

OIG Strategic Plan:
Oversight of COVID-19
Response and Recovery
May 2020



Our **MISSION**


Provide objective oversight to promote the economy, efficiency, effectiveness, and integrity of HHS programs, as well as the health and welfare of the people they serve

Our **VISION**

Drive positive change in HHS programs and in the lives of the people served by these programs

Our **VALUES**

Impact, innovation, and people focus



Introduction

The emergence of coronavirus disease 2019 (COVID-19) has created unprecedented challenges for the Department of Health and Human Services (HHS) and for the delivery of health care and human services to the American people. HHS leads the Federal public health and medical response during public health emergencies.

This plan sets forth the four goals that drive the Office of Inspector General's (OIG's) strategic planning and mission execution with respect to HHS's COVID-19 response and recovery. These goals are to (1) protect people, (2) protect funds, (3) protect infrastructure, and (4) promote effectiveness of HHS programs—now and into the future. This plan highlights our main objectives and ongoing and potential OIG work to advance each goal. Additional information about OIG work related to COVID-19 is available on our website, [COVID-19 Portal](#).

OIG is using risk assessment and data analytics to identify, monitor, and target potential fraud, waste, and abuse affecting HHS programs and beneficiaries and to promote the effectiveness of HHS's COVID-19 response and recovery programs. We use expert staff and modern tools and technologies, including artificial intelligence, to detect trends and patterns of suspicious activity and to shape and strengthen our oversight and enforcement. As appropriate and feasible, we share data analytics and technical assistance with HHS officials to strengthen program integrity, effectiveness, and management practices. Further, we are coordinating our work with key oversight and law enforcement partners, including the Pandemic Response Accountability Committee (PRAC); Federal, State, local, and Tribal entities; and the Government Accountability Office, among others, to ensure adequate oversight, avoid duplication, and share insights.

Goal 1: Protect People

An essential HHS responsibility during the COVID-19 pandemic is to protect the health and safety of people. This responsibility includes protection of all Americans through the HHS public health mission as well as specific responsibilities to protect beneficiaries who receive services through HHS health care and human services programs. As such, protecting the health and safety of people takes on heightened urgency for OIG. OIG is providing oversight and support to help ensure that HHS efforts to protect people are effective, combating fraud schemes that endanger people, and issuing public information and guidance about fraud and abuse.

Objective A: Assist in and support ongoing COVID-19 response efforts, while maintaining independence

- Issue guidance on the application of OIG's administrative fraud enforcement authorities to support providers in delivering needed patient care during the public health emergency.
- Conduct rapid-cycle reviews of conditions affecting HHS beneficiaries or health care and human service providers to inform and support effective COVID-19 response efforts.
- Deploy law enforcement personnel, as needed, to protect HHS personnel and resources to help ensure continuity of HHS operations during the public health emergency.

Objective B: Fight fraud and scams that endanger HHS beneficiaries and the public

- Investigate suspected fraud, with priority to cases involving patient harm, in coordination with Federal, State, local, and Tribal law enforcement partners.
- Alert HHS, its beneficiaries, and the public to fraud schemes related to COVID-19, including testing and identity theft scams.

Objective C: Assess the impacts of HHS programs on the health and safety of beneficiaries and the public

- Conduct audits and evaluations focused on the health and safety of HHS beneficiaries in selected health care settings, such as nursing homes, as well as in HHS human services programs, such as child care programs.
- Conduct audits and evaluations of HHS operations to protect public health, such as the acquisition, management, and distribution of resources from the Strategic National Stockpile; the production, approval, and distribution of COVID-19 tests; vaccine and treatment research and development; and others.

Goal 2: Protect Funds

OIG oversight and enforcement activities protect HHS funds from fraud, waste, and abuse and promote transparency of, and accountability for, HHS spending. As of mid-May 2020, HHS was appropriated \$251 billion for COVID-19 response and recovery, which includes \$175 billion for the Provider Relief Fund and \$76 billion for the HHS Office of the Secretary and certain Operating Divisions to prevent, prepare for, and respond to coronavirus. In addition, the Department is expending substantial funds from other appropriations for activities related to the COVID-19 public health emergency, including increases in the Federal match for Medicaid and in reimbursement for some Medicare services. Ensuring accurate payment in accordance with program requirements is a longstanding HHS management challenge, and OIG's work will address contracts, grants, program payments, and other payment mechanisms.

Objective A: Prevent, detect, and remedy waste or misspending of COVID-19 response and recovery funds

- Conduct audits and evaluations of HHS's oversight, management, and internal controls for awarding, disbursement, and use of funds.
- Audit fund recipients to assess whether they met use, reporting, and other requirements, and, where appropriate, recommend recovery of misspent funds.
- Participate on, and coordinate closely with, the PRAC to prevent and detect fraud, waste, abuse, and mismanagement, and to mitigate major risks that cut across program and agency boundaries.

Objective B: Fight fraud and abuse that diverts COVID-19 funding from intended purposes or exploits emergency flexibilities granted to health and human services providers

- Identify and investigate suspected fraud, in coordination with Federal, State, local, and Tribal law enforcement partners, and exercise OIG's administrative enforcement authorities when appropriate.
- Conduct audits and evaluations to identify program integrity vulnerabilities and recommend safeguards.
- Alert HHS, enforcement partners, and industry stakeholders to potential fraud risks or schemes to steal funds.

Goal 3: Protect Infrastructure

The security of HHS information technology (IT) systems, infrastructure, and the personal information and data collected and maintained by HHS programs is critically important to the health and well-being of the American people. This urgency is heightened as cyberattacks against HHS, health care institutions, and researchers have increased since the COVID-19 pandemic started. It is critically important to protect against research and intellectual property theft. In addition, the technologies that are being employed in COVID-19 response may be subject to cyberattacks. OIG conducts cybersecurity audits, makes recommendations to strengthen cybersecurity, and investigates cybersecurity attacks against HHS.

Objective: Protect the security and integrity of IT systems and health technology

- Audit HHS capabilities for detecting IT vulnerabilities and incidents, mitigating threats, and restoring IT services.
- Audit whether known cybersecurity vulnerabilities related to networked medical devices, telehealth platforms, and other technologies being used in COVID-19 response have been mitigated.
- Investigate cybersecurity threats to, and attacks on, HHS systems.
- Provide technical assistance to HHS to support a secure and robust IT infrastructure.

Goal 4: Promote Effectiveness

OIG oversight work will identify opportunities and strategies to increase the effectiveness of ongoing HHS COVID-19 response and recovery programs at the Federal, State, and local levels. Drawing on relevant historical work and new analyses, OIG will highlight lessons learned and make recommendations to support HHS's effective preparation for, and response to, future emergencies and to improve the delivery of health and human services.

Objective A: Support the effectiveness of Federal, State, and local COVID-19 response and recovery efforts

- Conduct audits and evaluations of ongoing response and recovery efforts that identify opportunities to increase effectiveness (e.g., opportunities for better coordination across Federal, State, and local response efforts).
- Conduct audits and evaluations to help ensure that recipients of HHS COVID-19 response and recovery funding achieve program goals.

Objective B: Leverage successful practices and lessons learned to strengthen HHS programs for the future

- Identify successful practices and lessons learned from the COVID-19 response at the Federal, State, and local levels and make recommendations to strengthen future emergency preparedness and response.
- Review pandemic preparedness planning to identify how preparedness funding was spent, the utility of preparedness plans and activities, and recommendations for improvements.
- Assess the impacts of COVID-19 emergency flexibilities on HHS programs and beneficiaries to inform program decisions after the current public health emergency ends (e.g., impacts of expanded telehealth in Medicare during the emergency and implications for future Medicare policies).

ABOUT THE OFFICE OF INSPECTOR GENERAL

The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452, as amended, is to protect the integrity of the Department of Health and Human Services (HHS) programs, as well as the health and welfare of beneficiaries served by those programs. This statutory mission is carried out through a nationwide network of audits, investigations, and inspections conducted by the following operating components:

The Office of Audit Services (OAS) provides auditing services for HHS, either by conducting audits with its own audit resources or by overseeing audit work done by others. Audits examine the performance of HHS programs and/or its grantees and contractors in carrying out their respective responsibilities and are intended to provide independent assessments of HHS programs and operations. These audits help reduce waste, abuse, and mismanagement and promote economy and efficiency throughout HHS.

The Office of Evaluation and Inspections (OEI) conducts national evaluations to provide HHS, Congress, and the public with timely, useful, and reliable information on significant issues. These evaluations focus on preventing fraud, waste, or abuse and promoting economy, efficiency, and effectiveness of departmental programs. To promote impact, OEI reports also present practical recommendations for improving program operations.

The Office of Investigations (OI) conducts criminal, civil, and administrative investigations of fraud and misconduct related to HHS programs, operations, and beneficiaries. With investigators working in all 50 States and the District of Columbia, OI utilizes its resources by actively coordinating with the Department of Justice and other Federal, State, and local law enforcement authorities. The investigative efforts of OI often lead to criminal convictions, administrative sanctions, and/or civil monetary penalties.

The Office of Counsel to the Inspector General (OCIG) provides general legal services to OIG, rendering advice and opinions on HHS programs and operations and providing all legal support for OIG's internal operations. OCIG represents OIG in all civil and administrative fraud and abuse cases involving HHS programs, including False Claims Act, program exclusion, and civil monetary penalty cases. In connection with these cases, OCIG also negotiates and monitors corporate integrity agreements. OCIG renders advisory opinions, issues compliance program guidance, publishes fraud alerts, and provides other guidance to the health care industry concerning the anti-kickback statute and other OIG enforcement authorities.

OIG Public Hotline (for reporting fraud):

Website: <https://oig.hhs.gov/fraud/report-fraud/index.asp>


Phone: 1-800-HHS-TIPS (1-800-447-8477)

TTY (for hearing impaired): 1-800-377-4950

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