

## DEFICIT REDUCTION ACT OF 2005

120 STAT. 74 PUBLIC LAW 109–171—FEB. 8, 2006

### **SEC. 6032. EMPLOYEE EDUCATION ABOUT FALSE CLAIMS RECOVERY**

**(a) IN GENERAL.—Section 1902(a) of the Social Security Act (42 U.S.C. 1396a(a))** is amended—

- (1) in paragraph **(66)**, by striking “and” at the end;
- (2) in paragraph **(67)** by striking the period at the end and inserting “; and”; and
- (3) by inserting after paragraph **(67)** the following:

“(68) provide that any entity that receives or makes annual payments under the State plan of at least \$5,000,000, as a condition of receiving such payments, shall—

“(A) establish written policies for all employees of the entity (including management), and of any contractor or agent of the entity, that provide detailed information about the False Claims Act established under sections 3729 through 3733 of title 31, United States Code, administrative remedies for false claims and statements established under chapter 38 of title 31, United States Code, any State laws pertaining to civil or criminal penalties for false claims and statements, and whistleblower protections under such laws, with respect to the role of such laws in preventing and detecting fraud, waste, and abuse in Federal health care programs (as defined in section 1128B(f));

“(B) include as part of such written policies, detailed provisions regarding the entity’s policies and procedures for detecting and preventing fraud, waste, and abuse; and

“(C) include in any employee handbook for the entity, a specific discussion of the laws described in subparagraph (A), the rights of employees to be protected as whistleblowers, and the entity’s policies and procedures for detecting and preventing fraud, waste, and abuse.”.

**(b) EFFECTIVE DATE.—**Except as provided in section 6035(e), 42 USC 1396h note. the amendments made by subsection (a) take effect on January 1, 2007.

### STATE PLANS FOR MEDICAL ASSISTANCE<sup>3</sup>

**Sec. 1902. [42 U.S.C. 1396a] (a)** A State plan for medical assistance must—

(66) provide for making eligibility determinations under section [1935\(a\)](#);

(67) provide, with respect to services covered under the State plan (but not under title XVIII) that are furnished to a PACE program eligible individual enrolled with a PACE provider by a provider participating under the State plan that does not have a contract or other agreement with the PACE provider that establishes payment amounts for such services, that such participating provider may not require the PACE provider to pay the participating provider an amount greater than the amount that would otherwise be payable for the service to the participating provider under the State plan for the State where the PACE provider is located (in accordance with regulations issued by the Secretary);

**The Connecticut Department of Correction has adopted as its policy, the above federal policies as they relate to false claims recovery.**