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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. MLR Reporting Year</strong></td>
<td><strong>2015</strong></td>
</tr>
<tr>
<td><strong>2. Enter DMHC Health Plan ID. Insurers may leave this field blank</strong></td>
<td></td>
</tr>
<tr>
<td><strong>3. Legal Name</strong></td>
<td><strong>National Guardian Life Insurance Company</strong></td>
</tr>
<tr>
<td><strong>4. DBA</strong></td>
<td><strong>National Guardian Life Insurance Company</strong></td>
</tr>
<tr>
<td><strong>5. Federal Tax Exempt Status? Please enter Yes or No</strong></td>
<td><strong>No</strong></td>
</tr>
</tbody>
</table>

**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.
## Part 1

### Summary of Data

#### Medical Loss Ratio Reporting Form: Dental Coverage

**Department of Managed Health Care/Department of Insurance**

**Medical Loss Ratio Reporting Form**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Total direct premium earned</td>
<td>$17,768</td>
<td>$17,837</td>
<td>$184,359</td>
<td>$205,050</td>
<td>$32,996</td>
<td>$32,996</td>
<td>$207,063</td>
<td>$207,063</td>
</tr>
<tr>
<td>2.1</td>
<td>Total incurred claims (MLR Form Part 2, Line 2.11)</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
<td>$ -</td>
</tr>
</tbody>
</table>

### Notes

- **2015 National Guardian Life Insurance Company d/b/a National Guardian Life Insurance Company**
- **Legal Name**
- **Part 1 - Summary of Data**

**NOTE:** REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.
### Part 2

#### Part 2 Premium and Claims

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Large Group</strong></td>
<td>2,513</td>
<td>2,507</td>
<td>157,850</td>
<td>157,850</td>
<td>30,635</td>
<td>30,635</td>
<td>26,712</td>
<td>26,712</td>
<td>2,635,525</td>
<td>2,635,525</td>
<td>509,600</td>
<td>509,600</td>
</tr>
<tr>
<td><strong>Small Group</strong></td>
<td>1,061</td>
<td>1,061</td>
<td>5,480</td>
<td>5,480</td>
<td>73,748</td>
<td>73,748</td>
<td>7,541</td>
<td>7,541</td>
<td>80,114</td>
<td>80,114</td>
<td>82,012</td>
<td>82,012</td>
</tr>
<tr>
<td><strong>Individual</strong></td>
<td>1,492</td>
<td>1,492</td>
<td>37,213</td>
<td>37,213</td>
<td>175,465</td>
<td>175,465</td>
<td>12,714</td>
<td>12,714</td>
<td>235,029</td>
<td>235,029</td>
<td>123,732</td>
<td>123,732</td>
</tr>
<tr>
<td><strong>Health Insurance Coverage</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medical Loss Ratio Reporting Form</strong></td>
<td>Page 3 of 7 [<em>Pt 2 Premium and Claims</em>]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part 3

#### Detailed Description of Expense Allocation Methods

**1. Incurred Claims**

- **Claims paid**
  - Claims paid are allocated to the dental market based on actual claims paid by state. For purposes of MLR reporting, claims paid 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 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**

- **Federal taxes and assessments**
  - 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 in each state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.

- **State insurance, premium and other taxes**
  - State premium taxes are allocated to the dental market based on the actual premium activity of the market segment. For the 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.

- **Community benefit expenditures**
  - The Company does not have community benefit expenditures.

- **Regulatory authority licenses and 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**

- **Direct sales salaries and benefits**
  - Employee salaries and Employee benefits are allocated to the dental market based on the actual premium activity. For the purposes of MLR reporting, employee salaries and employee benefits are allocated to each state based on the actual premium activity in each state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.

- **Agents and brokers fees and commissions**
  - 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 in each state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.

- **Other taxes**
  - The Company does not have any other taxes.

- **Other general & administrative expenses**
  - All other general & administrative expenses are allocated to the dental market based on the actual premium activity. For purposes of MLR reporting, all other general & administrative expenses are allocated to each state based on the actual premium activity in each state. They are further allocated to each dental market segment by the percentage of group/individual policies in each segment.

**Notes**

- The Company does not have any other taxes.
### Part 4 - MLR Calculation

<table>
<thead>
<tr>
<th>Health Plan ID</th>
<th>Legal Name</th>
<th>dBA</th>
<th>MLR Reporting Year</th>
<th>PY2</th>
<th>PY1</th>
<th>CY</th>
<th>Total</th>
<th>PY2</th>
<th>PY1</th>
<th>CY</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 1. Medical Loss Ratio Numerator
- Adjusted incurred claims as reported on MLR Form for prior year(s): $30,000 $20,000 $50,000 $60,000 $70,000 $80,000 $90,000 $100,000 $110,000 $120,000
- Adjusted incurred claims as of 3/31 of the year following the MLR reporting year: $20,000 $10,000 $30,000 $40,000 $50,000 $60,000 $70,000 $80,000 $90,000 $100,000
- MLR numerator (Line 1.2): $50,000 $30,000 $80,000 $90,000 $110,000 $120,000 $100,000 $90,000 $80,000 $70,000

#### 2. Medical Loss Ratio Denominator
- Premium earned (Part 1 Line 1.1): $40,000 $30,000 $60,000 $70,000 $80,000 $90,000 $100,000 $110,000 $120,000 $130,000
- Federal and State taxes and licensing or regulatory fees (Part 1 Line 3.4): $10,000 $5,000 $15,000 $20,000 $25,000 $30,000 $35,000 $40,000 $45,000 $50,000
- MLR Denominator (Line 2.1 - Line 2.2): $50,000 $30,000 $80,000 $90,000 $110,000 $120,000 $100,000 $90,000 $80,000 $70,000

#### 3. Life-years (Part 1 Line 5.3)
- 322 266 598 2,758 2,758 269 306 575 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)
- MLR Not Required to Calculate: 67.75% 65.65% 67.75%

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

### NOTE: REFER TO MLR INSTRUCTIONS FOR IMPORTANT INFORMATION ABOUT COMPLETING EACH COLUMN AND ROW.
Medical Loss Ratio Reporting Form: Dental Coverage
Part 5 - Additional Responses

<table>
<thead>
<tr>
<th>Health Plan ID</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Name</td>
<td>National Guardian Life Insurance Company dBA National Guardian Life Insurance Company</td>
</tr>
<tr>
<td>MLR Reporting Year</td>
<td>2015</td>
</tr>
</tbody>
</table>

### Part 5

1. If a health plan or health insurer uses the highest premium tax rate in the State, the health plan or health insurer must report applicable highest State health premium tax rate.

<table>
<thead>
<tr>
<th>Tax Rate</th>
</tr>
</thead>
</table>

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.

<table>
<thead>
<tr>
<th>Deferred experience for prior year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred experience for current year</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>Name of Entity to whom business was sold or transferred</th>
<th>Effective date of sale or transfer</th>
</tr>
</thead>
</table>

**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)
<table>
<thead>
<tr>
<th>Health Plan ID</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Name</td>
<td>National Guardian Life Insurance Company dBA</td>
</tr>
<tr>
<td>MLR Reporting Year</td>
<td>2015</td>
</tr>
</tbody>
</table>

**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