

State of Mississippi

False Claims Act

1. The Division of Medicaid, the Mississippi single state agency, will incorporate into the provider enrollment agreement and other contractors, the responsibilities of the affected entities in implementing Section 6032 of the Deficit Reduction Act of 2005, the "Employee Education about False Claims Recovery."
 2. The Division of Medicaid will determine affected entities based upon federal law, regulations, and guidance from the Centers for Medicare and Medicaid Services.
 3. The Division of Medicaid will conduct an audit of the affected entities written policies/procedures including all relevant affected employee education policies and any provisions described in the entity's employee handbook. A written response of approval and/or suggestions will be provided to the affected entity. Policies and procedures will include explanation of the false claims act; the entity's policies and procedures for detecting and preventing waste, fraud and abuse; the rights of the employee to be protected as whistle blowers and telephone numbers and/or addresses for reporting fraud and abuse.
 4. Thereafter, the Division will contact affected entities on a yearly basis for any update or change to its written policies. The Division will accomplish this verification by survey.
 5. New affected entities identified each year will be required to submit their policies and dissemination plan and will be handled per #2, 3, and 4.
 6. The Division of Medicaid has a range of sanctions contained in its administrative regulation for non-compliance with Medicaid policies. These sanctions range from requiring a plan of correction to termination from the Medicaid program. These sanctions will be applied to non-compliance with the "Employee Education about False Claim Recovery."
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