About the Office of Inspector General

The office's mission is to strengthen Texas Health and Human Services' capacity to combat fraud, waste and abuse in publicly funded, state-run health and human services programs.

Our values are:

- **Accountability:** We serve Texans and take responsibility for our decisions and actions.
- **Integrity:** We demonstrate honesty and credibility.
- **Collaboration:** We work collectively to multiply our contributions and create shared goals, leading to greater success.
- **Excellence:** We strive to be and do our best.

Contact Us

Main number:
512-491-2000

Fraud hotline:
800-436-6184

211 Texas: Dial 2-1-1, select your language, then choose Option 3.

Website: ReportTexasFraud.com

Facebook:
facebook.com/TxOIG

Twitter:
twitter.com/TexasOIG

OFFICE OF INSPECTOR GENERAL
HEALTH AND HUMAN SERVICES COMMISSION
TEXAS

Inspector General

Texas Health and Human Services

- Fighting fraud, waste and abuse
- Protecting Texas taxpayer dollars

ReportTexasFraud.com

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Fighting Fraud, Waste and Abuse

Fraud:

Any act that constitutes fraud under federal or state law, including any intentional dishonesty or misrepresentation made by a person who knew the deception could cause unapproved benefit for themselves or another person.

Waste:

Any practice a sensible person would consider careless or would cause excessive use of resources, items or services.

Abuse:

Any practice inconsistent with proper fiscal, business or medical practices and causes unnecessary program cost.

Performance in 2019

The OIG continues to exceed our performance goals thanks to our teams' outstanding efforts. For fiscal year 2019 our recoveries totaled $421.2 million, a record year for this office. Another $170.7 million was identified for potential future recoveries and $164.1 million was saved in cost avoidance—money that was prevented from being spent.

Investigations completed	**19,208**
Audit reports issued	**38**
Inspection reports issued	**9**
Medicaid and CHIP provider enrollment screenings performed	**112,241**
Fraud hotline calls answered	**27,283**
Hospital claims reviewed	**18,098**
Providers excluded from Medicaid	**300**

As health care changes, the OIG is adapting to continue to accomplish its mission. The OIG is advancing its work in a managed care environment by using sophisticated data analytics to find potential areas of risk that may warrant a deeper look. We are also committed to finding ways to prevent fraud, waste and abuse from happening in the first place, ensuring taxpayer funds go to help those who need services.

Protecting Taxpayer Dollars

The Office of Inspector General has five main tools for detecting, deterring and preventing fraud, waste and abuse to ensure taxpayer funds for health and human services are properly spent:

- Audits focus on compliance.
- Inspections focus on systemic issues and risk assessment.
- Investigations focus on alleged abusive, wasteful or fraudulent practices.
- Reviews focus on waste and abuse in documentation, billing and payments.
- Data analytics supports all OIG work by identifying trends and outliers for further review.