



Self-Reporting Financial Viability Questionnaire

IEHP Reserves the right to request additional details regarding information submitted in this questionnaire, and account balances represented on the financial statements.

Contractor Information

Contractor Name: _____
Address: _____
Phone: _____
Contact Name: _____

Reporting Year: _____

Contractor Self-Reported Financial Viability Metrics

1. Days Cash on Hand for the Reporting Year - Minimum of 90 Days

(Unrestricted cash + cash equivalents) / (annual operating cost / 365) =

Response:

2. Cash Flow Coverage Ratio for the Reporting Year - Minimum of 1.5

Operating cash flow / total debt (or debt expense) =

Response:

3. Current Ratio - Minimum of 1.0

Current assets / current liabilities =

Response:

4. Tangible Net Equity - Must be Positive

(Total assets - intangibles - unsecured assets) - total liabilities =

Response:



Self-Reporting Financial Viability Questionnaire

5. Net Collections Ratio - Minimum of 95%

Adjusted (for contract adjustments) received/ billed =

Response:

6. Net Margins for the Reporting Year and Prior Two Years - To Track Trend

Net Income / Revenue =

Reporting Year:

Reporting Year(-1):

Reporting Year(-2):

Contractor Attestation

By my signature below, I attest that the information provided above is true and correct to the best of my knowledge.

Name: _____

Title: _____

Signature _____

Date: _____

Internal Use Only