculator (see list in the appendix). For functional disorders that are not part of the MHC, the respective MIRA rating pages must still be used for risk assessment.
How should I decide in the risk	In principle, a distinction must be made between clinical and insurance
assessment if the clinical severity (e.g.	medical severity levels. Clinically, for example, depression can be classified
mild depression) does not match the	as moderate, but the insurance medical aspects necessary for the
assessment in the calculator?	assessment classify it as mild (low risk). This scenario goes both ways. This
	is because the same criteria are not used for assessing insurability as for a clinical diagnosis. For the risk assessment, therefore, the assessment according to the insurance medical criteria essentially applies.

6 Appendix

Table 1 - List of covered diseases in the Psyche Calculator 2022

Group	Disease
Mental illnesses	Agoraphobia
	Acute transient psychotic disorder
	Other anxiety disorder
	Other eating disorder (without anorexia)
	Anorexia nervosa
	Adjustment disorder
	Attention deficit syndrome
	Autism
	Autism with epilepsy (without retardation)
	Bipolar disorder
	Depression
	Dysthymia
	Generalised anxiety disorder
	Shopping addiction and compulsive hoarding
	Panic disorder
	Personality disorder
	Post-traumatic stress syndrome
	Schizoaffective disorder Schizophrenia
	Somatoform disorder Social phobia
	Specific phobia
	Obsessive-compulsive disorder
	Cyclothymia
Risk factors	Mobbing
RISK Idelois	Talk therapy without a mental diagnosis
	Frequent visits to the doctor
	Concentration disorder
	Sleep disorder
	Stress (work overload)
ŀ	Burnout
Dependency disorders	Cannabis
Dependency disorders	Opiates
	Amphetamines
	Cocaine
	Tranquilizers/Sedatives
	·
	Solvent
	Laxative
	Performance enhancing drugs
	Hallucinogens
	Gambling addition
	Internet addiction (without gambling addiction)
	Concentration-enhancing drugs
Functional diseases	Back pain
	Headache / migraine
	Stomach pain
	Hyperventilation
	Irritable bowel syndrome
	Syncope
	Tinnitus
	Dizziness
	Palpitations
	Medically unexplainable symptoms
	Chronic fatigue syndrome
	Fibromyalgia