

Mental Health

(mild depression, anxiety and stress)

Mental health disorders cover a very wide range of conditions including anxiety, depression, post traumatic stress disorder, bipolar affective disorder and psychoses. Each of these conditions has a wide range of diagnoses and differing levels of severity. Anxiety and depression are two of our most frequent disclosures. The more severe types of mental health diagnoses such as bipolar disorder or schizophrenia, or which have required in patient hospital treatment, are much less common and are not covered here.

Mild depression, anxiety and stress reactions can stem from a traumatic event and are an understandable reaction to a distressing situation such as the death of a loved one. Often, however, there is no apparent cause for the symptoms. Sometimes it may appear there has been a reactive episode but it is actually a manifestation of an underlying mental health condition, particularly if the symptoms are out of proportion to the initial event or last longer than expected.

Why are we concerned?

Mental health disorders carry a risk of suicide but there are less obvious risks such as alcohol and drug misuse, and an increase in other conditions such as heart disease resulting from a poor lifestyle.

Mental health conditions are also a major cause of disability and one of our top reasons for IP claims.

What terms can be offered?

- Terms will depend on the diagnosis, and the frequency and severity of symptoms.
- Symptoms of mental health disorders tend to fluctuate, even when on treatment. We will need to know how severe the symptoms generally are, for example do they stop the customer from doing their job or normal, everyday activities? Or do they have no symptoms at all, or do they have occasional low moods or episodes of anxiety?
- We also need to know how frequent the symptoms are. They might be constant, or occur in episodes. An episode is where symptoms are severe enough to prompt a visit to the GP, a change in medication, additional counselling or referral to the mental health team, for example.

	Life Cover <ul style="list-style-type: none">• Depends on symptoms
	Critical Illness <ul style="list-style-type: none">• Depends on symptoms• psychosis excluded on upgraded critical illness
	IP/TPD/WOP <ul style="list-style-type: none">• usually exclude
	Global treatment <p>Global treatment will be accepted</p>

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The terms we can offer depend on the benefit applied for.

- **Life cover**
 - A one off episode of mild depression where there has been a successful recovery, or the customer is taking treatment but not experiencing symptoms, will normally only be rated if it has occurred within the last year.
 - If there has been more than one episode ratings increase according to the severity, frequency and date of last symptoms.
 - If there has been more than one suicide attempt or there are other medical conditions which are affected by, or affect, depression or anxiety then we will decline.
- **Critical illness**
 - An extra premium will not usually be charged for mild mental health conditions.
 - If upgraded CI has been applied for, psychosis will be excluded if there have been any symptoms within the last four years.
- **Income protection/TPD/WOP**
 - Because depression and anxiety are a leading cause of claim, we will usually apply a mental health exclusion. There are some exceptions:
 - If there have been symptoms within the previous six months we will postpone.
 - If the initial episode was caused by bereavement or a traumatic event, and there have been no symptoms or time off work for a year, we will usually accept at ordinary rates without an exclusion.
 - For all other types of mild depression or anxiety, if there have been no symptoms or time off work for three years, and no other medical problems, we will usually accept at standard rates without an exclusion.

What do we need to know?

- Diagnosis
- Date of onset of symptoms
- Treatment, including counselling
- Time off work
- Frequency of symptoms
- Severity of symptoms
- Whether there have been any suicide attempts, thoughts about suicide, or self harm



Is medical evidence required?

Mental health is an area where we find a high level of misrepresentation. This is a sensitive area for a customer to discuss but the more detail they can give us, the less likely we are to need a medical report from the customer's doctor. We may also request information through a nurse tele-interview.