



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

May 20, 2014

Elizabeth Dudek, Secretary
Agency for Health Care Administration
2727 Mahan Drive
Tallahassee, Florida 32308

Dear Secretary Dudek:

In accordance with Internal Auditing Standards, attached is the six-month status report from the Division of Operations, Bureau of Support Services and the Office of Inspector General in response to our report *#13-15 Review of the Agency's Data Exchange MOU with DHSMV* published on November 19, 2013.

Management has indicated corrective action had been either initiated or completed for each of our report issues. A detailed description of all issues, recommendations, and management's responses can be found in the attached table. We will schedule another follow-up review in six months to assess the status of the efforts taken by the Office of Inspector General to correct all open issues.

If you have any questions regarding this status report, please let me know.

Respectfully,

Mary Beth Sheffield
Director of Auditing

MBS/kc

Enclosure

cc: Tonya Kidd, Deputy Secretary for Operations
Eric Miller, Inspector General



Agency for Health Care Administration
Office of Inspector General – Internal Audit
Report Title: Review of the Agency’s Data Exchange MOU with DHSMV
Report #: 13-15, issued November 19, 2013
Six-Month Follow-up Status as of May 19, 2014

| No. | Finding | Recommendation | Previous Management Responses | Management Responses | Anticipated Completion Date and Contact |
|-----|---|--|---|---|--|
| 1 | Investigations had no written policies or procedures on the use of DAVE. | The Investigations Unit should be responsible for development of policies and procedures to address the use of DAVE and MOU compliance requirements. | <u>Status as of November 19, 2013</u> Investigations will develop policies and procedures addressing the use of DAVE by Investigations staff and compliance with MOU requirements. Support Services will assist in drafting procedures as needed. | <u>Status as of May 19, 2014</u> Investigations will develop a draft of recommended policies and procedures for inclusion in the Investigations Unit Data Aggregator Use Policy. | May 31, 2014 Selisa Daniel 412-3971 |
| 2 | The MOU did not cover the purpose of monitoring Agency parking for improper use of handicapped and visitor spaces | Investigations should amend the Agency’s MOU with DHSMV to include the purpose for Support Services’ access. | <u>Status as of November 19, 2013</u> The MOU will be updated with Support Services’ reason for DAVE access and routed to the Secretary for signature. Support Services will assist in drafting the portion of the MOU to include monitoring of Agency parking for improper use of handicapped and visitor spaces and also parking in no-parking areas as | <u>Status as of May 19, 2014</u> A revised MOU has been requested for review and approval by the Agency head. | July 15, 2014 Selisa Daniel 412-3971 |

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| | | | needed. | | |
| 3 | None of the users had any documentation to support why they accessed license or tag information. | Investigations should formally document its log process in written procedures. | <u>Status as of November 19, 2013</u> Investigations has created a log to documents its access to DAVE. Investigations will formally develop written procedures documenting the log process. | <u>Status as of May 19, 2014</u> Investigations will develop a draft of recommended written procedures documenting the log process for inclusion with the Data Aggregator Policy. | May 31, 2014 Selisa Daniel 412-3971 |
| | | Support Services has created a log to document its access to DAVE. The log is password protected. Facilities staff and the bureau chief have access to the password. Support Services will assist in drafting the portion of the procedures that pertain to the log as needed. | <u>Status as of November 19, 2013</u> Complete | Complete | Complete |
| 4 | Neither Investigation nor Support Services have any documented procedures on the use of DAVE. | Investigations should document and implement procedures to ensure DAVE users and any associated personnel understand the confidentiality/security of data obtained from DAVE. | <u>Status as of November 19, 2013</u> Investigations will document and implement procedures ensuring DAVE users within the Investigations Unit and any associated Investigations personnel understand the confidentiality/security of data obtained from DAVE. | <u>Status as of May 19, 2014</u> Investigations will develop a draft of recommended procedures for DAVE users within the Investigations Unit to ensure the confidentiality/security of data obtained from DAVE for inclusion in the Data | May 31, 2014 Selisa Daniel 412-3971 |

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| | | | | Aggregator Policy. | |
| | | All Investigations and Support Services (who handle DAVE information) staff should be trained in the handling of DAVE information. | <u>Status as of November 19, 2013</u> Investigations staff have received training. Investigations will continue to participate in training required for DAVE use. <u>Status as of November 19, 2013</u> Users in Support Services have received training. Support Services will continue to participate in training required for DAVE use. | Complete | Complete |
| | | Any DAVE-related information in Investigations should be contained where it is not accessible to any person coming into the common areas. | <u>Status as of November 19, 2013</u> Investigations has implemented storage of all DAVE-related information in closed and locked offices. The data is not accessible to any person coming into the common areas. | Complete | Complete |
| | | Support Services should ensure any DAVE-related information stored on a shared drive is accessible only to DAVE-authorized staff. | <u>Status as of November 19, 2013</u> Support Services has created a log to document its access to DAVE. The log is password protected. Facilities staff and the bureau chief have access to the password. | Complete | Complete |

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| 5 | The Agency does not have a process or maintain documentation to ensure compliance with MOU requirements for timely terminations and quarterly reviews of users’ access permissions. | Investigations should document and ensure user access permissions are terminated in compliance with the MOU requirements. The DAVE Administrator should be responsible for maintaining all documentation for user access permissions. | <p><u>Status as of November 19, 2013</u> Investigations will ensure user access permissions for DAVE Users in Investigations will be terminated in compliance with the MOU requirements for staff who leave the office or if access is no longer required.</p> <p><u>Status as of November 19, 2013</u> The DAVE administrator will maintain all documentation for user access permissions and terminations.</p> <p><u>Status as of November 19, 2013</u> Support Services will ensure it requests termination of DAVE access for staff who leave the bureau or if access is no longer required.</p> | Complete | Complete |
| | | The Inspector General should appoint a staff person (Staff Person) independent of the DAVE process to conduct the quarterly reviews. Instructions and the quarterly quality control review form are located at: https://idave.flhsmv.gov/message_ce | <p><u>Status as of November 19, 2013</u> The Inspector General has appointed a direct reporting person independent of the DAVE process to conduct the quarterly reviews. This appointment will be formalized by an appointment</p> | Complete | Complete |

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| | | <p>nter.html.</p> <p>The Staff Person should formally document and conduct quarterly reviews of users’ authorizations. This person should develop desk procedures to address responsibilities addressed in this report.</p> | <p>memorandum. Completed</p> <p><u>Status as of November 19, 2013</u> The appointed staff person within the Office of Inspector General who is independent of the DAVE process will work with the Inspector General to develop desk procedures for quarterly usage reviews.</p> | <p><u>Status as of May 19, 2014</u> Complete</p> | <p>Complete</p> |
| | <p>Although Support Services and Investigations use the Agency’s employee separation checklist, this checklist does not address application or system access permission termination.</p> | <p>The Bureau of Human Resources should modify the “Employee Separation Checklist” to include termination of the employee’s access permissions to all systems or applications, whether internal or external. The Checklist should address any type of separation for the employee (e.g. transfer, promotion, demotion, termination, etc.).</p> | <p><u>Status as of November 19, 2013</u> The Bureau of Human Resources made changes to the Employee Separation Checklist to include a space for the supervisor to check that internal and external systems access has been terminated.</p> | <p>Complete</p> | <p>Complete</p> |
| 6 | <p>Investigations does not have any written procedures addressing public records requests or the confidentiality of DAVE information</p> | <p>Investigations should document and implement procedures addressing public records requests. The procedures should include specific instructions on how to document confidential information, including DAVE information, in investigative</p> | <p><u>Status as of November 19, 2013</u> Investigations will document and implement procedures addressing public record requests for requests received by the Investigations Unit. The procedures will include specific instructions on how to</p> | <p><u>Status as of May 19, 2014</u> Investigations will draft recommended procedures for addressing public record requests received by the Investigations Unit for inclusion in the Data</p> | <p>May 31, 2014 Selisa Daniel 412-3971</p> |

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| | | files | document confidential information, including DAVE information, in investigative files. | Aggregator Policy. | |
| | | All Investigations’ staff should be trained about public records and understand the confidentiality of DAVE information, whether they access DAVE or not. | <u>Status as of November 19, 2013</u> All investigations’ staff will be trained about public records and understand the confidentiality of DAVE information. | <u>Status as of May 19, 2014</u> Investigations staff will be trained about public records and understand the confidentiality of DAVE information. | May 31, 2014 Selisa Daniel 412-3971 |
| 7 | The Agency did not have a process or maintain documentation to ensure compliance with the MOU requirement about confidentiality acknowledgements. | All current DAVE users and any staff with access to DAVE information should sign DHSMV's Confidentiality Acknowledgement forms. These forms should be maintained in a central file maintained by the DAVE Administrator for documentation purposes. | <u>Status as of November 19, 2013</u> Investigations staff with access to DAVE will sign DHSMV’s Confidentiality Acknowledgement Forms and provide them to the DAVE Administrator. <u>Status as of November 19, 2013</u> The DAVE administrator will maintain all DHSMV’s Confidentiality Acknowledgement Forms for Support Services and Investigations. | Complete | Complete |

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| | | | <u>Status as of November 19, 2013</u> Support Services staff with access to DAVE will sign DHSMV’s Confidentiality Acknowledgement Forms and provide them to the DAVE Administrator. | Complete | Complete |
| 8 | The Agency did not have a process or maintain documentation to ensure compliance with the MOU requirement about criminal sanctions acknowledgements. | All current DAVE users and any staff with access to DAVE information should sign DHSMV's Criminal Sanctions Acknowledgement forms. These forms should be maintained in a central file maintained by the DAVE Administrator for documentation purposes. | <u>Status as of November 19, 2013</u> Investigations staff with access to DAVE will sign DHSMV’s Criminal Sanctions Acknowledgement Forms and provide them to the DAVE Administrator. | Complete | Complete |
| | | | <u>Status as of November 19, 2013</u> Support Services staff with access to DAVE will sign DHSMV’s Criminal Sanctions Acknowledgement Forms and provide them to the DAVE Administrator. | Complete | Complete |
| 9 | The Agency does not monitor usage on an “on-going basis. There is no documentation to support that the Agency has performed any type of monitoring of user | To meet the on-going monitoring requirement, the Staff Person should review and document users’ accesses to DAVE on a quarterly basis. | <u>Status as of November 19, 2013</u> The appointed staff person within the Office of Inspector General who is independent of the DAVE process will develop a process and maintain documentation to ensure compliance with the MOU | <u>Status as of May 19, 2014</u> An initial quarterly review has already been completed and the Annual Affirmation Statement was submitted to DHSMV on 3/12/14. | Auditor’s Comments: The quarterly review was completed; however, users were not required to submit their logs for review. Improvement is needed |

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| | <p>accesses to DAVE.</p> <p>The Agency does not consistently submit annual affirmations.</p> | <p>The Staff Person should timely complete and document an annual audit and submit an Annual Affirmation Statement to DHSMV. The audit guide and Annual Affirmation Statements are located at: https://idave.flhsmv.gov/message_center.html</p> <p>The Staff Person should incorporate all responsibilities addressed in this report, including performing the annual audit and quarterly monitoring, in written desk procedures.</p> | <p>requirements for on-going monitoring, performing an annual audit, and submitting an Annual Affirmation Statement.</p> <p><u>Status as of November 19, 2013</u> The appointed staff person within the Office of Inspector General who is independent of the DAVE process will develop a process and maintain documentation to ensure compliance with the MOU requirements for on-going monitoring, performing an annual audit, and submitting an Annual Affirmation Statement.</p> | <p><u>Status as of May 19, 2014</u> Written desk procedures have been created and are currently being followed.</p> | <p>and we will follow-up.</p> <p>Auditor’s Comments: Procedures have been completed; however, the Annual Affirmation Statement was not submitted timely nor was there adequate documentation of the annual audit. Improvement is needed and we will follow-up.</p> |
| 10 | <p>For both the 2008 and 2011 MOUs, the Chief of Investigations, who was also the DAVE Administrator, signed the agreement for the Agency.</p> | <p>The Secretary should sign the DHSMV MOU.</p> | <p><u>Status as of November 19, 2013</u> The Chief of Investigations appointed in 2013 is aware that the Agency head is required to execute such inter-agency agreements. All future memoranda of understanding will be reviewed and signed by the</p> | <p><u>Status as of May 19, 2014</u> A revised MOU has been requested for review and approval by the Agency head.</p> | <p>July 15, 2014 Selisa Daniel 412-3971</p> |

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| | | | Agency head. | | |
| 11 | One of Support Services’ users does not always use DHSMV's DAVE system to perform his responsibility related to parking issues. He uses an older system (KDC) that is still being maintained by DHSMV. | Investigations should request that DHSMV remove the Support Services user’s access to KDC. | <u>Status as of November 19, 2013</u> Investigations has received confirmation from DHSMV/Support Services that KDC access has been cancelled. The DAVE Administrator will keep the documentation supporting the cancellation on file. | Complete | Complete |
| | | Any Agency user of DHSMV driver license data should be required to access only DAVE. | <u>Status as of November 19, 2013</u> Support Services has contacted DHSMV’s Technical Assistance Center to request the KDC access be cancelled. Support Services staff is only accessing DAVE. | Complete | Complete |