# **CITY OF SAN ANTONIO OFFICE OF THE CITY AUDITOR**



Follow-Up Audit of the Metropolitan Health District

Immunization Division

Project No. AU17-F08

March 29, 2018

Kevin W. Barthold, CPA, CIA, CISA City Auditor

### **Executive Summary**

As part of our annual Audit Plan approved by City Council, we conducted a follow-up audit of the recommendations made in the Audit of Metro Health Immunization Division dated May 26, 2016. The objective for this follow-up audit is:

#### Determine if the Metropolitan Health District (Metro Health) successfully implemented action plans to address audit recommendations noted in the initial audit.

Metro Health has made progress implementing action plans from the prior audit recommendations. However, we identified action plans that have not been fully implemented.

There were three recommendations made in the prior audit. One recommendation has been fully implemented. Fiscal established effective controls to provide assurance that the reporting of daily cash collected for vaccines administered and immunization records sold is accurate.

However, controls over the San Antonio Immunization Registry System (SAIRS) have not been implemented to ensure the accuracy and completeness of patient demographic and vaccination history records. Additionally, controls in place to ensure that immunization record requests are processed correctly are ineffective.

Metro Health Management agreed with the audit findings and has developed positive action plans to address them. Management's verbatim response is in Appendix B on page 7.

## **Table of Contents**

Executive Summary	i
Background	. 1
Audit Scope and Methodology	.2
Prior Audit Action Plans and Status	.3
A. Accuracy of Immunization Records	.3
B. Immunization Records Request	.4
C. Policies and Procedures for Cash Collection	.5
Appendix A – Staff Acknowledgement	.6
Appendix B – Management Response	.7

## Background

In May 2016, the Office of the City Auditor completed an audit of the Metro Health Immunization Division. The objective of the audit was as follows:

## Determine if processes within the Immunization Division are effective, efficient, and adequately controlled.

The Office of the City Auditor concluded that processes within the Immunization Division are not effective, efficient, and adequately controlled. Specifically:

- Client immunization records are not accurate within the Netsmart and SAIRS systems,
- There are ineffective controls for the release of immunization records, and
- There are insufficient controls to ensure the verification of cash collected for vaccines administered.

Metro Health management agreed with the conclusions and developed action plans to address each recommendation.

## Audit Scope and Methodology

The audit scope was limited to the recommendations and corrective action plans made in the original report for the time frame from June 2016 to November 2017.

We interviewed Metro Health management and staff to gain an understanding of clinic operations, recording of daily financial transactions, the SAIRS Immunization Registry authorization process and general system controls. We also performed tests related to the release of medical records, system user permissions, technology planning, system security controls, HIPAA compliance and data accuracy.

Testing criteria included applicable City Administrative Directives (ADs) and department policies, procedures and system user manuals over the Release of Protected Health Information (PHI), cash handling, and related information technology. To further establish test criteria, we used Government Accountability Office (GAO) manuals, Center for Disease and Control (CDC) standards, the Escal Institute of Advanced Technologies protocols, and the U.S Department of Health and Human Services HIPAA Audit Protocol.

We relied on computer-processed data in SAP to validate deposit packets and journal entries. We tested a random sample of 25 end-of-day deposit packets to determine if deposits were reviewed for accuracy. Additionally, we relied on computer-processed data in SAIRS and Netsmart to validate the data collection and data storage of immunization registry information.

Our reliance was based on performing direct tests on the data rather than evaluating the system's general and application controls. Our direct testing included verifying the patient and vaccination data for patients, as well as determining the accuracy of administered immunizations. We do not believe that the absence of testing general and application controls had an effect on the results of our audit.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our audit results and conclusions based on our audit objectives.

## **Prior Audit Action Plans and Status**

#### A. Accuracy of Immunization Records

#### Prior Recommendations:

The Director of Metro Health should establish and implement effective procedures to ensure immunization records are accurate. Also, continue to work with ITSD to find a solution to interface basic demographic record information (name and date of birth) and immunization history from the San Antonio Immunization Registry System (SAIRS) to Netsmart in order to reduce data entry errors.

#### Status: Not Implemented

Per Metro Health management, the implementation of the Netsmart system was discontinued at the Immunization Clinic for two reasons. The implementation of the inventory module in Netsmart proved problematic, and due to the estimated time to resolve issues it became impractical from a cost perspective and training aspect to continue with the implementation. However, Immunization Clinic staff continues to have access to Netsmart.

The data recorded between the Netsmart and SAIRS systems is inaccurate and incomplete. Record discrepancies include missing records, inaccurate and incomplete vaccination records, and inaccurate patient demographic records.

To verify that data entered into Netsmart also existed in SAIRS, we obtained and reconciled data extractions from both systems. Our reconciliation identified discrepancies with 64 of 246 data records reviewed, specifically:

- 50 records had a discrepancy in vaccination information recorded
- 2 records did not have a patient record entered in SAIRS but record existed in Netsmart
- 12 records had a discrepancy in patient demographic information

Based on our review, the potential risk that patients receive inappropriate vaccines still exists due to inaccurate and incomplete patient data and immunization history.

#### Recommendations

The Director of Metro Health should ensure that record discrepancies are reviewed and updated to ensure that a complete and accurate immunization registry system is in place. Additionally, remove staff access to systems no longer in use.

#### **B.** Immunization Records Request

#### Prior Recommendations:

The Director of Metro Health should strengthen the controls in place to ensure client immunization record requests are processed correctly. Additionally, training sessions should be held for staff to ensure proper documentation is obtained and recorded in the appropriate system application.

#### Status: Partially Implemented

Metro Health developed a policy governing the release of medical records, with an effective date of October 18, 2016. However, Metro Health staff is not following established procedures and controls for the release of immunization records.

We tested the issuance of 25 faxed record release requests to ensure they were completed by staff in accordance to policy. Our review found that:

- 10 requests did not have a cover sheet
- 25 requests did not have evidence of a 2<sup>nd</sup> employee verification
- 2 requests did not have a receiver noted
- 1 requests did not have a completion date noted
- 3 requests did not have required supporting documentation on file
- 25 requests did not have a Release Note on file.

Per Metro Health Policy, certain steps are required to ensure secure delivery of the documentation when transmitting records containing Individually Identifiable Health Information (IIHI)/Protected Health Information (PHI). A Records Release Agent (RRA) will prepare a facsimile cover sheet and note the name of the person receiving the fax. A second employee will verify the documents to be transmitted and note the verification on the cover sheet. Once the transmission is complete, the RRA will note the completed transaction on the cover sheet and document the details in a Release Note form. Lastly, the cover sheet and the Request for Disclosure of Medical Records will be retained as documentation of the disclosure.

Additionally, an annual compliance audit is taking place by Metro Health that includes verifying that record releases are conducted in accordance to internal policy. We reviewed the audit and noted that several issues were identified by the Compliance Analyst. These issues included obtaining improper identification and lack of documentation on file. Subsequently, we noted that the review includes in-person record requests and not faxed requests. While there are controls in place, they are not being executed appropriately; therefore, a risk still exists that Metro Health is not compliant when processing immunization record requests.

#### Recommendations

The Director of Metro Health should ensure that Immunization Clinic staff is adhering to existing procedures and controls for the release of immunization records. In addition, increase the compliance audit frequency to quarterly and include faxed requests in the scope.

#### C. Policies and Procedures for Cash Collection

#### Prior Recommendation:

The Director of Metro Health should ensure staff follows existing controls and develop formal procedures to ensure cash collected is reported accurately.

#### Status: Implemented

Metro Health Fiscal developed a departmental cash handling policy that was approved by the Director and effective August 17, 2016. Fiscal conducts annual reviews to ensure that cash handlers are authorized and appropriately trained, quarterly cash handling audits are conducted, and that daily reviews to ensure cash collected is reported accurately.

We verified the accuracy of Fiscal's Cash Handler Database and reviewed all cash handling audits conducted during fiscal year 2017 by the Cashier Supervisor. Additionally, for a random sample of 25 business days we reviewed end-of-day deposit packets to ensure that financial information was adequate, required signatures were complete, and management review was evident.

#### Recommendations

None

## Appendix A – Staff Acknowledgement

Buddy Vargas, CFE, CIA, Audit Manager Reina Hernandez, Auditor in Charge Terri Hernandez, CISA, IT Auditor

## Appendix B – Management Response

	CITYO	F SA	NA		<b>TEXAS 78283-3966</b>
Mar	ch 7, 2018				
City	in W. Barthold, CPA, CIA, CISA Auditor Antonio, Texas				
RE:	Management's Acknowledgment Metropolitan Health District's Imm	and Correct unization Divi	ive Action P sion	lan for the Follo	w-Up Audit of the
$\boxtimes$	Fully Agree (provide detailed co	mments)			
	Agree Except For (provide detail	iled comments	s)		
	Do Not Agree (provide detailed	comments)			
Met the	ro Health has reviewed the audit re two new recommendations.	port and has	developed the	e Corrective Actio	n Plans below for
		Recommen	dation		
#	Description	Audit Report Page	Accept, Decline	Responsible Person's Name/Title	Completion Date
	Accuracy of Immunization				

1	Accuracy of Immunization Records The Director of Metro Health should ensure that record discrepancies are reviewed and updated to ensure that a complete and accurate immunization registry system is in place. Additionally, remove staff	3	Accept	Dr. Anita Kurian, Assistant Director; Paul Fenstermacher, Assistant to the Director	7/1/2018
	access to systems no longer in use.			Director	

	Re	commen	dation				
#	Description	Audit Report Page	Accept, Decline	Responsible Person's Name/Title	Completio Date		
	Action plan:						
	<ol> <li>Metro Health will:         <ol> <li>Remove immunizations user a</li> <li>Document immunization recom TB clinics to ensure immunization</li> <li>Conduct a reconciliation of imm consent form (paper version).</li> </ol> </li> </ol>	ds entry p tions reco	ractices and rds are enter	ed accurately into \$	SAIRS.		
2	Immunization Records Request The Director of Metro Health should ensure that Immunization Clinic staff is adhering to existing procedures and controls for the release of immunization records. In addition, increase the compliance audit frequency to quarterly and include faxed requests in the scope.	4-5	Accept	Dr. Anita Kurian, Assistant Director; Paul Fenstermacher, Assistant to the Director	7/1/2018		
	<ul> <li>Action plan:</li> <li>Metro Health will <ol> <li>Conduct a procedural review of the policies in place regarding records release and the use of a facsimile machine for transmitting sensitive information. Any changes to policy will be noted in the review</li> <li>Increase the compliance audit review schedule to quarterly and incorporate into the Departmental Manual.</li> <li>Conduct a refresher training with all clinical staff and designated Records Release Agents regarding the release of medical records and the proper use of the facsimile machine for the release of sensitive information.</li> </ol> </li> </ul>						

We are committed to addressing the recommendations in the audit report and the plan of actions presented above.

Sincerely,

Dr. Colleen Bridger Director San Antonio Metropolitan Health District

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Erik Walsh Deputy City Manager City Manager's Office

<u>3-12-18</u> Date

3/16/18 Date