## **DRA ATTESTATIONS**

Each year, Missouri Medicaid Audit and Compliance (MMAC) sends "DRA Attestations" to Medicaid providers that received at least five (5) million dollars in annual Medicaid payments during the previous federal fiscal year.

The Deficit Reduction Act (DRA) of 2005 states that those providers (receiving at least \$5 million in payments) shall:

- establish written policies for all employees about the False Claims Act
- establish and include provisions in those policies about how to detect and prevent fraud, waste, and abuse, and
- establish and include this information in any employee handbook

State regulation 13 CSR 70-3.8 requires Medicaid providers to make an annual attestation of compliance with these requirements, by March 1 of each year. If you received an annual attestation form and have not completed it and returned it to MMAC, you will receive a second notice, providing you with another opportunity to comply. MMAC encourages providers who receive the annual attestation to complete it and return it in a timely manner, to avoid any possible sanctions.

## Regulation: <u>13 CSR 13-70-3.030(3)(A)8</u>

CMS: Important Facts per CMS - Deficit Reduction Act

## ATTESTATION Re: Section6032 of the Deficit Reduction Act

To: Missouri Medicaid Audit and Compliance Unit Missouri Department of Social Services 3418 Knipp Dr, Suite F - <u>note the new address</u> Jefferson City, MO 65109

I,[name of entity's authorized representative	], hereby swear or attest, under the
penalty for false statement, that in my capacity as	[position or office held by
entity's authorized representative] of	[name of entity] I have
the authority to make this attestation on behalf of	[name of
entity] and have attached appropriate documentation proving that	possess such authority.

I further attest that \_\_\_\_\_ has:

\_[name of entity, FEIN & NPI #]

A. established 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. included 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. included 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.

	Date:			
[name of entity's c	uthorized representative]			
State of				
County of				
On this the	day of	/	, before me,	
	, the undersigned officer, persona	ally appeared		name of
entity's authorized	representative], who acknowledged he	erself/himself to be	e the	-
[position or office	held by entity's authorized representativ	r <b>e</b> ] of	[nam	e of entity], a
	business form of entity, e.g., par			
such	[position or office held by e	ntity's authorized	representative], be	eing
authorized so to d	o, executed the foregoing attestation fo	or the purposes the	erein contained, by	y signing the
name of	[name of entity] by here	self/himself as		position
	ntity's authorized representative], and sy			

In witness whereof I hereunto set my hand

Notary Public/Justice of the Peace/ Commissioner of the Superior Court FALSE STATEMENT IS PUNISHABLE BY A FINE NOT TO EXCEED \$10,000.00, PLUS 3 TIMES THE AMOUNT OF DAMAGES WHICH THE GOVERNMENT SUSTAINS BECAUSE OF THE ACT OF THAT PERSON (31 USC 3729)