<u>Collection Instrument and Instructions</u> CMS-906, OMB 0938-0469 Fiscal Soundness Reporting Requirements (FSRR)

1. Login to HPMS (<u>https://hpms.cms.gov/app/login.aspx?ReturnUrl=%2fapp%2fhome.aspx</u>) with CMS ID issued username and password.

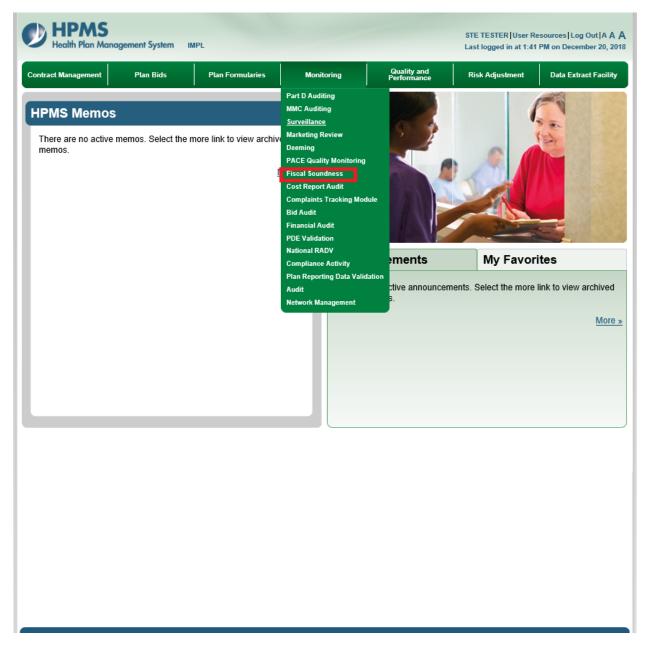
HPMS Health Plan Management System						
Username Password	jyxa					
	Login					
This is a U.S. Go	overnment computer system subject to Federal law.					

CV: 1.28.0.0.2

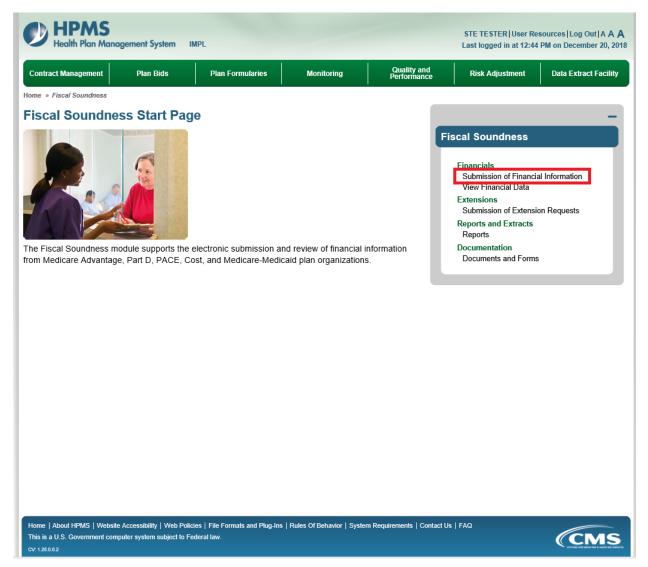
2. Select Monitoring

WHPMS STE TESTER User Resources Log Out A A A Health Plan Management System IMPL STE TESTER User Resources Log Out A A Last logged in at 12:44 PM on December 20, 2014							
Contract Management	Plan Bids	Plan Formularies	Monitoring	Quality and Performance	Risk Adjustment	Data Extract Facility	
HPMS Memos There are no active memos.		nore link to view archiv	More »	buncements re no active announcer cements.	My Favori nents. Select the more l	1	
Home About HPMS Website This is a U.S. Government com CV. 1.28.0.2			s Rules Of Behavior Syste	em Requirements Contact Us	s FAQ	(CMS	

3. Select Fiscal Soundness



4. Select Submission of Financial Information



5. Select Contract Number/Name and select Next

	STE TESTER User Resources Log Out A A A ast logged in at 12:44 PM on December 20, 2018						
Contract Management Plan Bids Plan Formularies Monitoring Quality and Performance	Risk Adjustment Data Extract Facility						
Home » Fiscal Soundness » Submission of Financial Information Add to My Favorites							
Submission of Financial Information Fiscal	Soundness +						
1 2 3 4							
Step 1 of 4: Select a Contract Number / Name or one Contract Number / Name within a	contract group.						
A field with an asterisk (*) before it is a required field.							
*Contract Number / Name: H6502 - MISSOURI VALLEY LIFE AND HEALTH INSURANCE COMPANY (76040	0)						
Next							
Home About HPMS Website Accessibility Web Policies File Formats and Plug-Ins Rules Of Behavior System Requirements Contact Us FA This is a U.S. Government computer system subject to Federal law. cv: 128.0.2	CMS						

6. Select appropriate submission type (Annual Audited or Reporting Period Ending/Quarterly Submission) and select Submit New hyperlink.

ntract Management	Plan Bids	Plan Formularies	Monitoring	Quality and Performance	Risk Adjustment	Data Extract Faci
r > Fiscal Soundness = 5	ubmission of Financial Inf	formation = Select Repo	rting Period			
lect Reporting	Period			Fis	cal Soundness	-
		0	2 3	4		
tep 2 of 4: Select a lin formation page via rig			e Reporting period. If n	o link is available, navi	gate back to Submiss	ion of Financial
	Contract	Number: H6502				
	Contra	ict Name: MISSOU	RI VALLEY LIFE AND H	HEALTH INSURANCE	COMPANY	
		NAIC#: 76040				
		JV ID:				
ne next nage will displa	av all contracts asso		act group if applicable			
he next page will displ Contract Year	ay all contracts asso Audited Annual	ciated with the contr	act group, if applicable. Reporting Period Ending 3/31	Reporting P Ending 6		porting Period Ending 9/30
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Contract Year	Audited Annual Submittee	ciated with the contra	Reporting Period Ending 3/31 Submitted	Ending 6 Submitte	30 d Du	Endina 9/30 e by 11/15/2018
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- 7. Submit data elements and documentation
 - a. Enter the following amounts: Total Assets, Total Liabilities, Net Income (Loss), and Cash Flow from Operations
 - b. Upload/Attach Financial Statements
 - c. Select Next to complete submission

ntract Managen	nent Plan Bids	Plan Formularies	Monitoring	Quality and Performance	Risk Adjustment	Data Extract Facil
e » Fiscal Sound	dness » Submission of Financial Infor	mation » Select Repor	ting Period » New Financia			
w Finan	cial Submission			Fise	cal Soundness	
		1	2 3	4		
	Step 3 c	of 4: Provide your f	inancial details and up	oload your financial state	ment.	
field with an a	asterisk (*) before it is a require	d field.			Defir	nitions and Instructio
	Contra	ct Year: 2018				
			Period Ending 9/30			
	Joint Venture	Name:				
		NAIC#: 76040				
		FYED: 12/31				
ontract Infor	mation:					
Contract Number	Contract Na	me	Region Responsible	Parent Organization	Name Parent (NAIC#	
H6502	MISSOURI VALLEY LIFE INSURANCE CO		Kansas City	Blue Cross and Blue Kansas City		
	*Total Asse	ts(in \$):				
	*Total Liabilitie					
	*Net Income (Los	s)(in \$):				
	*Cash Flow from Operation	s(in \$):				
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Contract Manageme	ent Plan Bids Plan Form	nularies	Monitoring	Quality and Performance	Risk Adjustment	Data Extract Facility		
Home » Fiscal Soundness » Submission of Financial Information » Select Reporting Period » New Financial Submission								
New Financial Submission Fiscal Soundness +								
		1	2 3	4				
A field with an as	Step 3 of 4: Provide your financial details and upload your financial statement. A field with an asterisk (*) before it is a required field.							
	Contract Year:	2018						
	Submission Type:	Reporting F	Period Ending 9/30					
	Joint Venture Name:							
	NAIC#:							
	FYED:	12/31						
Contract Inform	ation:							
Contract Number	Contract Name		Region Responsible	Parent Organization N	ame Parent Org NAIC#	Joint Venture ID		
H6502	MISSOURI VALLEY LIFE AND H INSURANCE COMPANY	EALTH	Kansas City	Blue Cross and Blue Shi Kansas City	eld of 47171			
	*Total Assets(in \$):	250000						
	*Total Liabilities(in \$):	125000						
	*Net Income (Loss)(in \$):	55000						
	*Cash Flow from Operations(in \$):	75000						
 Accepted File Types: .doc, .docx, .pdf, .zip. Maximum of 10 MB per file. Uploaded File Name length should not exceed 150 characters. 								
*File: C:\Users\Z2E7\Desktop\Testing123.docx Browse								
Next								
	Website Accessibility Web Policies File Format ent computer system subject to Federal law.	s and Plug-Ins	Rules Of Behavior Syst	em Requirements Contact Us FA	۵	(CMS		

8. Verify amounts and file selected and then select Submit

