



## OIG's HHS-Wide Oversight

OIG's statutory purpose under the Inspector General Act of 1978 (IG Act) is to prevent and detect fraud, waste, and abuse and promote the economy, efficiency, and effectiveness of HHS programs and operations.

- ▶ **OIG conducts independent criminal and civil investigations, audits, evaluations, administrative enforcement actions, data analytics, and other activities to fulfill its mission.**
- ▶ **OIG has dual reporting responsibility under the IG Act to the Secretary of Health and Human Services and to Congress.**
- ▶ **The IG Act grants OIG full access to all HHS records and materials.**

## HHS-Wide FY 2025 Impact



**\$12.70** Expected Recoveries For Every **\$1** Spent  
OIG's Return on Investment



**\$19.04B** Total Monetary Impact



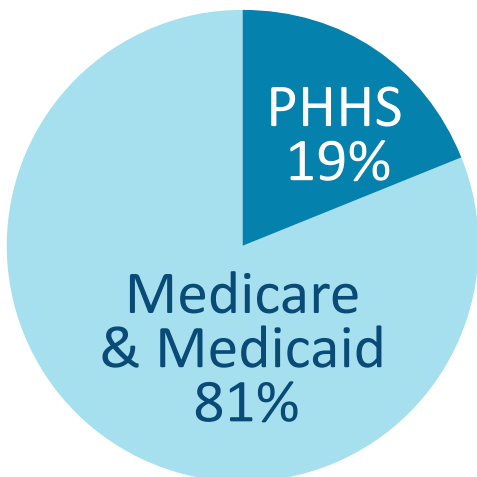
**2,837** Excluded Individuals and Entities



**1,577** Criminal and Civil Actions



**360** Recommendations Issued



## Budget Overview

Roughly 80 percent of OIG's budget comes from appropriations under the statutory Health Care Fraud and Abuse Control (HCFAC) Program for oversight of Medicare and Medicaid. OIG and its partners at the Centers for Medicare and Medicaid Services and the Department of Justice receive fraud-fighting funding through the HCFAC Program. The remainder of OIG's funding is annually appropriated for oversight of all other programs, called collectively Public Health and Human Services (PHHS).

# OIG Work



## LAW ENFORCEMENT

OIG conducts [criminal, civil, and administrative investigations](#) and enforcement actions to address fraud and other violations of law. OIG works closely with its law enforcement partners. OIG's efforts bolster transparency and public trust in HHS programs and help ensure that taxpayers get their money's worth.



## OVERSIGHT

OIG provides critical independent oversight to promote the integrity of HHS programs. OIG uses a dynamic, continuous [work planning process](#) to assess relative risks in HHS programs to identify areas most in need of oversight and to prioritize allocation of OIG resources. In planning work, OIG considers input from stakeholders, including the Department and Congress.



## RECOMMENDATIONS

OIG produces audits and evaluations [identifying recommendations](#) for improvements to prevent fraud, waste, and abuse and improve the economy, efficiency, and effectiveness of HHS programs. Expected impacts from implementing OIG's recommendations include direct cost savings and recovery of misspent funds, as well as improvements in payment efficiency, program operations, and quality of services provided by HHS programs.



## STAKEHOLDER ENGAGEMENT

OIG engages with stakeholders and partners including other law enforcement and audit agencies; HHS; Congress; Federal, Tribal, State, local, and private sector entities; and the public. These engagements enhance foster collaborative enforcement actions, work planning, improve data sharing and analysis, and promote implementation of recommendations and industry compliance efforts to safeguard HHS programs and the people they serve.

## Pillars of Program Integrity

### PREVENTION

Know who you are doing business with and avoid doing business with bad actors.

### DETECTION

Identify problems and implement effective safeguards and sound management principles.

### ENFORCEMENT

Take appropriate action to correct program vulnerabilities and hold bad actors accountable.

## Learn More

[Top Unimplemented Recommendations](#)

[Strategic Plan](#)

[Semiannual Report to Congress](#)

[Social Media Directory](#)

