



ANNUAL REPORT ON CERTAIN FRAUD AND ABUSE RECOVERIES BY MANAGED CARE ORGANIZATIONS

Fiscal Year 2023

Managed Care Organization (MCO)	Amount Recovered by MCO	Amount Retained by MCO (as of 8/31/23)
Aetna Better Health	\$60,780	\$60,780
Amerigroup Texas	\$231,388	\$126,511
Blue Cross & Blue Shield	\$0	\$0
Community First Health Plan	\$23,964	\$11,982
Community Health Choice	\$1,175,844	\$587,922
Cook Children’s Health Plan	\$20,541	\$12,924
Driscoll Children’s Health Plan	\$19,966	\$13,790
El Paso First Health Plans, Inc.	\$46,189	\$23,093
FirstCare Health Plan	\$75,845	\$39,311
Molina Healthcare	\$609,346	\$568,135
Parkland Community Health Plan	\$107,222	\$58,730
Scott & White Health Plan	\$35,497	\$32,273
Seton Health Plan/Dell Children’s	\$0	\$0
Superior Health Plan	\$518,950	\$352,436
Texas Children’s Health Plan	\$120,917	\$60,459
United Healthcare of Texas	\$142,017	\$98,185
Dental Maintenance Organization		
DentaQuest USA	\$565,393	\$499,659
Managed Care of North America	\$471,772	\$471,772
UnitedHealthcare Dental	\$2,804	\$2,804
TOTAL	\$4,228,435	\$3,020,766

Totals reflect overpayments reported as recovered by Special Investigative Units. HB 2379, 85th Legislature, amended the Texas Government Code and provides that one-half of fraud or abuse recoveries made by MCOs must be remitted to the OIG for deposit to the General Revenue Fund. The amounts retained by the MCO reflects amounts as of August 31, 2023, and will change as the MCOs remit recoveries to the OIG. Amounts have been rounded to the nearest dollar.