Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form
Dental Coverage

1.	**MLR Reporting Year**	**2015**
2.	**Enter DMHC Health Plan ID. Insurers may leave this field blank**	
3.	**Legal Name**	**National Guardian Life Insurance Company**
4.	**DBA**	**National Guardian Life Insurance Company**
5.	**Federal Tax Exempt Status? Please enter Yes or No**	**No**

Cell Key:
Blank cells require input from Health plan or Health insurer

Version 4.22.15
Revised Version 5.26.15
Revised Version 4.15.16 corrected dates for Cycle Year
(CY)2015-2016 on TABs Parts 1, 2 and 4.

Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form: Dental Coverage
Part 1 - Summary of Data

Health Plan ID
0
Legal Name
National Guardian Life Insurance Company
dBA
National Guardian Life Insurance Company
MLR Reporting Year
2019

Federal Tax Exempt
No

Part 1

Part 1 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.	Health Insurance Coverage DHMO Products Individual Total as of 12/31/15	Health Insurance Coverage DHMO Products Individual Total as of 3/31/16	Health Insurance Coverage DHMO Products Small Group Total as of 12/31/15	Health Insurance Coverage DHMO Products Small Group Total as of 3/31/16	Health Insurance Coverage DHMO Products Large Group Total as of 12/31/15	Health Insurance Coverage DHMO Products Large Group Total as of 3/31/16	Health Insurance Coverage DPPO & Indemnity Products Individual Total as of 12/31/15	Health Insurance Coverage DPPO & Indemnity Products Individual Total as of 3/31/16	Health Insurance Coverage DPPO & Indemnity Products Small Group Total as of 12/31/15	Health Insurance Coverage DPPO & Indemnity Products Small Group Total as of 3/31/16	Health Insurance Coverage DPPO & Indemnity Products Large Group Total as of 12/31/15	Health Insurance Coverage DPPO & Indemnity Products Large Group Total as of 3/31/16
	1	2	3	4	5	6	7	8	9	10	11	12
1. Premium												
1.1 Total direct premium earned	$ 28,610	$ 28,610	$ 296,852	$ 296,852	$ 32,984	$ 32,984	$ 257,485	$ 257,485	$ 2,605,698	$ 2,605,698	$ 362,818	$ 362,818
2. Claims												
2.1 Total incurred claims (MLR Form Part 2. Line 2.11)	$ 17,768	$ 17,837	$ 184,359	$ 191,020	$ 20,484	$ 21,225	$ 159,911	$ 160,537	$ 1,618,268	$ 1,676,729	$ 225,328	$ 233,468
3. Federal and State Taxes and Licensing or Regulatory Fees												
3.1 Federal taxes and assessments incurred by the reporting health plan or health insurer during the MLR reporting year												
3.1 a Federal income taxes deductible from premium in MLR calculations	$ 760	$ 760	$ 7,887	$ 7,887	$ 876	$ 876	$ 6,841	$ 6,841	$ 69,233	$ 69,233	$ 9,640	$ 9,640
3.1 b Other Federal Taxes (other than income tax) and assessments deductible from premium	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
3.2 State insurance, premium and other taxes incurred by the reporting health plan or heath insurer during the MLR reporting year (deductible from premium in MLR calculation)												
3.2 a State income, excise, business, and other taxes	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
3.2 b State premium taxes	$ 672	$ 672	$ 6,976	$ 6,976	$ 775	$ 775	$ 6,051	$ 6,051	$ 61,234	$ 61,234	$ 8,526	$ 8,526
3.2 c Community benefit expenditures	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
3.3 Regulatory authority licenses and fees	$ 5	$ 5	$ 51	$ 51	$ 6	$ 6	$ 44	$ 44	$ 447	$ 447	$ 62	$ 62
3.4 Total Federal and State Taxes and fees to be excluded from premium	$ 1,437	$ 1,437	$ 14,914	$ 14,914	$ 1,657	$ 1,657	$ 12,936	$ 12,936	$ 130,914	$ 130,914	$ 18,228	$ 18,228
4. Non-Claims Costs												
4.1 Direct sales salaries and benefits	$ 107	$ 107	$ 1,113	$ 1,113	$ 124	$ 124	$ 965	$ 965	$ 9,765	$ 9,765	$ 1,360	$ 1,360
4.2 Agents and brokers fees and commissions	$ 177	$ 177	$ 1,841	$ 1,841	$ 205	$ 205	$ 1,597	$ 1,597	$ 16,162	$ 16,152	$ 2,250	$ 2,250
4.3 Other taxes	-	-	-	-	-	-	-	-	-	-	-	-
4.3a Taxes and assessments (exclude amounts reported in Section 3 or Line 10)	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4.3b Fines and penalties of regulatory authorities (exclude amounts reported in Line 3.3)	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4.4 Other general and administrative expenses	$ 277	$ 277	$ 2,873	$ 2,873	$ 319	$ 319	$ 2,492	$ 2,492	$ 25,216	$ 25,216	$ 3,511	$ 3,511
4.5 Total non-claims costs	$ 561	$ 561	$ 5,827	$ 5,827	$ 648	$ 648	$ 5,054	$ 5,054	$ 51,143	$ 51,133	$ 7,121	$ 7,121
5. Other Indicators or information												
5.1 Number of covered lives	268	268	2,778	2,778	309	309	2,410	2,410	24,388	24,388	3,396	$ 3,396
5.2 Member months	3,190	3,190	33,097	33,097	3,677	3,677	28,708	28,708	290,518	290,518	40,452	$ 40,452
5.3 Number of life-years	266	266	2,758	2,758	306	306	2,392	2,392	24,210	24,210	3,371	3,371
	Grand Total as of 12/31/15 for ALL markets in col. 1-12											
6. Net investment income and other gain / (loss)	$ 22,099											
7. Other Federal income taxes (exclude taxes on Line 3.1a and 3.1b)	$ -											

Cell Keys:
Blank cells require input from Health plan or Health insurer
Grey cells require no data input
Pink cells require no data input - locked down
Blue cells: computed cell (formula cell)

Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form: Dental Coverage
Part 2 - Premium and Claims

Health Plan ID
0
Legal Name
National Guardian Life Insurance Company
dBA
National Guardian Life Insurance Company
MLR Reporting Year
2015

Part 2

Part 2	Health Insurance Coverage						Health Insurance Coverage					
	DHMO Products						DPPO & Indemnity Products					
	Individual		Small Group		Large Group		Individual		Small Group		Large Group	
NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16	Total as of 12/31/15	Total as of 3/31/16
	1	2	3	4	5	6	7	8	9	10	11	12
1. Premium:												
1.1 Direct premium written	$ 29,086	$ 29,086	$ 301,800	$ 301,800	$ 33,533	$ 33,533	$ 261,777	$ 261,777	$ 2,649,129	$ 2,649,129	$ 368,866	$ 368,866
1.2 Unearned premium prior year	$ 282	$ 282	$ 2,921	$ 2,921	$ 325	$ 325	$ 2,534	$ 2,534	$ 25,642	$ 25,642	$ 3,570	$ 3,570
1.3 Unearned premium MLR Reporting year	$ 758	$ 758	$ 7,869	$ 7,869	$ 874	$ 874	$ 6,826	$ 6,826	$ 69,073	$ 69,073	$ 9,618	$ 9,618
1.4 Premium balances written off	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
2. Claims:												
2.1 Claims Paid												
2.1a Claims paid during the MLR reporting year regardless of incurred date	$ 17,611		$ 182,733		$ 20,304		$ 158,500		$ 1,603,988		$ 223,340	
2.1b Claims incurred only during the MLR reporting year, paid through 3/31 of the following year		$ 17,234		$ 184,560		$ 20,507		$ 155,108		$ 1,620,028		$ 225,573
2.2 Direct claim liability												
2.2a Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date	$ 1,677		$ 17,399		$ 1,933		$ 15,092		$ 152,723		$ 21,265	
2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year		$ 603		$ 6,460		$ 718		$ 5,429		$ 56,701		$ 7,895
2.3 Direct claim liability prior year	$ 1,623		$ 16,836		$ 1,871		$ 14,603		$ 147,779		$ 20,577	
2.4 Direct claim reserves												
2.4a Reserves as of 12/31 of MLR reporting year for all claims regardless of incurred date	$ 702		$ 7,282		$ 809		$ 6,316		$ 63,921		$ 8,900	
2.4b Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year		$ -		$ -		$ -		$ -		$ -		$ -
2.5 Direct claim reserves prior year	$ 599		$ 6,219		$ 691		$ 5,394		$ 54,585		$ 7,600	
2.6 Experience rating refunds (rate credits) paid												
2.6a Experience rating refunds, with all incurred dates, paid in the MLR reporting year	$ -		$ -		$ -		$ -		$ -		$ -	
2.6b Experience rating refunds associated with premium earned only in the reporting year and paid through 3/31 of the following year		$ -		$ -		$ -		$ -		$ -		$ -
2.7 Reserve for experience rating refunds (rate credits)												
2.7a Reserved in MLR reporting year regardless of incurred date	$ -		$ -		$ -		$ -		$ -		$ -	
2.7b Reserves specific to the MLR reporting year through 3/31 of the following year		$ -		$ -		$ -		$ -		$ -		$ -
2.8 Reserve for experience rating refunds (rate credits) prior year	$ -		$ -		$ -		$ -		$ -		$ -	
2.9 Incurred dental incentive pool and bonuses												
2.9a Paid dental incentive pools and bonuses MLR Reporting year	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
2.9b Accrued dental incentive pools and bonuses MLR Reporting year	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
2.9c Accrued dental incentive pools and bonuses prior year	$ -		$ -		$ -		$ -		$ -		$ -	
2.10 Contingent benefit and lawsuit reserves	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
2.11 Total incurred claims	$ 17.768	$ 17.837	$ 184.359	$ 191.020	$ 20.484	$ 21.225	$ 159.911	$ 160.537	$ 1.618.268	$ 1.676.729	$ 225.328	$ 233.468

Cell Keys:
Blank cells require input from Health plan or Health insurer
Grey cells require no data input
Pink cells require no data input - locked down
Blue cells: computed cell (formula cell)

Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form: Dental Coverage
Part 3 - Expense Allocation

Health Plan ID
0
Legal Name
National Guardian Life Insurance Company
dBA
National Guardian Life Insurance Company
MLR Reporting Year
2015

Part 3

Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
1	2	3
1. Incurred Claims		
Claims paid		Claims paid are allocated to the dental market based on actual claims paid by state. For the purposes of MLR reporting, they are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
Direct claim liability		The direct claim liability is allocated to the dental market based on actual claims activity. For the purposes of MLR reporting, they are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
2. Federal and State Taxes and Licensing or Regulatory Fees		
2.a Federal taxes and assessments		
Federal income taxes		Federal income taxes are allocated to the dental market based on the actual premium activity of the market segment. For the purposes of MLR reporting, federal income taxes are allocated to each state based on the actual premium activity by state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
2.b State insurance, premium and other taxes		
State premium taxes		State premium taxes are allocated to the dental market based on the actual premium activity of the market segment. For purposes of MLR reporting, state premium taxes are allocated to each state by multiplying the actual premium activity by that state's effective tax rate with the Company. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
2.c Community benefit expenditures		
None		The Company does not have community benefit expenditures.
2.d Regulatory authority licenses and fees		
Insurance department licenses & fees		Insurance department licenses & fees are allocated to the dental market based on the actual premium activity. For the purposes of MLR reporting, they are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
3. Non-Claims costs		
3.a Direct sales salaries and benefits		
Employee salaries		Employee salaries are allocated to the dental market based on the actual premium activity of the market segment. For the purposes of MLR reporting, employee salaries are allocated to each state based on the actual premium activity by state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
Employee benefits		Employee benefits are allocated to the dental market based on the actual premium activity of the market segment. For the purposes of MLR reporting, employee benefits are allocated to each state based on the actual premium activity by state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
3.b Agents and brokers fees and commissions		
Commissions Incurred		Commissions incurred are allocated to the dental market based on the actual premium activity of the market segment. For the purposes of MLR reporting, commissions incurred are allocated to each state based on the actual premium activity by state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.
3.c Other taxes		
None		The Company does not have any other taxes.
3.d Other general and administrative expenses		
All other general & administrative expenses		Other general & administrative expenses are allocated to the dental market based on the actual premium activity of the market segment. For the purposes of MLR reporting, other general & administrative expense are allocated to each state based on the actual premium activity by state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.

Cell Keys:
Blank cells require input from Health plan or Health insurer
Grey cells require no data input
Pink cells require no data input - locked down
Blue cells: computed cell (formula cell)

Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form: Dental Coverage
Part 4 - MLR Calculation

Health Plan ID
0
Legal Name
National Guardian Life Insurance Company
dBA
National Guardian Life Insurance Company
MLR Reporting Year
2015

Part 4

Part 4 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.	Health Insurance Coverage – DHMO Products – Individual				Small Group				Large Group			
	PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total
	1	2	3	4	5	6	7	8	9	10	11	12
1. Medical Loss Ratio Numerator												
1.1 Adjusted incurred claims as reported on MLR Form for prior year(s)		$ -								$ -		
1.2 Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)		$ 26,400	$ 17,837	$ 44,237			$ 191,020	$ 191,020		$ 21,396	$ 21,225	$ 42,621
1.3 MLR numerator (Line 1.2)		$ 26,400	$ 17,837	$ 44,237		$ -	$ 191,020	$ 191,020		$ 21,396	$ 21,225	$ 42,621
2. Medical Loss Ratio Denominator												
2.1 Premium earned (Part 1 Line 1.1)		$ 39,574	$ 28,610	$ 68,184			$ 296,852	$ 296,852		$ 32,073	$ 32,984	$ 65,057
2.2 Federal and State taxes and licensing or regulatory fees (Part 1 Line 3.4)		$ 940	$ 1,437	$ 2,377			$ 14,914	$ 14,914		$ 763	$ 1,657	$ 2,420
2.3 MLR Denominator (Line 2.1 - Line 2.2)		$ 38,634	$ 27,173	$ 65,807		$ -	$ 281,938	$ 281,938		$ 31,310	$ 31,327	$ 62,637
3. 3.1 Life-years (Part 1 Line 5.3)		332	266	598			2,758	2,758		269	306	575
4. MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)												
4.1 MLR				Not Required to Calculate				67.75%				Not Required to Calculate

Part 4 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.	Health Insurance Coverage – DPPO & Indemnity Products – Individual				Small Group				Large Group			
	PY2	PY1	CY	Total	PY2	PY1	CY	Total	PY2	PY1	CY	Total
	13	14	15	16	17	18	19	20	21	22	23	24
1. Medical Loss Ratio Numerator												
1.1 Adjusted incurred claims as reported on MLR Form for prior year(s)												
1.2 Adjusted incurred claims as of 3/31 of the year following the MLR reporting year (Part 1 Line 2.1)			$ 160,537	$ 160,537			$ 1,676,729	$ 1,676,729			$ 233,468	$ 233,468
1.3 MLR numerator (Line 1.2)		$ -	$ 160,537	$ 160,537		$ -	$ 1,676,729	$ 1,676,729		$ -	$ 233,468	$ 233,468
2. Medical Loss Ratio Denominator												
2.1 Premium earned (Part 1 Line 1.1)			$ 257,485	$ 257,485			$ 2,605,698	$ 2,605,698			$ 362,818	$ 362,818
2.2 Federal and State taxes and licensing or regulatory fees (Part 1 Line 3.4)			$ 12,936	$ 12,936			$ 130,914	$ 130,914			$ 18,228	$ 18,228
2.3 MLR Denominator (Line 2.1 - Line 2.2)		$ -	$ 244,549	$ 244,549		$ -	$ 2,474,784	$ 2,474,784		$ -	$ 344,590	$ 344,590
3. 3.1 Life-years (Part 1 Line 5.3)			2,392	2,392			24,210	24,210			3,371	3,371
4. MLR Calculation (for Health plans or health insurers with at least 1,000 life years in the Total column of Line 3.1)												
4.1 MLR				65.65%				67.75%				67.75%

Cell Keys:
Blank cells require input from Health plan or Health insurer
Grey cells require no data input
Pink cells require no data input - locked down
Blue cells: computed cell (formula cell)

Department of Managed Health Care/Department of Insurance
Medical Loss Ratio Reporting Form: Dental Coverage
Part 5 - Additional Responses

Health Plan ID
0
Legal Name
National Guardian Life Insurance Company
dBA
National Guardian Life Insurance Company
MLR Reporting Year
2015

Part 5

	Tax Rate
1. If a health plan or health insurer uses the hightest premium tax rate in the State, the health plan or health insurer must report applicabe highest State health premium tax rate.	

2. If the health plan or health insurer included deferred experience for prior year and excluded deferred experience for current year, provide the total direct written premium and total incurred claims for the deferred experience by market.
Deferred experience for prior year
Deferred experience for current year

3. If the health plan or health insurer novated any business in the MLR reporting year effective during the reporting year provide the name of the entity to whom the business was sold or transferred and the date of the sale or transfer.	
Name of Entity to whom business was sold or transferred	Effective date of sale or transfer

Cell Keys:
Blank cells require input from Health plan or Health insurer
Grey cells require no data input
Pink cells require no data input - locked down
Blue cells: computed cell (formula cell)

Department of Managed Health Care
Medical Loss Ratio Reporting Form: Dental Coverage
Attestation

Health Plan ID
0
Legal Name
National Guardian Life Insurance Company
dBA
National Guardian Life Insurance Company
MLR Reporting Year
2015

Attestation

Attestation Statement

The officers of this reporting Health plan being duly sworn, each attest that he/she is the described officer of the reporting Health plan, and that this MLR Reporting Form, the Company/Health plan Associations, and any supplemental submission that the Health plan includes are full and true statements of all the elements included therein for the MLR reporting year stated above, and that the MLR Reporting Form has been completed in accordance with the Department of Managed Health Care's guidance and reporting instructions, according to the best of his/her information, knowledge and belief. Furthermore, the scope of this attestation by the described officer includes any related electronic filings and postings for the MLR reporting year stated above and which are required by Department of Managed Health Care.

Chief Executive Officer/President

_____
Chief Financial Officer