



December 1, 2022

Simone Marstiller, Secretary Agency for Health Care Administration 2727 Mahan Drive Tallahassee, FL 32308

Dear Secretary Marstiller,

Enclosed is a six-month status report on the Auditor General's *COVID-19 Data Collection and Reporting at Selected State Entities*, Report No. 2022-200, issued June 2022. This status report is issued in accordance with the statutory requirement to report on corrective actions resulting from the Auditor General's recommendations six months from the report date.

If you have any questions about this status report, please contact Karen Preacher, Audit Director, at 412-3968.

Sincerely,

Brian P. Langston Inspector General

BPL/sgb

Enclosure: Six-Month Status Report on AG Report No. 2022-200

cc/enc: Joint Legislative Auditing Committee

Melinda Miguel, Chief Inspector General, EOG

Jason Weida, AHCA Chief of Staff

Kim Smoak, Deputy Secretary, Division of Health Quality Assurance

Julie Madden, Deputy Secretary, Division of Operations

Scott Ward, Director of Information Technology, Division of Operations

Karen Preacher, Audit Director, Office of the Inspector General



Collection and Reporting of COVID-19 Data

Finding No. 5:

Monitoring of Health Facility Data Reporting

Agency records did not evidence the evaluation of the accuracy of COVID-19 data reported by hospitals, nursing homes, and assisted living facilities and such facilities did not always report required information.

Recommendation:

We recommend that Agency management take steps to promote the accurate reporting by health facilities of all data required by Agency guidelines.

Agency Response as of December 1, 2022:

As part of the \$340,000 funding received to modernize ESS, the Agency was required to expand the ESS system and rebrand it the Health Facility Reporting System (HFRS). This was completed in mid-August 2022. HFRS was utilized during hurricane Ian to collect critical facility information pre and post storm impact. The Agency is currently evaluating improvements to its response to the storm (as it does after every event) and will incorporate those changes into the HFRS system. An overall reevaluation of the reporting function is part of that evaluation as well as ideas to increase enforcement of facility response and reporting. This will include the previously stated goals of:

- Standardizing the reporting naming convention so that reports can be easily reviewed to determine their purpose.
- Developing a Quality Assurance (QA) process for data which would include QA reports and system modifications to reduce data entry errors.
- Determining measures to ensure compliance with reporting requirements.

Agency Response as of May 26, 2022:

The Emergency Status System (ESS) was initially built to collect a limited amount of data during hurricanes and severe weather events. It was not intended to be used for emergencies outside of this scope, having been built for a specific purpose that provided an avenue for licensed health care facilities to provide information regarding the impact of a tropical weather event to their physical facility and/or individuals under their care.

When presented with the complexities of the data required for the pandemic, the Agency utilized the existing resources to modify the system to aid in accurate and timely reporting by health systems within a week's time. While items such as bed availability and resource needs were already built into ESS data fields, data related to COVID positive patients was not. It should be noted the data needed fluctuated during the timeframe of the audit which requires an agile system. ESS was not designed to be agile in nature and all modifications had to be made manually. As data requirements changed, the Agency worked alongside state and local partners to update these fields and communicate these changes.

It should be noted the specific example given in finding 5 to compare census to licensed beds may be misleading. Pursuant to s. 408.821(2), Florida Statutes (F.S.) a provider may

temporarily exceed their licensed capacity to act as a receiving provider in accordance with an approved emergency operations plan for up to 15 days. Given this, the auditor may not have a full understanding of the health facility licensing process in Florida.

The Agency consistently worked alongside licensed health care providers in reporting accurate data. However, data is only as accurate as the person who is submitting it into the system. Throughout the pandemic, the Agency worked with providers who may have inaccurately reported information through direct contact around the clock. The finding is extremely general in nature and does not account for the level of effort and work public servants and health care providers did to ensure this information was collected timely and accurately.

Regarding the portion of Finding 5 which states, "such facilities did not always report required information." Please note that in any ESS event, the Agency uses all available outreach mechanisms to ensure timely and accurate responses, including working trade associations, and other state and local partners to communicate needs. Agency Employees worked well outside their job descriptions to serve their state, and this should be commended.

During the 2022 Legislative Session, the Agency received \$340,000 in funding to support the continued modernization of ESS into a more agile Health Facility Reporting Tool that will be a better resource for future events. Additionally, the funds will allow the Agency to make modifications to provide better workflow management, conduct routine drills and exercises, provide notification to users, and better manage access controls.

Although the Agency maintains that it collected high quality data that was instrumental in the COVID response, it will continue to work to address opportunities for improvements that sync with the finding and recommendation including:

- Standardize the reporting naming convention so that reports can be easily reviewed to determine their purpose.
- Develop a Quality Assurance (QA) process for data which would include QA reports and system modifications to reduce data entry errors.
- Determine measures to ensure compliance with reporting requirements.

Anticipated Completion Date:

HQA: December 31, 2022

Agency Contact:

Ryan Fitch, Central Services Bureau Chief

Information Technology Controls

Finding No. 7:

ESS Access Controls

Agency user access privilege controls for the Emergency Status System (ESS) need enhancement to better prevent and detect inappropriate access to the ESS.

Recommendation:

We recommend that Agency management strengthen IT access controls to ensure that ESS user access privileges are limited to the minimum necessary for a user to perform their current job duties and deactivated immediately upon separation from Agency employment. We also recommend that Agency management perform and document periodic reviews of ESS user access privileges.

Agency Response as of December 1, 2022:

No further updates. Solutions are still active and are in place with Active Directory/People First.

Agency Response as of May 26, 2022:

The Agency takes information and data security seriously pursuant to Chapter 282.318, F.S. This includes having established standards for both internal and external users accessing Agency IT systems and applications, such as the Emergency Status System (ESS).

While the audit provides a broad level overview of ESS, it does not consider that user access privileges are established for both internal and external users regarding the level of information that may be viewed, the ability to input data into fields, and export data (internal).

As referenced in Finding 5, ESS was initially built using internal resources to respond to severe weather events with a limited duration, such as a hurricane. Given the sporadic use based on hurricane season, external user access was extremely limited. Additionally, the level of information health care facilities were asked to provide during hurricane season was minute in comparison to the level of data points needed during the pandemic. To ensure that information was provided timely and accurately, health care facilities did have more individuals using the system than in prior events. However, the level of access was unchanged.

Regarding Finding 7, it should be noted the finding related to strengthening, "IT access controls to ensure that ESS user access privileges are limited to the minimum necessary for a user to perform their current job duties and deactivated immediately upon separation from Agency employment." This was and continues to be established Agency process as outlined below:

Agency Account Deactivation:

Access to the ESS for members of the Agency's workforce requires an active Agency Active Directory (AD) account. These accounts are required to be terminated on the last day of employment. To ensure accounts are disabled timely, IT Security monitors an active report which compares employment status to AD status so that outliers can be corrected immediately. Staff that authorize ESS access retires all ESS specialized users from AD annually and validates appropriate access privileges. This review is documented by authorizing staff.

ESS User Privileges:

Regarding ESS access controls, readers should note that while internal users have a level of access based on their job function, external users only have access to a specific event and may only provide information at the request of the Agency. When a specific weather and/or

emergency related event is closed within ESS, access to such event is no longer accessible to all external users and internal users who are not classified as an administrator.

Anticipated Completion Date:

In May 2021, the Division of IT implemented the following Corrective Action: IT Security monitors an active report which compares employment status to AD status so that outliers can be corrected immediately.

Agency Contact:

William Armstrong, Information Security Manager Ryan Fitch, Central Services Bureau Chief