

RESOLUTION

Moved by Brownell Seconded by Giovannetti

THAT THE FOLLOWING RESOLUTION BE ADOPTED:

WHEREAS, the Federal Deficit Reduction Act of 2005 and the Social Security Act require entities that make or receive annual Medicaid payments of \$5 million or more to adopt written policies applicable to employees, contractors and agents who work in federally supported services; and

WHEREAS, as a requirement for Medicaid payment, those entities must establish written policies that: provide to employees detailed information about the federal False Claims Act and comparable state anti-fraud statutes, including whistleblower provisions in those laws; describe policies and procedures for detecting and preventing waste, fraud and abuse; and include in employee policies a specific discussion of the laws described in the written policies, including the rights of employees to be protected as whistleblowers; and

WHEREAS, it is in the public interest to comply with the Federal Deficit Reduction Act of 2005 by adopting anti-fraud policies and implementing procedures; and

WHEREAS, Polk County receives more than \$5 million in Medicaid payments annually and receives other federal funds; and

WHEREAS, Polk County Elected Officials and department heads for units submitting Federal claims are the appropriate persons to implement anti-fraud procedures;

NOW THEREFORE BE IT RESOLVED that the Polk County Board of Supervisors does hereby adopt the policy to be in compliance with the Federal Deficit Reduction Act of 2005 and direct the Auditor and County Attorney to assist Elected Officials and Department Heads in its implementation.

POLK COUNTY BOARD OF SUPERVISORS

By Tom Hockensmith
Chairperson

SUBMITTED BY:

By [Signature]
Lynn D. Ferrell, Executive Director
Polk County Health Services, Inc

APPROVED AS TO FORM:

Candy Morgan
Polk County Attorney's Office
Civil Bureau

ROLL CALL FOR ALLOWANCE		
MAR 27 '07		
E.J. Giovannetti	<input checked="" type="checkbox"/> Yea	<input type="checkbox"/> Nay
Robert Brownell	<input checked="" type="checkbox"/> Yea	<input type="checkbox"/> Nay
Angela Connolly	<input checked="" type="checkbox"/> Yea	<input type="checkbox"/> Nay
John F. Mauro	<input checked="" type="checkbox"/> Yea	<input type="checkbox"/> Nay
Tom Hockensmith	<input checked="" type="checkbox"/> Yea	<input type="checkbox"/> Nay
Yea	<u>5</u>	Nay <u>0</u>
Above tabulation made by <u>[Signature]</u>		
ALLOWED BY ABOVE VOTE OF BOARD		
<u>Tom Hockensmith</u> CHAIRPERSON		

Tom Hockensmith
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