Shaun O'Neill is a nationally recognized industry leader in combating health care fraud, waste, and abuse, renowned for his strong business acumen and unique ability to navigate the complex healthcare environment. He architects cutting-edge solutions for state insurance fraud units and other clients, translating his deep experience into effective, real-world results. Throughout his career, Shaun has overseen some of the largest and most complex healthcare fraud cases in U.S. history. His work has led to the recovery of hundreds of millions of dollars and the implementation of systemic reforms across Medicaid and Medicare.

This expertise is built upon a distinguished 23-year career with the FBI, where he investigated a wide range of sophisticated criminal enterprises, including white-collar crime, public corruption, and organized crime. He culminated his FBI service by supervising a specialized squad of Agents and Analysts investigating health care fraud. Shaun co-founded the Greater Palm Beach Health Care Fraud Task Force and was instrumental in creating the groundbreaking Medicare Strike Force prosecution model—a strategy that fundamentally changed how the U.S. government combats systemic fraud. He continues to support public and private sector efforts to strengthen program integrity, enhance provider screening, and ensure taxpayer dollars are protected from abuse.

Shaun holds a Bachelor’s Degree in Economics and is a Certified Public Accountant (CPA), a Certified Fraud Examiner (CFE), and is Certified in Financial Forensics (CFF). As a sought-after speaker at national conferences, he continues to shape the industry's approach to fraud detection and prevention.