Office of Inspector General

Overview
The Office of the Inspector General (OIG) is committed to protecting the taxpayers of Georgia by detecting, preventing and/or eliminating all forms of fraud, waste and abuse associated with the operation of the Medicaid Program.

Division Sections
The OIG oversees:

The Medicaid Program Integrity Unit
The Medicaid Program Integrity Unit performs utilization reviews and investigates providers suspected of overbilling or defrauding Georgia’s Medicaid program, recovers overpayments, and where appropriate, refers cases of suspected fraud for criminal investigation and prosecution to federal, state and local officials.

The Special Investigations Unit
The Special Investigations Unit upholds the best interest and confidence of the public by ensuring that Department policy and procedures are followed and that all Department employees, including contractors and vendors, adhere to Department standards of professionalism. The Unit’s charge includes conducting objective and independent investigations involving alleged violations of Standards of Conduct, Ethics and Conflict of Interest policy and claims of fraud, waste and abuse. The Unit also conducts investigations of Medicaid members and providers relating to eligibility and fraud, respectively.

The Office of Audits
The Office of Audits performs independent, objective assurance and consulting activities intended to enhance the Department’s operations to ensure compliance with State and Federal regulations in all areas of performance, including procedural and financial activities.

The Third-Party Liability Unit
The Third-Party Liability Unit is responsible for identifying Medicaid beneficiaries who are dually-covered by Medicaid and any other medical insurance plans, which are legally responsible for paying the beneficiaries’ claims, and when necessary, ensuring that the Medicaid program is the payer of last resort by pursuing the liable third parties for reimbursement.

The Background Investigations Unit
The Background Investigations Unit performs State and Federal criminal history background investigations and financial background checks on behalf of the Department, including the Office of Health Care Facility Regulation and the Office of Human Resources. It is also responsible for the proper access, maintenance, storage and use of all criminal history record information obtained by the Department.
The Data Integrity and Analysis Unit
Generates data reports and claims information to support provider and member analysis and audits/reviews for the OIG. DIAT also performs research analysis and creates reports to support the detection of fraud, waste and abuse of Medicaid cases for the Georgia Department of Law, Medicaid Fraud Control Unit (MFCU) and the federal Health and Human Services (HHS), Office of Inspector General.

The OIG Legal/State Health Benefit Plan Fraud Unit
The OIG Legal/State Health Benefit Plan Fraud Unit provides advice and representation for the Division on all legal matters. It is also responsible for coordinating inquiries related to allegations of fraud, waste and abuse within the State Health Benefit Plan.

Contact OIG

- Office of Inspector General (OIG): 404-463-7481
- Medicaid Fraud and Abuse Hotline (Toll-free): 1-800-533-0686
- Special Investigations Unit: 404-232-1656
- Third-Party Liability Unit: 404-463-7471
- Medicaid Program Integrity Unit: 404-463-7144
- Background Investigations Unit: 404 463-7154
- Data Integrity and Analysis Unit: 404-463-7370
- Office of Audits: 404-657-7880

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To Report Fraud

E-mail: oiganonymous@dch.ga.gov or ReportMedicaidFraud@dch.ga.gov.