

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 FY 2025 Executive Budget recommends funding of \$57.5 million, reflecting no change from the FY 2024 Enacted Budget.

The Executive Budget recommends a workforce of 515 full time equivalent employees (FTEs) and continues to support a workforce investment that was included in the FY 2021 Enacted Budget to support enhanced program integrity efforts. Funding for this workforce investment is financed through increased audit recoveries and cost avoidance.

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

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 2024	Appropriations Recommended FY 2025	Change From FY 2024	Reappropriations Recommended FY 2025
State Operations	57,469,000	57,469,000	0	35,711,000
Total	57,469,000	57,469,000	0	35,711,000

ALL FUND TYPES

PROJECTED LEVELS OF EMPLOYMENT BY PROGRAM

FILLED ANNUAL SALARIED POSITIONS

Program	FY 2024 Estimated FTEs 03/31/24	FY 2025 Estimated FTEs 03/31/25	FTE Change
Medicaid Audit and Fraud Prevention			
General Fund	258	258	0
Special Revenue Funds - Federal	257	257	0
Total	515	515	0

STATE OPERATIONS

ALL FUNDS FINANCIAL REQUIREMENTS BY FUND TYPE

APPROPRIATIONS

(dollars)

Fund Type	Available FY 2024	Recommended FY 2025	Change
General Fund	21,758,000	21,758,000	0
Special Revenue Funds - Federal	35,711,000	35,711,000	0
Total	57,469,000	57,469,000	0

STATE OPERATIONS

ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM

APPROPRIATIONS

(dollars)

Program	Available FY 2024	Recommended FY 2025	Change
Medicaid Audit and Fraud Prevention			
General Fund	21,758,000	21,758,000	0
Special Revenue Funds - Federal	35,711,000	35,711,000	0
Total	57,469,000	57,469,000	0

STATE OPERATIONS - GENERAL FUND

SUMMARY OF PERSONAL SERVICE APPROPRIATIONS AND CHANGES

FY 2025 RECOMMENDED

(dollars)

Program	Total		Personal Service Regular (Annual Salaried)	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	17,880,000	0	17,857,000	0
Total	17,880,000	0	17,857,000	0

Program	Temporary Service (Nonannual Salaried)		Holiday/Overtime Pay	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	13,000	0	10,000	0
Total	13,000	0	10,000	0

NYS DOB | FY 2025 Executive Budget | Agency Appropriations
STATE OPERATIONS - GENERAL FUND
SUMMARY OF NONPERSONAL SERVICE AND MAINTENANCE UNDISTRIBUTED
APPROPRIATIONS AND CHANGES
FY 2025 RECOMMENDED
(dollars)

Program	Total		Supplies and Materials	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	3,878,000	0	125,000	0
Total	3,878,000	0	125,000	0

Program	Travel		Contractual Services	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	120,000	0	3,556,000	0
Total	120,000	0	3,556,000	0

Program	Equipment	
	Amount	Change
Medicaid Audit and Fraud Prevention	77,000	0
Total	77,000	0

STATE OPERATIONS - OTHER THAN GENERAL FUND
SUMMARY OF APPROPRIATIONS AND CHANGES
FY 2025 RECOMMENDED
(dollars)

Program	Total		Personal Service	
	Amount	Change	Amount	Change
Medicaid Audit and Fraud Prevention	35,711,000	0	17,880,000	0
Total	35,711,000	0	17,880,000	0

Program	Nonpersonal Service	
	Amount	Change
Medicaid Audit and Fraud Prevention	17,831,000	0
Total	17,831,000	0

Note: Most recent estimates as of 01/16/2024