



**To: OSF Vendors**  
**Attn: Human Resources/Compliance Departments**  
**From: Gina Thompson, Senior Vice President, Chief Integrity Officer**  
**Re: Deficit Reduction Act of 2005**

---

The Deficit Reduction Act (DRA) of 2005 states that health care providers receiving \$5 million dollars of aggregate Medicaid payments annually must establish and disseminate certain written policies and procedures to its contractors or agents, who must then abide by the policies as to the work the contractor or agent performs for the entity, in addition to making the policies available to the contractor's and agent's employees involved in performing that work. The written policies and procedures must discuss the False Claims Act, administrative remedies for false claims and statements, State laws pertaining to civil and criminal penalties for false claims and statements, and whistleblower protections under these laws as well as the role of these laws in preventing and detecting fraud, waste and abuse.

**For purposes of the DRA, contractors or agents include those providing billing and coding functions, and those which or who, on behalf of the entity, furnish or otherwise authorize the furnishing of Medicaid health care items or services or are involved in the monitoring of health care provided by the entity. This includes, but is not limited to: all contract therapists, physicians (including, but not limited to, house staff, hospitalists, and independent contractors), and pharmacies. Supply vendors that supply products used in the furnishing of Medicaid health care services are also considered an entity's contractor.**

Your or your organization's name appeared on our vendor payee records. These records do not provide information about the nature of the services or products you provided to OSF Healthcare. If those services or products do not constitute the services underlined above, please disregard this letter.

The OSF Policy "False Claims Prevention and Whistleblower Protections" can be accessed in the Vendor Information section of our website at <https://www.osfhealthcare.org/compliance/>. We are requesting that you provide this information to all employees of your organization who have jobs and duties related to any and all facilities of OSF HealthCare System which includes:

OSF Divine Mercy Continuing Care Hospital	Peoria, Illinois
OSF Heart of Mary Medical Center	Urbana, Illinois
OSF Holy Family Medical Center	Monmouth, Illinois
OSF Little Company of Mary Medical Center	Evergreen Park, Illinois
OSF Sacred Heart Medical Center	Danville, Illinois
OSF Saint Anthony Medical Center	Rockford, Illinois
OSF Saint Anthony's Health Center	Alton, Illinois
OSF Saint Clare Medical Center	Princeton, Illinois
OSF Saint Elizabeth Medical Center	Ottawa and Peru, Illinois
OSF Saint Francis Medical Center	Peoria, Illinois
OSF St. Francis Hospital and Medical Group	Escanaba, Michigan
OSF Saint James-John W. Albrecht Medical Center	Pontiac, Illinois
OSF St. Joseph Medical Center	Bloomington, Illinois
OSF Saint Katharine Medical Center	Dixon, Illinois
OSF Saint Luke Medical Center	Kewanee, Illinois
OSF St. Mary Medical Center	Galesburg, Illinois
OSF Saint Paul Medical Center	Mendota, Illinois
OSF Home Care Services	Illinois and Michigan
OSF Medical Group, OSF PromptCare, OSF OnCall Urgent Care	Illinois and Michigan

Please direct any questions or requests for a paper copy of the policy to Gail Sheehan, Director of Compliance Services at 309-308-5967 or [Gail.S.Sheehan@osfhealthcare.org](mailto:Gail.S.Sheehan@osfhealthcare.org).

Thank you for your attention to this matter.