

Medicaid Inspector General, Office of the

Mission

The Office of the Medicaid Inspector General (OMIG) preserves the integrity of the Medicaid program by conducting and coordinating fraud, waste and abuse control activities for all State agencies responsible for services funded by the Medicaid program. In fulfilling this role, the Office conducts and supervises all prevention, detection, and investigation activities and makes recommendations to these agencies for improvement. In addition, the Medicaid Inspector General works closely with the Attorney General's Medicaid Fraud and Control Unit (MFCU) and Federal and local law enforcement officials.

Organization and Staffing

OMIG is headed by the Medicaid Inspector General, who is appointed by the Governor. The agency is organized into seven major business units: The Executive Office, Division of Medicaid Audit, Division of Medicaid Investigations, Division of System Utilization and Review, Division of Administration, and Office of Counsel.

Budget Highlights

The Executive Budget recommends \$44 million for OMIG and a workforce of 426 FTE, maintaining the funding and workforce target from the FY 2019 budget. Additionally, the Executive Budget supports initiatives to expand the authority of the Office of the Medicaid Inspector General (OMIG) to recover a component of the administrative premium from Medicaid managed care organizations (MCO) for noncompliance with program integrity obligations within the contract; and, allowing for the recovery of overpayments from MCOs, subcontractors and/or providers as a result of fraud, waste and abuse. These initiatives will save \$4.1 million in FY 2020 and \$8.7 million in FY 2021.

For more information on this agency's budget recommendations located in the Executive Budget Briefing Book, click on the following link:

Program Highlights

Medicaid Audit

OMIG staff conduct audits and reviews of Medicaid providers to determine compliance with program requirements and to identify improper Medicaid payments. Staff has knowledge about various types of medical and clinical providers and has audit experience in a broad range of health care programs. This affords OMIG the opportunity to develop, coordinate, and implement a broad spectrum of statewide Medicaid projects.

Medicaid Investigations

OMIG staff continuously monitor the Medicaid program for evidence of fraud and abuse. Staff respond to detected fraud, impose sufficient punishment to deter others, and promptly remedy program vulnerabilities. Additionally, staff conduct investigations of providers furnishing dental, mental, medical care, and support services which include prescriptions, transportation, personal assistance, counseling, and complete care in nursing home or hospital settings. Investigations are also conducted of Medicaid recipients who abuse and/or defraud the Medicaid system by submitting false application information to qualify for benefits, drug diversion, and card loaning.

ALL FUNDS APPROPRIATIONS (dollars)

Category	Available FY 2019	Appropriations Recommended FY 2020	Change From FY 2019	Reappropriations Recommended FY 2020
State Operations	50,021,000	44,435,000	(5,586,000)	27,461,000
Total	50,021,000	44,435,000	(5,586,000)	27,461,000

NYS DOB | FY 2020 Executive Budget | Agency Appropriations
ALL FUND TYPES
PROJECTED LEVELS OF EMPLOYMENT BY PROGRAM
FILLED ANNUAL SALARIED POSITIONS

Program	FY 2019 Estimated FTEs 03/31/19	FY 2020 Estimated FTEs 03/31/20	FTE Change
Medicaid Audit and Fraud Prevention			
General Fund	214	214	0
Special Revenue Funds - Federal	212	212	0
Total	426	426	0

STATE OPERATIONS
ALL FUNDS FINANCIAL REQUIREMENTS BY FUND TYPE
APPROPRIATIONS
(dollars)

Fund Type	Available FY 2019	Recommended FY 2020	Change
General Fund	19,426,000	16,633,000	(2,793,000)
Special Revenue Funds - Federal	30,595,000	27,802,000	(2,793,000)
Total	50,021,000	44,435,000	(5,586,000)

STATE OPERATIONS
ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM
APPROPRIATIONS
(dollars)

Program	Available FY 2019	Recommended FY 2020	Change
Medicaid Audit and Fraud Prevention			
General Fund	19,426,000	16,633,000	(2,793,000)
Special Revenue Funds - Federal	30,595,000	27,802,000	(2,793,000)
Total	50,021,000	44,435,000	(5,586,000)

STATE OPERATIONS - GENERAL FUND
SUMMARY OF PERSONAL SERVICE APPROPRIATIONS AND CHANGES
FY 2020 RECOMMENDED
(dollars)

Program	Total		Personal Service Regular (Annual Salaried)	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	14,850,000	(883,000)	14,768,000	(862,000)
Total	14,850,000	(883,000)	14,768,000	(862,000)

Program	Temporary Service (Nonannual Salaried)		Holiday/Overtime Pay	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	7,000	(21,000)	75,000	0
Total	7,000	(21,000)	75,000	0

NYS DOB | FY 2020 Executive Budget | Agency Appropriations
STATE OPERATIONS - GENERAL FUND
SUMMARY OF NONPERSONAL SERVICE AND MAINTENANCE UNDISTRIBUTED
APPROPRIATIONS AND CHANGES
FY 2020 RECOMMENDED
(dollars)

Program	Total		Supplies and Materials	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	1,783,000	(1,910,000)	355,000	0
Total	1,783,000	(1,910,000)	355,000	0

Program	Travel		Contractual Services	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	220,000	0	1,046,000	(1,872,000)
Total	220,000	0	1,046,000	(1,872,000)

Program	Equipment	
	Amount	Change
Medicaid Audit and Fraud Prevention	162,000	(38,000)
Total	162,000	(38,000)

STATE OPERATIONS - OTHER THAN GENERAL FUND
SUMMARY OF APPROPRIATIONS AND CHANGES
FY 2020 RECOMMENDED
(dollars)

Program	Total		Personal Service	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	27,802,000	(2,793,000)	14,850,000	(883,000)
Total	27,802,000	(2,793,000)	14,850,000	(883,000)

Program	Nonpersonal Service	
	Amount	Change
Medicaid Audit and Fraud Prevention	12,952,000	(1,910,000)
Total	12,952,000	(1,910,000)

Note: Most recent estimates as of 1/15/2019