



HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE
MANAGED DENTALGUARD INC

NAIC Group Code 0429 0429 NAIC Company Code 14142 Employer's ID Number 27-4326698
(Current) (Prior)
Organized under the Laws of Ohio, State of Domicile or Port of Entry OH
Country of Domicile US
Licensed as business type: Dental Service Corporation
Is HMO Federally Qualified? Yes [] No [X]
Incorporated/Organized 08/09/2010 Commenced Business 10/18/2011
Statutory Home Office Crown Centre, 5005 Rockside Road #430 Independence, OH, US 44131
(Street and Number) (City or Town, State, Country and Zip Code)
Main Administrative Office 10 Hudson Yards
(Street and Number)
New York, NY, US 10001 212-598-8829
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Mail Address 10 Hudson Yards New York, NY, US 10001
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)
Primary Location of Books and Records 10 Hudson Yards
(Street and Number)
New York, NY, US 10001 212-598-8829
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Internet Website Address www.Guardianlife.com
Statutory Statement Contact Haydn Phillip Padmore 212-598-8829
(Name) (Area Code) (Telephone Number)
Haydn_Padmore@glic.com (FAX Number)
(E-mail Address)

OFFICERS

President, CEO & COO Shari Lynn Norman Treasurer Debra Ann Idiculous
Secretary Rose Angela Burachio Controller Thomas Scott Barnes

OTHER

Gail Barbara Wallach, Assistant Secretary John Anthony Dolan, Assistant Secretary Harris Oliner, Assistant Secretary
Sanford Ephraim Penn, VP & Appointed Actuary

DIRECTORS OR TRUSTEES

Jill Marie Purcell Shari Lynn Norman Thomas Scott Barnes #

State of New Jersey SS
County of Middlesex

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Sanford Penn Thomas Scott Barnes
Sanford Ephraim Penn Thomas Scott Barnes
Vice President & Appointed Actuary Controller

Subscribed and sworn to before me this 31 day of January, 2024

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

ALEXANDER GRINBERG
COMMISSION # 2210235
NOTARY PUBLIC OF NEW JERSEY
COMMISSION EXPIRES 10/19/2024

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

[illegible]

Exhibit 3 - Health Care Receivables

N O N E

Exhibit 3A - Health Care Receivables Collected and Accrued

N O N E

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
NONE				
0399999 Total gross payables				

	1	2	3	4	5	6
Payment Method	Direct Medical Expense Payment	Column 1 as a % of Total Payments	Total Members Covered	Column 3 as a % of Total Members	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.0	0	0.0	0	0
2. Intermediaries	0	0.0	0	0.0	0	0
3. All other providers	30,190	32.1	0	1,111.0	0	30,190
4. Total capitation payments	30,190	32.1	0	0.0	0	30,190
Other Payments:						
5. Fee-for-service	0	0.0	XXX	XXX	0	0
6. Contractual fee payments	63,911	67.9	XXX	XXX	0	63,911
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX	0	0
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX	0	0
9. Non-contingent salaries	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements	0	0.0	XXX	XXX	0	0
11. All other payments	0	0.0	XXX	XXX	0	0
12. Total other payments	63,911	67.9	XXX	XXX	0	63,911
13. TOTAL (Line 4 plus Line 12)	94,101	100%	XXX	XXX	0	94,101

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

[illegible]

EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

		1	2	3	4	5	6
Description		Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1.	Administrative furniture and equipment	NONE					
2.	Medical furniture, equipment and fixtures						
3.	Pharmaceuticals and surgical supplies						
4.	Durable medical equipment						
5.	Other property and equipment						
6.	Total						



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION MANAGED DENTALGUARD INC 2. Independence, OH

NAIC Group Code		0429		BUSINESS IN THE STATE OF		Ohio		DURING THE YEAR		2023		NAIC Company Code		14142	
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14	
		2	3												
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health	
Total Members at end of:															
1. Prior Year	1,139	0	0	0	0	1,139	0	0	0	0	0	0	0	0	
2. First Quarter	1,132	0	0	0	0	1,132	0	0	0	0	0	0	0	0	
3. Second Quarter	1,177	0	0	0	0	1,177	0	0	0	0	0	0	0	0	
4. Third Quarter	1,169	0	0	0	0	1,169	0	0	0	0	0	0	0	0	
5. Current Year	1,111	0	0	0	0	1,111	0	0	0	0	0	0	0	0	
6. Current Year Member Months	13,690	0	0	0	0	13,690	0	0	0	0	0	0	0	0	
Total Member Ambulatory Encounters for Year:															
7. Physician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Non-Physician	539	0	0	0	0	539	0	0	0	0	0	0	0	0	
9. Total	539	0	0	0	0	539	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Health Premiums Written (b)	230,238	0	0	0	0	230,238	0	0	0	0	0	0	0	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned.....	230,238	0	0	0	0	230,238	0	0	0	0	0	0	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services.....	94,101	0	0	0	0	94,101	0	0	0	0	0	0	0	0	
18. Amount Incurred for Provision of Health Care Services	103,340	0	0	0	0	103,340	0	0	0	0	0	0	0	0	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION MANAGED DENTALGUARD INC 2. Independence, OH

NAIC Group Code		BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR									(LOCATION)	
0429		1		4		2023									NAIC Company Code	
		Comprehensive (Hospital & Medical)													14142	
		2	3													
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health	
Total Members at end of:																
1.	Prior Year	1,139	0	0	0	0	1,139	0	0	0	0	0	0	0	0	
2.	First Quarter	1,132	0	0	0	0	1,132	0	0	0	0	0	0	0	0	
3.	Second Quarter	1,177	0	0	0	0	1,177	0	0	0	0	0	0	0	0	
4.	Third Quarter	1,169	0	0	0	0	1,169	0	0	0	0	0	0	0	0	
5.	Current Year	1,111	0	0	0	0	1,111	0	0	0	0	0	0	0	0	
6.	Current Year Member Months	13,690	0	0	0	0	13,690	0	0	0	0	0	0	0	0	
Total Member Ambulatory Encounters for Year:																
7.	Physician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8.	Non-Physician	539	0	0	0	0	539	0	0	0	0	0	0	0	0	
9.	Total	539	0	0	0	0	539	0	0	0	0	0	0	0	0	
10.	Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.	Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12.	Health Premiums Written (b)	230,238	0	0	0	0	230,238	0	0	0	0	0	0	0	0	
13.	Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14.	Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.	Health Premiums Earned.....	230,238	0	0	0	0	230,238	0	0	0	0	0	0	0	0	
16.	Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.	Amount Paid for Provision of Health Care Services.....	94,101	0	0	0	0	94,101	0	0	0	0	0	0	0	0	
18.	Amount Incurred for Provision of Health Care Services	103,340	0	0	0	0	103,340	0	0	0	0	0	0	0	0	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0

30.GT

Schedule S - Part 1 - Section 2
N O N E

Schedule S - Part 2
N O N E

Schedule S - Part 3 - Section 2
N O N E

Schedule S - Part 4
N O N E

Schedule S - Part 4 - Bank Footnote
N O N E

Schedule S - Part 5
N O N E

Schedule S - Part 5 - Bank Footnote
N O N E

Schedule S - Part 6
N O N E

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	1,139,435	0	1,139,435
2. Accident and health premiums due and unpaid (Line 15)	9,995	0	9,995
3. Amounts recoverable from reinsurers (Line 16.1)	0	0	0
4. Net credit for ceded reinsurance	XXX	0	0
5. All other admitted assets (Balance)	3,025	0	3,025
6. Total assets (Line 28)	1,152,455	0	1,152,455
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	16,881	0	16,881
8. Accrued medical incentive pool and bonus payments (Line 2)	0	0	0
9. Premiums received in advance (Line 8)	3,037	0	3,037
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0	0	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount)	0	0	0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount)	0	0	0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0	0	0
14. All other liabilities (Balance)	31,804	0	31,804
15. Total liabilities (Line 24)	51,722	0	51,722
16. Total capital and surplus (Line 33)	1,100,733	XXX	1,100,733
17. Total liabilities, capital and surplus (Line 34)	1,152,455	0	1,152,455
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid	0		
19. Accrued medical incentive pool	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	0		
23. Total ceded reinsurance recoverables	0		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers	0		
28. Funds held under reinsurance treaties with Certified Reinsurers	0		
29. Other ceded reinsurance payables/offsets	0		
30. Total ceded reinsurance payables/offsets	0		
31. Total net credit for ceded reinsurance	0		

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		Direct Business Only					
		1	2	3	4	5	6
States, Etc.		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama	AL					
2.	Alaska	AK					
3.	Arizona	AZ					
4.	Arkansas	AR					
5.	California	CA					
6.	Colorado	CO					
7.	Connecticut	CT					
8.	Delaware	DE					
9.	District of Columbia	DC					
10.	Florida	FL					
11.	Georgia	GA					
12.	Hawaii	HI					
13.	Idaho	ID					
14.	Illinois	IL					
15.	Indiana	IN					
16.	Iowa	IA					
17.	Kansas	KS					
18.	Kentucky	KY					
19.	Louisiana	LA					
20.	Maine	ME					
21.	Maryland	MD					
22.	Massachusetts	MA					
23.	Michigan	MI					
24.	Minnesota	MN					
25.	Mississippi	MS					
26.	Missouri	MO					
27.	Montana	MT					
28.	Nebraska	NE					
29.	Nevada	NV					
30.	New Hampshire	NH					
31.	New Jersey	NJ					
32.	New Mexico	NM					
33.	New York	NY					
34.	North Carolina	NC					
35.	North Dakota	ND					
36.	Ohio	OH					
37.	Oklahoma	OK					
38.	Oregon	OR					
39.	Pennsylvania	PA					
40.	Rhode Island	RI					
41.	South Carolina	SC					
42.	South Dakota	SD					
43.	Tennessee	TN					
44.	Texas	TX					
45.	Utah	UT					
46.	Vermont	VT					
47.	Virginia	VA					
48.	Washington	WA					
49.	West Virginia	WV					
50.	Wisconsin	WI					
51.	Wyoming	WY					
52.	American Samoa	AS					
53.	Guam	GU					
54.	Puerto Rico	PR					
55.	U.S. Virgin Islands	VI					
56.	Northern Mariana Islands	MP					
57.	Canada	CAN					
58.	Aggregate Other Alien	OT					
59.	Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percen- tage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Yes/No)	16 *
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi- ciliary Loca- tion	Rela- tion- ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)					
. 0429	The Guardian Life Insurance Co. of America	64246	13-5123390	3081309			The Guardian Life Insurance Co. of America	.. NY		The Guardian Life Insurance Co. of America		.. 0.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	60003	04-2350154				Park Avenue Life Insurance Company	.. DE	.. IA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	74004	74-1319784				Family Service Life Insurance Company	.. TX	.. IA	Park Avenue Life Insurance Company	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	77119	74-0952935				Sentinel American Life Insurance Company	.. TX	.. IA	Family Service Life Insurance Company	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	78778	13-2656036				The Guardian Insurance & Annuity Co., Inc.	.. DE	.. IA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		13-4023176				Park Avenue Securities LLC	.. DE	.. NIA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		95-4326311				Managed Dental Care of California	.. CA	.. NIA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. YES	
. 0429	The Guardian Life Insurance Co. of America	11221	36-3691770				First Commonwealth Ltd Health Svs Corp	.. IL	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		36-3563031				First Commonwealth of Illinois Inc.	.. IL	.. NIA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	47716	43-1501438				First Commonwealth of Missouri, Inc.	.. MO	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	12146	36-4117539				First Commonwealth Ltd Hlth Svs Corp of MI	.. MI	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	60239	36-4189451				First Commonwealth Insurance Company	.. IL	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		75-2154228				First Commonwealth Inc.	.. DE	.. NIA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. YES	
. 0429	The Guardian Life Insurance Co. of America	71714	75-1277524	2391878			Berkshire Life Insurance Company of America	.. MA	.. IA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	52556	75-2698702				Managed DentalGuard Inc. (Texas)	.. TX	.. IA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	11199	22-3849572				Managed DentalGuard Inc. (New Jersey)	.. NJ	.. IA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	14142	27-4326698				Managed DentalGuard Inc. (Ohio)	.. OH	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		13-4198972				Guardian Investor Services LLC	.. DE	.. NIA	The Guardian Life Insurance Co. of America	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	60237	91-1857813				Premier Access Insurance Company	.. CA	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	15494	45-2881632				Access Dental Plan of Utah, Inc.	.. UT	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	15307	46-2243044				Access Dental Plan of Nevada, Inc.	.. NV	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		68-0291842				Access Dental Plan	.. CA	.. NIA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America						Guardian India Operations Private Limited	.. IND	.. NIA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		20-1896945				Premier Group, Inc.	.. CA	.. NIA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0000	The Guardian Life Insurance Co. of America		86-0349350				Avesis, LLC	.. DE	.. IA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	
. 0429	The Guardian Life Insurance Co. of America	11163	86-0960007				Avesis Insurance Incorporated	.. AZ	.. NIA	First Commonwealth Inc.	Ownership	.. 100.000	The Guardian Life Insurance Co. of America	.. NO	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0000	The Guardian Life Insurance Co. of America		86-0986927				Avesis TPA, LLC	.. AZ	 NIA	First Commonwealth Inc.	Ownership	100.000	The Guardian Life Insurance Co. of America	... NO	.....
. 0000	The Guardian Life Insurance Co. of America		16-1583908				Avesis of New York, Inc	.. NY	 NIA	First Commonwealth Inc.	Ownership	100.000	The Guardian Life Insurance Co. of America	... NO	.....
. 0000	The Guardian Life Insurance Co. of America		87-1961981				Avatar Holdco 1, Inc.*	.. DE	 NIA	First Commonwealth Inc.	Ownership	100.000	The Guardian Life Insurance Co. of America	... NO	.....
. 0000	The Guardian Life Insurance Co. of America		35-2728506				Avatar Holdings, LLC*	.. DE	 NIA	First Commonwealth Inc.	Ownership	88.000	The Guardian Life Insurance Co. of America	... NO	.....
. 0000	The Guardian Life Insurance Co. of America		87-1985081				Avatar Hold Co 2, Inc	.. DE	 NIA	First Commonwealth Inc.	Ownership	88.000	The Guardian Life Insurance Co. of America	... NO	.....
. 0000	The Guardian Life Insurance Co. of America		91-1857813				Avesis of Florida, Inc	.. NY	 NIA	First Commonwealth Inc.	Ownership	88.000	The Guardian Life Insurance Co. of America	... NO	.....

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....64246	13-5123390	Guardian Life Insurance Company of America	109,800,000	137,900,000	0	0	209,595,382	135,604,835 .....	.....	.....( 150,000,000)	442,900,217	(1,849,605,593)
.....78778	13-2656036	Guardian Insurance & Annuity Company, Inc.	0	0	0	0	(63,623,751)	6,949,711 .....	.....	.....0	(56,674,040)	249,022,294
.....00000	13-4198972	Guardian Investor Services LLC	(84,800,000)	(104,500,000)	0	0	(3,217,813)	0 .....	.....	.....150,000,000	(42,517,813)	0
.....00000	88-0615838	Hawk Equity Holdings LLC	0	0	0	0	1,673,498	0 .....	.....	.....0	1,673,498	0
.....00000	88-4340113	Guardian Membership LLC	0	0	0	0	150,328	0 .....	.....	.....0	150,328	0
.....71714	75-1277524	Berkshire Life Insurance Company of America	0	0	0	0	(157,119,731)	(142,703,541) .....	.....	.....0	(299,823,272)	1,601,620,819
.....60003	04-2350154	Park Avenue Life Insurance Company	0	(12,000,000)	0	0	(2,416,210)	0 .....	.....	.....0	(14,416,210)	0
.....00000	95-4326311	Managed Dental Care of California	0	0	0	0	(1,931,108)	0 .....	.....	.....0	(1,931,108)	0
.....11199	22-3849572	Managed DentalGuard Inc. (New Jersey)	0	0	0	0	(468,039)	0 .....	.....	.....0	(468,039)	0
.....52556	75-2698702	Managed DentalGuard Inc. (Texas)	0	0	0	0	(1,188,263)	0 .....	.....	.....0	(1,188,263)	0
.....14142	27-4326698	Managed DentalGuard, Inc. (Ohio)	0	0	0	0	(31,593)	0 .....	.....	.....0	(31,593)	0
.....00000	13-4023176	Park Avenue Securities, LLC	(25,000,000)	(15,000,000)	0	0	(58,473,560)	0 .....	.....	.....0	(98,473,560)	0
.....00000	85-0810849	Guardian Advisory Services, LLC	0	0	0	0	(455,494)	0 .....	.....	.....0	(455,494)	0
.....74004	74-1319784	Family Service Life Insurance Company	0	(6,000,000)	0	0	(952,673)	0 .....	.....	.....0	(6,952,673)	0
.....77119	74-0952935	Sentinel American Life Insurance Company	0	0	0	0	(140,414)	0 .....	.....	.....0	(140,414)	0
.....00000	22-1947346	Innovative Underwriters, Inc.	0	(400,000)	0	0	(108,663)	0 .....	.....	.....0	(508,663)	0
.....00000	46-5427804	Hanover Square Funding, LLC	0	0	0	0	(1,242,670)	0 .....	.....	.....0	(1,242,670)	0
.....00000	37-1780736	Park Avenue Institutional Advisers, LLC	0	0	0	0	26,745,242	0 .....	.....	.....0	26,745,242	0
.....00000	75-2154228	First Commonwealth Inc.	0	0	0	0	(1,512,988)	0 .....	.....	.....0	(1,512,988)	0
.....60239	36-4189451	First Commonwealth Insurance Company	0	0	0	0	(7,108,332)	0 .....	.....	.....0	(7,108,332)	0
.....00000	36-3563031	First Commonwealth of Illinois, Inc.	0	0	0	0	5,465,917	0 .....	.....	.....0	5,465,917	0
.....11221	36-3691770	First Commonwealth Limited Health Services Corporation (IL)	0	0	0	0	(62,747)	0 .....	.....	.....0	(62,747)	0
.....47716	43-1501438	First Commonwealth of Missouri, Inc.	0	0	0	0	(261,878)	0 .....	.....	.....0	(261,878)	0
.....12146	36-4117539	First Commonwealth Limited Health Services Corporation of Michigan	0	0	0	0	(1,111,667)	0 .....	.....	.....0	(1,111,667)	0
.....00000	68-0291842	Access Dental Plan	0	0	0	0	(9,422,654)	0 .....	.....	.....0	(9,422,654)	0
.....60237	91-1857813	Premier Access Insurance Company	(23,205,685)	1,000,000	0	0	(23,005,806)	0 .....	.....	.....0	(45,211,491)	0
.....00000 .....	.....	Guardian India Operations Private Ltd.	0	0	0	0	58,746,604	0 .....	.....	.....0	58,746,604	0
.....15307	46-2243044	Access Dental Plan of Nevada	0	0	0	0	(9,870)	0 .....	.....	.....0	(9,870)	0
.....15494	45-2881632	Access Dental Plan of Utah	0	0	0	0	(197)	0 .....	.....	.....0	(197)	0
.....00000	86-0349350	Avesis, LLC	0	0	0	0	109,325,469	0 .....	.....	.....0	109,325,469	0
.....11163	86-0960007	Avesis Insurance Incorporated	(8,424,000)	0	0	0	(18,978,159)	148,995 .....	.....	.....0	(27,253,164)	(1,037,520)
.....00000	86-0986927	Avesis TPA, LLC	0	0	0	0	(54,426,559)	0 .....	.....	.....0	(54,426,559)	0
.....00000	87-1961981	Avatar Holdco 1, Inc.	0	0	0	0	3,681,813	0 .....	.....	.....0	3,681,813	0
.....00000	35-2728506	Avatar Holdings, LLC	0	0	0	0	0	0 .....	.....	.....0	0	0
.....00000	87-1985081	Avatar Hold Co 2, Inc	31,629,685	(1,000,000)	0	0	(3,606,813)	0 .....	.....	.....0	27,022,872	0
.....00000	47-4192116	GIS Strategic Ventures LLC	0	0	0	0	534,904	0 .....	.....	.....0	534,904	0
.....00000	81-5286640	Park Avenue Credit Opportunities LLC	0	0	0	0	(281)	0 .....	.....	.....0	(281)	0
.....00000	47-5246254	GIS Credit Opportunities LLC	0	0	0	0	(4,948,006)	0 .....	.....	.....0	(4,948,006)	0
.....00000	61-1895246	DTC GLIC, LLC.	0	0	0	0	(93,218)	0 .....	.....	.....0	(93,218)	0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1	2	3	4	5	6	7	8
		Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control\ Affiliation of Column 2 Over Column 1 (Yes/No)		U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control\ Affiliation of Column 5 Over Column 6 (Yes/No)
Insurers in Holding Company	Owners with Greater Than 10% Ownership			Ultimate Controlling Party			
Guardian Life Insurance Company of America .....	.....	0.000	.....	.....	.....	0.000	.....
Guardian Insurance & Annuity Company, Inc.	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Guardian Insurance & Annuity Company, Inc.	100.000	 NO.....
Berkshire Life Insurance Company of America	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Berkshire Life Insurance Company of America	100.000	 NO.....
Park Avenue Life Insurance Company	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Park Avenue Life Insurance Company	100.000	 NO.....
Family Service Life Insurance Company	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Family Service Life Insurance Company	100.000	 NO.....
Sentinel American Life Insurance Company	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Sentinel American Life Insurance Company	100.000	 NO.....
Managed DentalGuard, Inc. (New Jersey)	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Managed DentalGuard, Inc. (New Jersey)	100.000	 NO.....
Managed DentalGuard, Inc. (Texas)	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Managed DentalGuard, Inc. (Texas)	100.000	 NO.....
First Commonwealth Insurance Company	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	First Commonwealth Insurance Company	100.000	 NO.....
First Commonwealth Limited Health Services Corporation	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	First Commonwealth Limited Health Services Corporation	100.000	 NO.....
First Commonwealth Limited Health Services Corporation of Michigan	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	First Commonwealth Limited Health Services Corporation of Michigan	100.000	 NO.....
First Commonwealth of Missouri, Inc.	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	First Commonwealth of Missouri, Inc.	100.000	 NO.....
Managed DentalGuard, Inc. (Ohio)	Guardian Life Insurance Company of America	100.000	 NO.....	Guardian Life Insurance Company of America	Managed DentalGuard, Inc. (Ohio)	100.000	 NO.....
Premier Access Insurance Company	Guardian Life Insurance Company of America	88.000	 NO.....	Guardian Life Insurance Company of America	Premier Access Insurance Company	88.000	 NO.....
Access Dental Plan of Nevada, Inc.	Guardian Life Insurance Company of America	88.000	 NO.....	Guardian Life Insurance Company of America	Access Dental Plan of Nevada, Inc.	88.000	 NO.....
Access Dental Plan of Utah, Inc.	Guardian Life Insurance Company of America	88.000	 NO.....	Guardian Life Insurance Company of America	Access Dental Plan of Utah, Inc.	88.000	 NO.....
Avesis Insurance Incorporated	Guardian Life Insurance Company of America	88.000	 NO.....	Guardian Life Insurance Company of America	Avesis Insurance Incorporated	88.000	 NO.....
Avesis of Florida, Inc.	Guardian Life Insurance Company of America	88.000	 NO.....	Guardian Life Insurance Company of America	Avesis of Florida, Inc.	88.000	 NO.....
.....							
.....							
.....							

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Responses
MARCH FILING		
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will an actuarial opinion be filed by March 1?	WAIVED
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
JUNE FILING		
8.	Will an audited financial report be filed by June 1?	WAIVED
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	WAIVED

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		
10.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
11.	Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
13.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
14.	Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
15.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
16.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
17.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
18.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
19.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with the applicable jurisdictions and with the NAIC by March 1?.....	NO
APRIL FILING		
20.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
21.	Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
22.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
23.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
24.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
Explanations:		
10.		
11.		
12.		
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14.		
15.		
16.		
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19.		
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24.		

Bar Codes:

2.	Actuarial Opinion [Document Identifier 440]	
8.	Audited Financial Report [Document Identifier 220]	
9.	Accountants Letter of Qualifications [Document Identifier 221]	
10.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
11.	Life Supplement [Document Identifier 205]	
12.	SIS Stockholder Information Supplement [Document Identifier 420]	
13.	Participating Opinion for Exhibit 5 [Document Identifier 371]	
14.	Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE MANAGED DENTALGUARD INC (OHIO)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

15.	Medicare Part D Coverage Supplement [Document Identifier 365]	 141422023365000000
16.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 141422023224000000
17.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 141422023225000000
18.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 141422023226000000
19.	Market Conduct Annual Statement (MCAS) Premium Exhibit for Year [Document Identifier 600]	 141422023600000000
20.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 141422023306000000
21.	Life Supplement [Document Identifier 211]	 141422023211000000
22.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 141422023216000000
23.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 141422023290000000
24.	Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 141422023223000000