

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

1. MLR Reporting Year	2014
2. Enter DMHC Health Plan ID. Insurers may leave this field blank	
3. Legal Name	Nippon Life Insurance Company of America
4. DBA	Nippon Life Insurance Company of America
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

Health Plan ID
 0
 Legal Name
 Nippon Life Insurance Company of America
 Nippon Life Insurance Company of America
 dBA
 Nippon Life Insurance Company of America
 MLR Reporting Year
 2014

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						Health Insurance Coverage DPPPO & Indemnity Products					
		Individual		Small Group		Large Group		Individual		Small Group		Large Group	
		Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15
		1	2	3	4	5	6	7	8	9	10	11	12
1.	Premium												
1.1	Total direct premium earned	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 438,785	\$ 438,785	\$ 2,562,486	\$ 2,562,486
2.	Claims												
2.1	Total incurred claims (MLR Form Part 2, Line 2.11)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 297,955	\$ 297,290	\$ 1,691,931	\$ 1,813,678
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									\$ 19,539	\$ 19,539	\$ 114,108	\$ 114,108
3.1 a	Federal income taxes deductible from premium in MLR calculations									\$ 6,190	\$ 6,190	\$ 36,151	\$ 36,151
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 health insurer during the MLR reporting year (deductible from premium in MLR calculation)									\$ -	\$ -	\$ -	\$ -
3.2 a	State income, excise, business, and other taxes									\$ 6,538	\$ 6,538	\$ 38,184	\$ 38,184
3.2 b	State premium taxes									\$ -	\$ -	\$ -	\$ -
3.2 c	Community benefit expenditures									\$ (769)	\$ (769)	\$ (4,489.81)	\$ (4,490)
3.3	Regulatory authority licenses and fees									\$ 31,499	\$ 31,499	\$ 183,954	\$ 183,954
3.4	Total Federal and State Taxes and fees to be excluded from premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31,499	\$ 31,499	\$ 183,954	\$ 183,954
4.	Non-Claims Costs												
4.1	Direct sales salaries and benefits									\$ 7,114	\$ 7,114	\$ 41,544	\$ 41,544
4.2	Agents and brokers fees and commissions									\$ 31,367	\$ 31,367	\$ 158,463	\$ 158,463
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									\$ 29,596	\$ 29,596	\$ 172,039	\$ 172,039
4.5	Total non-claims costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 68,078	\$ 68,078	\$ 372,046	\$ 372,046
5.	Other Indicators or Information												
5.1	Number of covered lives									684	684	4,706	4,706
5.2	Member months									9,084	9,084	53,085	53,085
5.3	Number of life-years									757	757	4,424	4,424
		Grand Total as of 12/31/12 for ALL markets in col. 1-12											
6.	Net investment income and other gain / (loss)	\$	5,690										
7.	Other Federal income taxes (exclude taxes on Line 3.1a and 3.1b)	\$	1,725										

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Part 2

Part 2 NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT	Health Insurance Coverage						Health Insurance Coverage					
	Dental Products						Dental Products					
	Individual		Small Group		Large Group		Individual		Small Group		Large Group	
	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15	Total as of 12/31/14	Total as of 3/31/15
	1	2	3	4	5	6	7	8	9	10	11	12
1. Premium:												
1.1 Direct premium written									\$ 438,785	\$ 438,785	\$ 2,562,486	\$ 2,562,486
1.2 Unearned premium prior year									\$ -	\$ -	\$ -	\$ -
1.3 Unearned premium MLR Reporting year									\$ -	\$ -	\$ -	\$ -
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									\$ 319,663	\$ 319,663	\$ 1,800,228	\$ 1,800,228
2.1b Claims incurred only during the MLR reporting year, paid through 3/31 of the following year									\$ 284,783	\$ 284,783	\$ 1,754,420	\$ 1,754,420
2.2 Direct claim liability:												
2.2a Liability as of 12/31 of MLR reporting year for all claims regardless of incurred date									\$ 12,739	\$ 12,739	\$ 63,553	\$ 63,553
2.2b Liability for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year									\$ 3,365	\$ 3,365	\$ 15,943	\$ 15,943
2.3 Direct claim liability prior year									\$ 23,705	\$ 23,705	\$ 118,259	\$ 118,259
2.4 Direct claim reserves:												
2.4a Reserves as of 12/31 of MLR reporting year for all claims regardless of incurred date									\$ 34,610	\$ 34,610	\$ 172,662	\$ 172,662
2.4b Reserves for claims incurred only during the MLR reporting year, calculated as of 3/31 of the following year									\$ 9,142.10	\$ 9,142.10	\$ 43,315	\$ 43,315
2.5 Direct claim reserves prior year									\$ 45,353	\$ 45,353	\$ 226,252	\$ 226,252
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	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 297,955	\$ 297,290	\$ 1,691,931	\$ 1,813,678

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Part 3

Description of Expense Element (by Type)	NEW	Detailed Description of Expense Allocation Methods
1	2	3
1. Incurred Claims		
Incurred Claims		Completion factors based on historical medical claim run-out pattern are applied to claims paid from January 2012 through March 2015 and incurred in 2012 through 2014.
		All elements of recast claim experience are calculated at the group level then aggregated to state and size (Large/Small/E quitrate) based on the characteristics of each group.
2. Federal and State Taxes and Licensing or Regulatory Fees		
2 a Federal taxes and assessments		
Federal taxes and assessments		Federal taxes on underwriting gain were allocated to state and size based on the underlying underwriting income by state. Federal taxes on net investment income were allocated based on underlying claim reserves.
2 b State insurance, premium and other taxes		
State insurance, premium and other taxes		The allocation of state insurance, premium and other taxes were based on actual expenses incurred by state. State taxes are further allocated to coverage, and to size based on premiums earned in the state.
2 c Community benefit expenditures		
2 d Regulatory authority licenses and fees		
Regulatory authority licenses and fees		Regulatory authority licenses and fees were based on actual expenses incurred by state and/or allocated to coverage and size based on earned premiums by state.
3. Non-Claims costs		
3 a Direct sales salaries and benefits		
Direct sales salaries and benefits		Direct sales salaries and benefits were allocated by case consistent with pricing assumptions. Once at the case level, the expense was allocated to state and size based on the attributes of the case.
3 b Agents and brokers fees and commissions		
Agents and brokers fees and commissions		Agents brokers and fees were calculated by case based on the commission schedule and earned premium by case. Once at the case level, the expense was allocated to state and size based on the attributes of the case.
3 c Other taxes		
Other taxes		Other taxes were allocated to state and size based on actual premiums collected.
3 d Other general and administrative expenses		
Other general and administrative expenses		Other general administrative expenses were allocated to state and size based on a combination of premium and case consistent with pricing assumptions.
Cost containment expenses		Cost containment expenses were allocated to state and size based on average inforce lives.
All other claims adjustment expenses		All other claims adjustment expenses were allocated to state and size based on incurred claims by case.

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

Health Plan ID

0

Legal Name

Nippon Life Insurance Company of America
dBA

Nippon Life Insurance Company of America

MLR Reporting Year

2014

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