University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

September 14, 2017

9:00 am – 9:45 am - Executive Session
9:45 am – 11:00 am - Public Session

University of Connecticut, Lewis B. Rome Commons Ballroom, 626 Gilbert Road Extension, Storrs, CT

REVISED

Topic	Proposed Action	Tab
Executive Session to discuss: • C.G.S. 1-200(6)[E] – Preliminary drafts or notes that the public agency has determined that the public's interest in withholding such documents clearly outweighs the public interest in disclosure. [1-210(b)(1)] • C.G.S. 1-200(6)[E] – Records or the information contained therein pertaining to strategy and negotiations with respect to pending claims regarding Recovery Audit Contractor (RAC) Audits [1-210(b)(4)] • C.G.S 1-200(6)(E) – Records, reports and statements privileged by the attorney-client relationship. [1-210(b)(10)] • C.G.S. 1-200(6)[C] – Records of standards, procedures, processes, software and codes not otherwise available to the public, the disclosure of which would compromise the security and integrity of an information technology system. [1-210(b)(20)]	Review	None
Opportunity for Public Comments		None
Minutes of the May 16, 2017 JACC Meeting	Approval	1
Storrs & UConn Health Significant Compliance Activities • Clinical Conflict of Interest at UConn Health	Update	2
HealthONE – Electronic Medical Record Implementation	Update	3
Storrs & UConn Health Significant Audit Activities • Status of Audit Assignments • Audit Follow-up Activity	Update	4
Draft Audit Plans for 2018	Approval	5
External Engagements • Status of External Engagements • BKD – Fee for FY17 Annual Agreed Upon Procedures to the Statements of Revenues and Expenses for Athletics Programs • CohnReznick – Fee for FY17 Annual Audit and Agreed Upon Procedures, UConn 2000 Construction Projects Expenditures	Update Approval Approval	6
Informational/Educational Items • Compliance Newsletters – UConn & UConn Health	Information Only	7
Conclusion of Full Meeting		
Information Session with OACE and External Auditors		

The next meeting of the JACC will be held on Thursday, December 19, 2017 at 10:00 am
University of Connecticut, Lewis B. Rome Commons Ballroom, Storrs, CT

THIS PAGE INTENTIONALLY LEFT BLANK

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 1

THIS PAGE INTENTIONALLY LEFT BLANK

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Meeting Minutes from May 16, 2017

DRAFT

Attendees	
Trustees / Directors Present:	F. Archambault, M. Boxer, R. Carbray, J. Freedman, T. Holt, T. Kruger, and D. Nayden
Staff Present:	A. Agwunobi, K. Bailot, C. Bianchi, C. Chiaputti, A. Cretors, C. Eaton, K. Fearney, D. Galloway, J. Geoghegan, M. Glasgow, B. Goetz, C. Gray, S. Jordan, A. Marsh, I. Mauriello, M. Mundrane, R. Orr, J. Pufahl, D. Purington, R. Rubin, J. Seemann, L. Silbart, K. Violette, and B. White
Auditors of Public Accounts:	W. Felgate, G. Slupecki
CohnReznick:	P. Ballasy, C. Kurth, and B. Roche

The meeting of the Joint Audit and Compliance Committee (JACC) was called to order at 10:02 a.m. by Trustee Nayden.
ON A MOTION made by Trustee Nayden and seconded by Director Archambault, THE JACC VOTED to go into executive session to discuss:

- C.G.S. 1-200(6)[E] – Preliminary drafts or notes that the public agency has determined that the public's interest in withholding such documents clearly outweighs the public interest in disclosure. [1-210(b)(1)]
- C.G.S. 1-200(6)[E] – Records or the information contained therein pertaining to strategy and negotiations with respect to pending claims regarding Recovery Audit Contractor (RAC) Audits. [1-210(b)(4)]
- C.G.S. 1-200(6)[E] – Records, reports and statements privileged by the attorney-client relationship. [1-210(b)(10)]
- C.G.S. 1-200(6)[C] – Records of standards, procedures, processes, software and codes not otherwise available to the public, the disclosure of which would compromise the security and integrity of an information technology system. [1-210(b)(20)]

Executive Session was attended by the following: Joint Audit & Compliance Committee Members: F. Archambault, M. Boxer, R. Carbray, J. Freedman, T. Holt, T. Kruger, and D. Nayden

OACE Staff members: K. Bailot, C. Chiaputti, K. Fearney, A. Marsh, I. Mauriello, and K. Violette; **Senior Staff:** A. Agwunobi, J. Geoghegan, S. Jordan, L. Silbart, R. Rubin, and J. Seemann; **General Counsel:** R. Orr; **Chief Counsel – UConn Health:** B. White; **Portions of Executive Session were also attended by:** C. Bianchi, R. Boggis, C. Delello, C. Eaton, N. Ferron, B. Gerjuoy, C. Gray, K. Holsinger, M. Mundrane, J. Peeples, J. Pufahl, D. Purington, and P. Selleck.

The Executive Session ended at 10:47 a.m. and the JACC returned to open session at 10:50 a.m.
There were no public comments.

D. Galloway introduced new JACC members Mark Boxer and Joel Freedman to the committee; announced new UConn Health Internal Auditor, Libby Gallo; and that IT Audit Manager Carrie Gray has taken the position of the UConn Health Director of Information Security. D. Galloway also confirmed his retirement date of June 9, 2017.

Tab 1 – Minutes of the Meeting

ON A MOTION made by Trustee Nayden and seconded by Director Holt the minutes of the February 16, 2017, JACC meeting were approved.

Tab 2 – Storrs & UConn Health Significant Compliance Activities

K. Fearney and I. Mauriello provided an update on compliance activities including the compliance monitoring program at Storrs and the establishment of two compliance committees at UConn Health: Finance Compliance Committee and Information Security and Privacy Compliance Committee.

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Meeting Minutes from May 16, 2017

DRAFT

A. Cretors provided an Athletics NCAA Compliance update and D. Purington provided a HealthOne EMR Project update to the committee.

Tab 3 – Significant Audit Activities

C. Chiaputti provided the JACC with an update on the status of audit assignments (Storrs and UConn Health). The JACC accepted nine audits presented, in addition, OACE had fourteen audits in progress during this reporting period.

Tab 4 – Auditors of Public Accounts

Auditors of Public Accounts, W. Felgate and G. Slupecki, presented the committee with the findings of the Statewide Single Audit Report for the Fiscal Year Ended June 30, 2016.

Tab 5 – External Engagements

P. Ballasy, C. Kurth, and B. Roche of CohnReznick presented the Audit of Substantially Complete UConn 2000 Construction Projects and Agreed-Upon Procedures on UConn 2000 Expenditures for Fiscal Year 2016.

Tab 6 - Informational / Educational Items

The committee was provided with the following:

- Article – Defining the Meaning of 'Auditing' and 'Monitoring' and Clarifying the Appropriate Use of the Terms,
- Compliance Newsletters – UConn and UConn Health

There being no further business, **ON A MOTION** made by Trustee Nayden and seconded by Director Freedman, the meeting was adjourned at 11:17 a.m.

Respectfully submitted,

Angela Marsh

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 2

THIS PAGE INTENTIONALLY LEFT BLANK

University of Connecticut & University of Connecticut Health Center

Joint Audit & Compliance Committee Meeting

SIGNIFICANT COMPLIANCE ACTIVITIES

STORRS

Minor Protection Program

Since the inception of the Minor Protection Program (MPP) in April 2016, a total of 179 University youth activities registered with the MPP. Activities registered with the MPP have collectively served 6,673 youth participants. Additionally, 1,952 individuals have completed UConn's Minor Protection Training since the inception of the program.

In effort to promote a secure environment for minors, measure program effectiveness, and monitor compliance with established standards for youth activities, 5 out of 62 activities that took place this summer were randomly selected for onsite monitoring visits. Visits generally involved observing program activities, as well as reviewing relevant program records, responses to a pre-visit questionnaire, and program specific policies and procedures.

Ongoing Training and Educational Initiatives

As part of our ongoing commitment to promoting an organizational culture that encourages ethical conduct and a commitment to compliance, the Compliance Office has focused on developing and enhancing various trainings and strategic educational initiatives. This past summer the Compliance Office:

- Developed a new Graduate Assistant compliance training module covering the University Code of Conduct and the Importance of Individual Behaviors, Workplace Safety, ADA, and Title IX. The training will launch this fall.
- Partnered with HR to update an online compliance module for new Adjunct Faculty Orientation.
- Recorded podcast episodes with subject matter experts at the University regarding various compliance matters and unique aspects of the University. Among others, podcast topics for this academic year will cover faculty consulting, tax compliance, EHS, and the Ombuds Office.
- Started to develop a series of short animated videos to highlight relevant compliance topics and resources. The series will launch this fall and will cover topics such as, the Gifts Rules, ADA Compliance, EHS, Compliance Training, etc.

JOINT EFFORTS – STORRS AND UCONN HEALTH

Privacy & Information Security cross-campus collaboration - The separate Privacy Offices and Information Security Offices at UConn and UConn Health are embarking on increased collaborations to create greater synergy and a more holistic approach to privacy, data security and information management across all University campuses and environments. In particular, these combined efforts are aimed at more comprehensive risk assessment, minimizing duplication of efforts and consistency in policies and procedures across the University's diverse environments with the common goal of increased attention on data flows, access controls and protection of sensitive information.

University of Connecticut & University of Connecticut Health Center

Joint Audit & Compliance Committee Meeting

SIGNIFICANT COMPLIANCE ACTIVITIES

UCONN HEALTH

- **Overpayment refunds –**
  - There are no new refunds to report.

- **Privacy and Security Departmental Risk Reviews –** The Privacy and Security Offices are developing local checklists to be used by departments that attest to Meaningful Use to guide self-assessments and assure readiness for potential governmental audits. The Privacy Office has been conducting "walk-rounds" in both UMG and JDH locations to monitor privacy and security awareness in various clinical locations.

- **John Dempsey Hospital Deaf and Hard of Hearing Voluntary Resolution Agreement (VRA) Initial Compliance Report –** As required by the VRA, an initial Compliance Report was provided to the government subsequent to the first quarterly internal Audit (also required). JDH demonstrated substantial compliance with the VRA's detailed requirements, with significant efforts made by the JDH Regulatory staff and leadership, Interpreter Services, OIE, the Office of General Counsel, and OACE. The VRA requires ongoing quarterly Audits and semiannual Compliance Reports for the two year duration of the Agreement.

COMPLIANCE **COMMUNICATOR**

Dear Colleagues:

As we prepare to embark on the semester ahead, I would like to take this opportunity to share some important reminders regarding UConn's Compliance efforts as well as announce a series of new educational initiatives intended to promote compliance and raise awareness of University expectations.

First, be on the lookout for the "policy of the week," which is found each Wednesday in the Daily Digest. This will provide you with a convenient way to stay current on University policies that are important to our community. The Compliance Courier newsletter is also useful, and is a great way to learn about compliance topics affecting the University, as well as you as a state employee. Here is a link to past newsletters: http://audit.uconn.edu/newsletter/.

I would also invite you to listen to our new podcast series entitled, *Compliance Chats*. Each 5 – 10 minute podcast episode will focus on interviewing subject matter experts regarding various compliance matters and unique aspects of the University. Topics include Faculty Consulting, Health and Safety, IT Security and more. To tune-in, visit: http://audit.uconn.edu/compliance-chats-a-podcast-series. Finally, I am thrilled to announce the launch of our latest educational initiative, *Compliance Clips*. This series of short animated videos will highlight important compliance topics and resources. Our first installment focuses on the Code of Ethics gift rules and provides easy-to-remember guidance for navigating through what can be complex issues. You can view *Compliance Clips* at: http://audit.uconn.edu/compliance-clips-animated-video-series/. Both our podcast and video series will be accompanied by printable materials highlighting key takeaways and important resources.

Additionally, as State of Connecticut employees, please remember all faculty and staff must adhere to the *State Code of Ethics for Public Officials* and can be held personably accountable for not doing so. Here is a link to the University Guide to the State Code of Ethics, http://policy.uconn.edu/2011/05/24/guide-to-the-state-code-of-ethics/.

We each have an important role in promoting a culture of compliance and ethics at the University. This role is ongoing and extends beyond Annual Compliance Training. I am hopeful these initiatives will be a great benefit to you in the months ahead. We welcome your feedback as we continue to find new ways to enhance our efforts. As always, thank you and please contact our office should you need any assistance.

Best wishes in the new academic year,

Kim Fearney, Director of Compliance

THIS PAGE INTENTIONALLY LEFT BLANK

Clinical Financial Conflict of Interest

Update on Progress

JACC

September 14, 2017

Activities Completed

- Structure Created
  - Committee identified in August of 2016.
  - Members and co-chairs assigned and have met monthly since August 2016.
  - Committee Charter written and approved
  - Policy written, vetted and approved.
  - Clinical questionnaire created for disclosure use.
  - Identified requisite group of individuals who will require disclosure for clinical purposes.

Activities Underway

- Disclosures required
  - hccs COI-Smart© tool to be used for first round of clinical disclosures.
  - First round of disclosures representing 2016 activity is planned for the month of September 2017 for a subset of identified clinicians – those who have not yet reported as researchers in 2017.
  - For year 2018 (representing 2017 activity) clinical disclosures will be obtained along with research disclosures across campuses using the InfoEd tool.

Next Steps

- Develop process for review of disclosures and create Management Plans
- Management Plans expected to be in place by end of 2017

Special thanks to the Research Compliance and Conflict of Interest staff for their work in support of this effort.

* Wesley Byerly
* Gus Fernandez
* Kristen Temblay

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 3

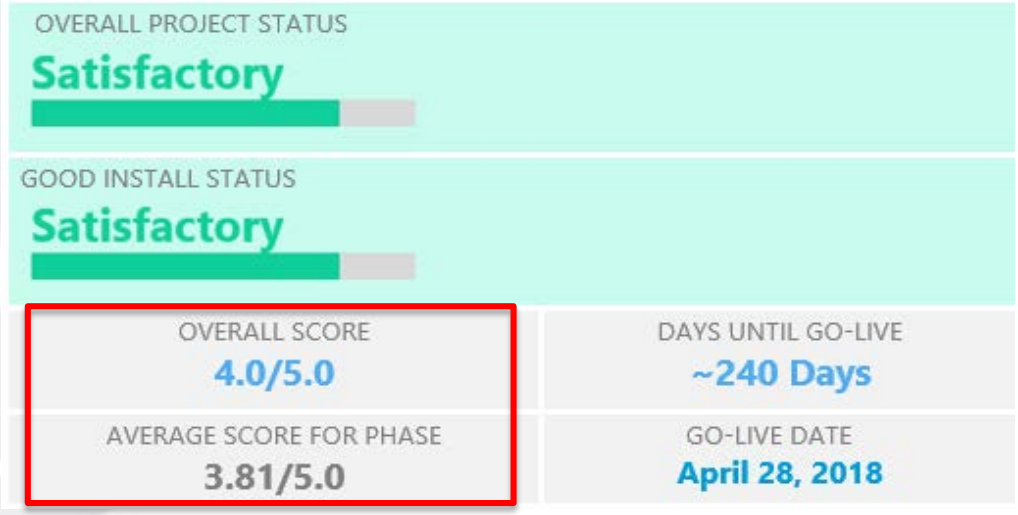
THIS PAGE INTENTIONALLY LEFT BLANK

Health**ONE** Update

Epic EHR Project

UCONN HEALTH ONE
One Place. One Record. One Reason. You.

Project Status



- ✓ Budget Remains Favorable to Targets
- ✓ April 28, 2018 Go-Live on Track

UCONN HEALTH ONE
One Place. One Record. One Reason. You.

Current Milestones

- Round 1 Charge Testing
- Data conversion testing
- Test Script Development
- Integrated workflow testing underway
- Planning for workflow walkthroughs with end-user

UCONN HEALTH ONE
One Place. One Record. One Reason. You.

Future Milestones

- Training
  - 49 Credentialed Trainers needed
    - 27 UConn Health employees identified
    - 22 External resources will be needed
  - Estimate 75,000 hours of training will be delivered
  - “Train the Trainer” begins January 8, 2018
  - End-user training begins 6-8 weeks before go-live
- Go-Live Support
  - Securing Super-users
  - Securing external resources

UCONN HEALTH ONE
One Place. One Record. One Reason. You.

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 4

THIS PAGE INTENTIONALLY LEFT BLANK

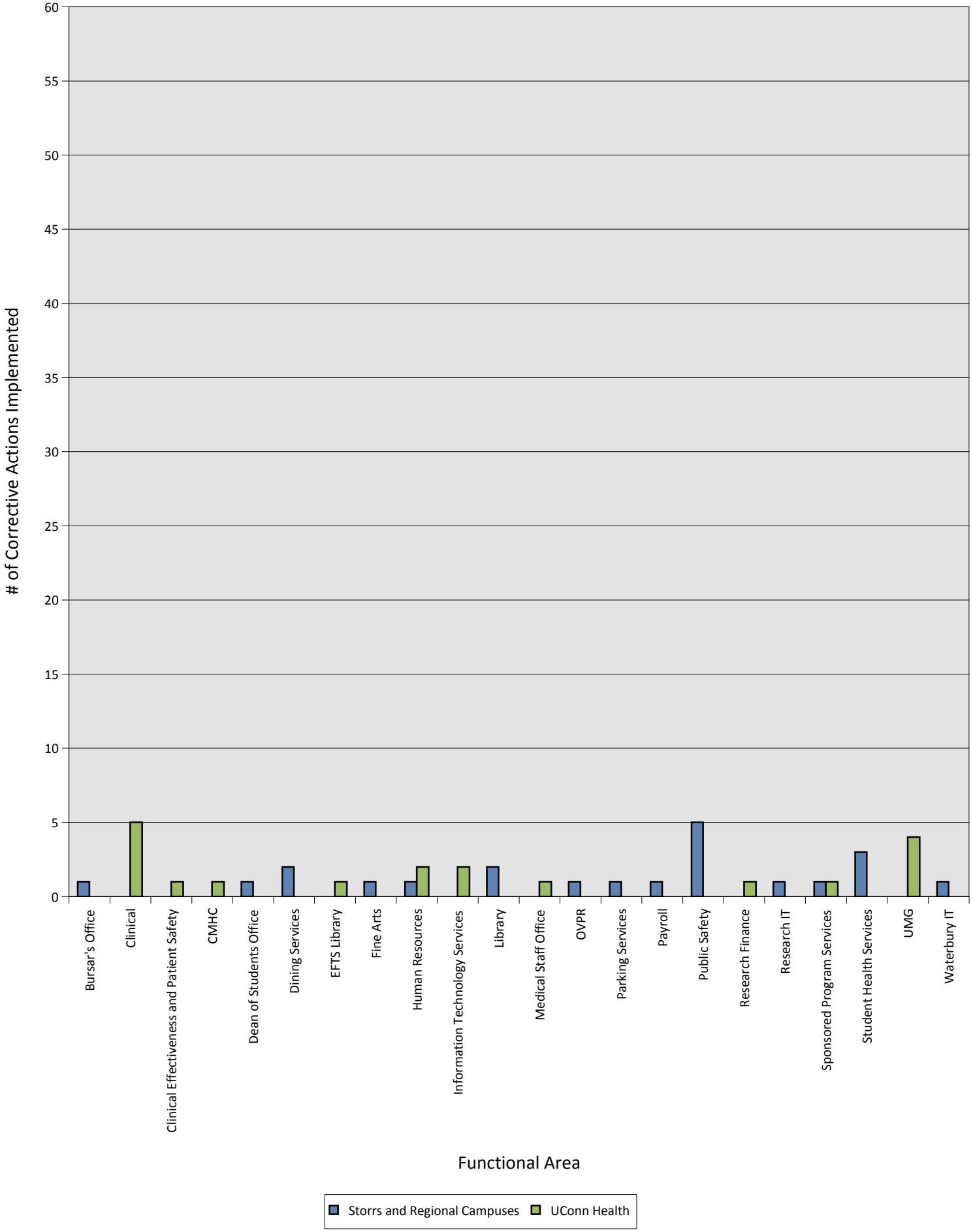
UConn & UConn Health

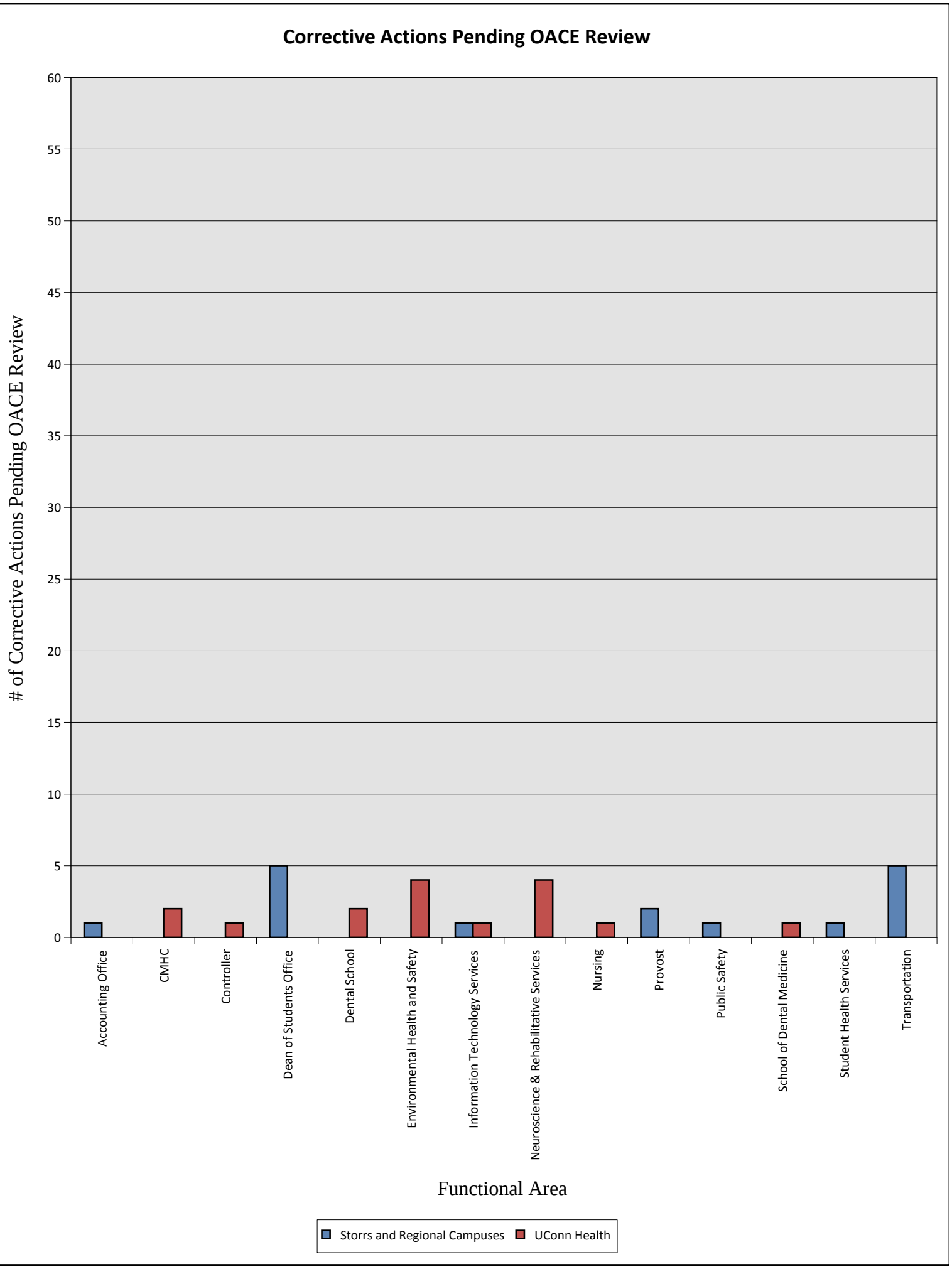
Joint Audit & Compliance Committee Meeting

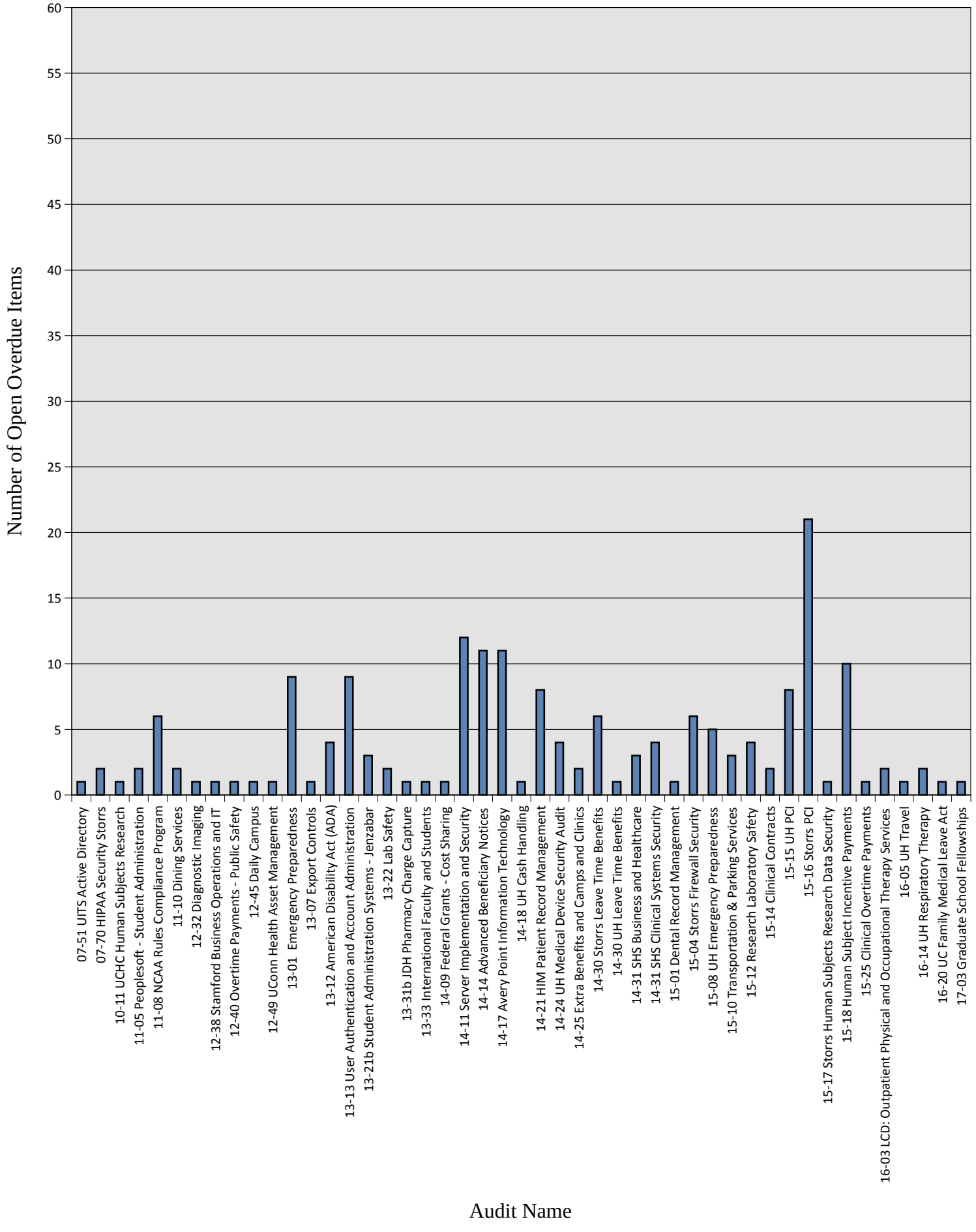
Status of Assignments

Audit Project	UConn (UC) or UConn Health (UH)	Planning	Fieldwork	Pre-draft/ Draft Reporting	Final Draft Report Issued
Parking and Transportation	UH				X
Clinical Trial Billing	UH				X
Deaf or Hard of Hearing Services –VRA 1st Report	UH				X
Hartford Campus Relocation Project – Report 2	UC				X
Purchasing – Contract Administration	UC				X
School of Law Financial Aid	UC				X
Pharmacy IT	UH				X
Cancer Center	UH				X
Foundation – FY17	UC/UH		X		
Energy Services Performance Contract Project – Phase 1 Report 2	UC		X		
Radiation Oncology Therapy	UH		X		
Controlled Substances in Research	UC/UH		X		
CT Regenerative Medicine Research Fund Grants FY17 Expenditures	UC/UH		X		
CT Bioscience Innovation Fund Grants FY16 and FY17 Expenditures	UC/UH		X		
UConn HealthONE Implementation – Execution Phase	UH		X		
Building Access Controls	UC		X		
Office of the Fire Marshal & Building Inspector	UC		X		
Mandatory Training Compliance	UH		X		
Dental Charge Capture and Billing	UH	X			
Deaf or Hard of Hearing Services – VRA 2nd Report	UH	X			
Financial Aid	UH	X			
TOTAL AUDITS (21)		**(03)**	**(10)**	**(00)**	**(08)**

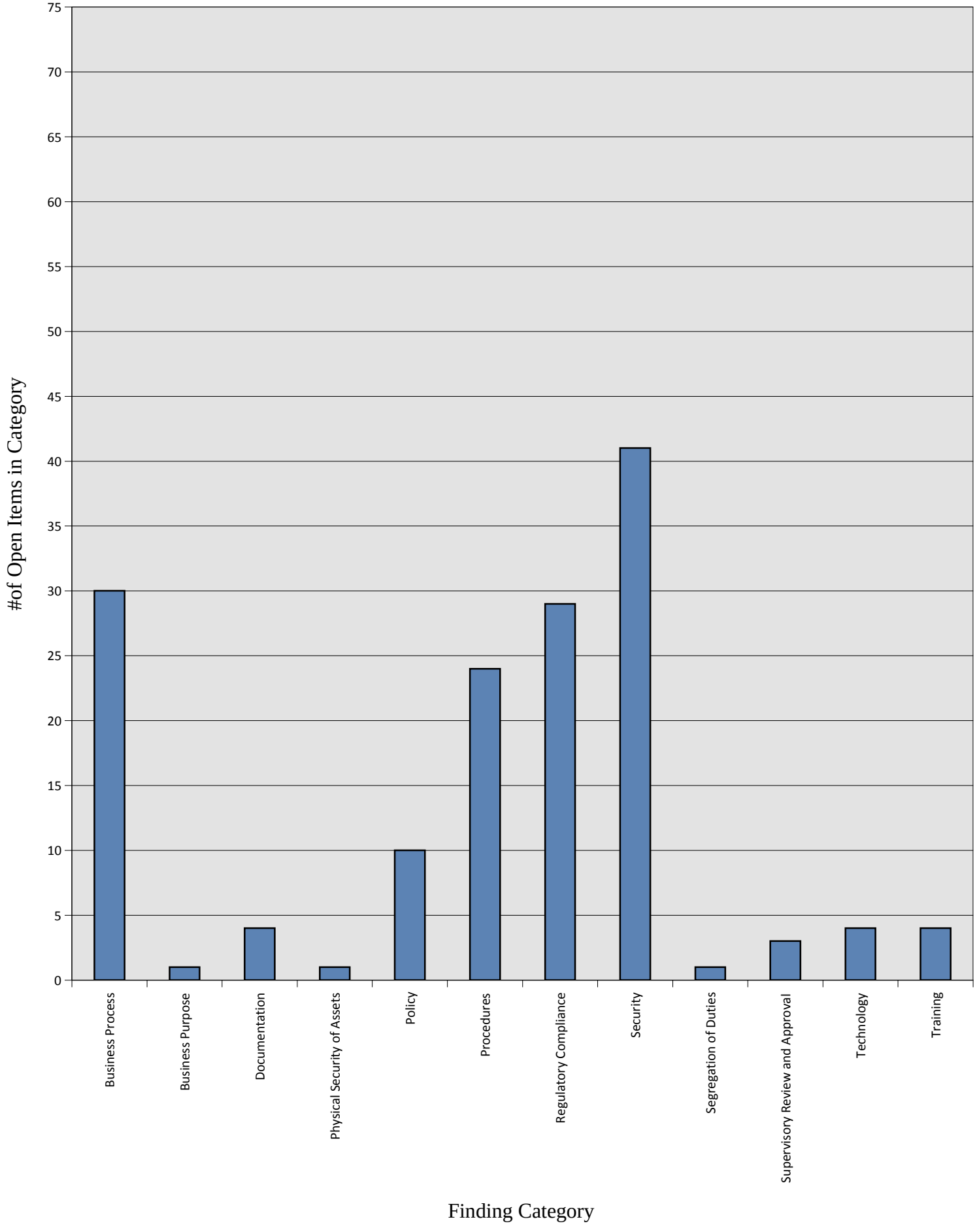
Special Projects/Consulting	UConn (UC) or UConn Health (UH)	Planning	Field Work	Review Pre-draft	Project Final
Athletics Travel	UC			X	
Landscaping Barn Fire	UC		X		
Dining Services	UC		X		
TOTAL SPECIAL PROJECTS/CONSULTING (03)		**(00)**	**(02)**	**(01)**	


Corrective Actions Implemented by Department
# of Corrective Actions Implemented
60
55
50
45
40
35
30
25
20
15
10
5
0
Bursar's Office
Clinical
Clinical Effectiveness and Patient Safety
CMHC
Dean of Students Office
Dining Services
EFTS Library
Fine Arts
Human Resources
Information Technology Services
Library
Medical Staff Office
OVPR
Parking Services
Payroll
Public Safety
Research Finance
Research IT
Sponsored Program Services
Student Health Services
UMG
Waterbury IT
Functional Area
Storrs and Regional Campuses
UConn Health

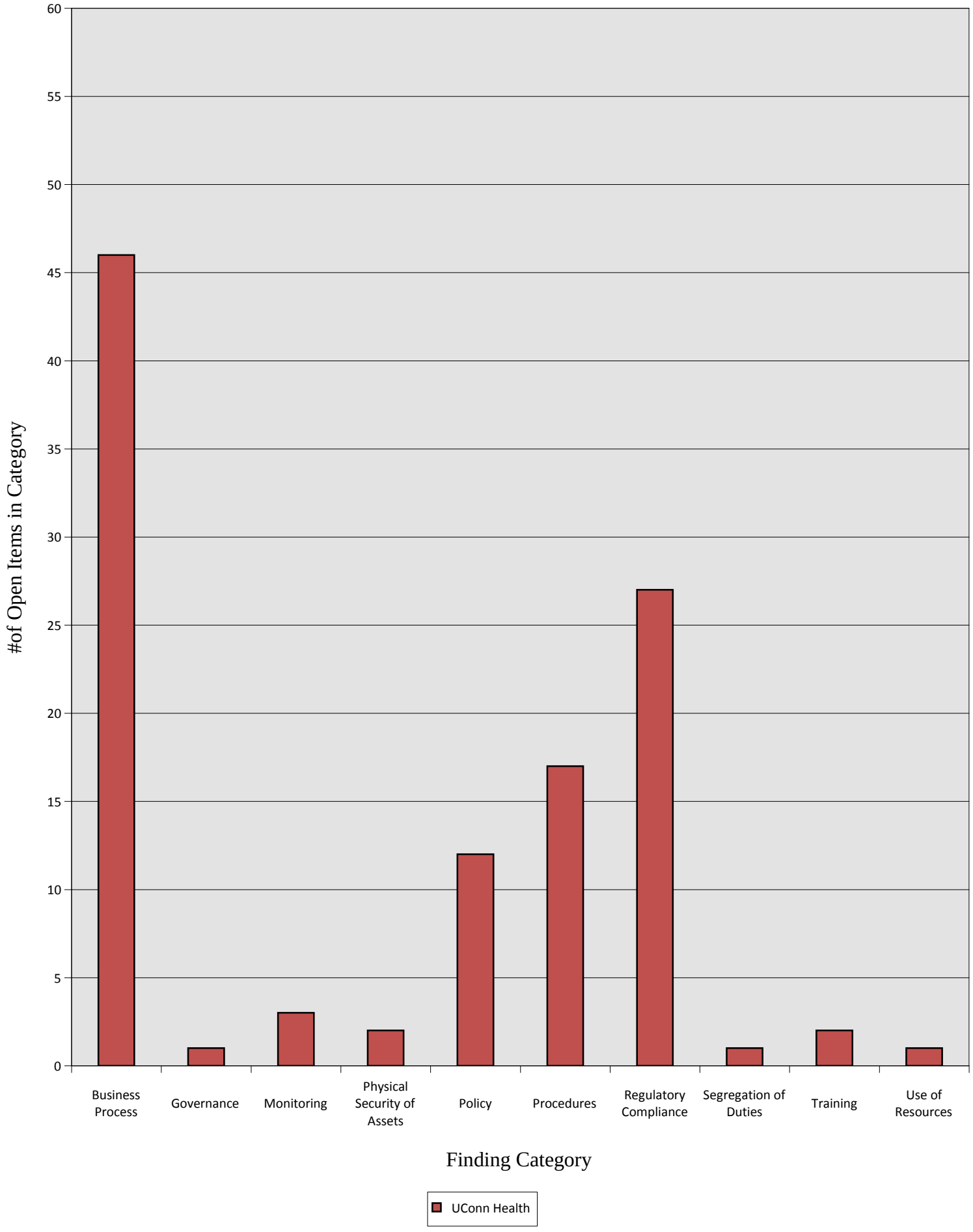

Corrective Actions Pending OACE Review
# of Corrective Actions Pending OACE Review
60
55
50
45
40
35
30
25
20
15
10
5
0
Accounting Office
CMHC
Controller
Dean of Students Office
Dental School
Environmental Health and Safety
Information Technology Services
Neuroscience & Rehabilitative Services
Nursing
Provost
Public Safety
School of Dental Medicine
Student Health Services
Transportation
Functional Area
Storrs and Regional Campuses
UConn Health

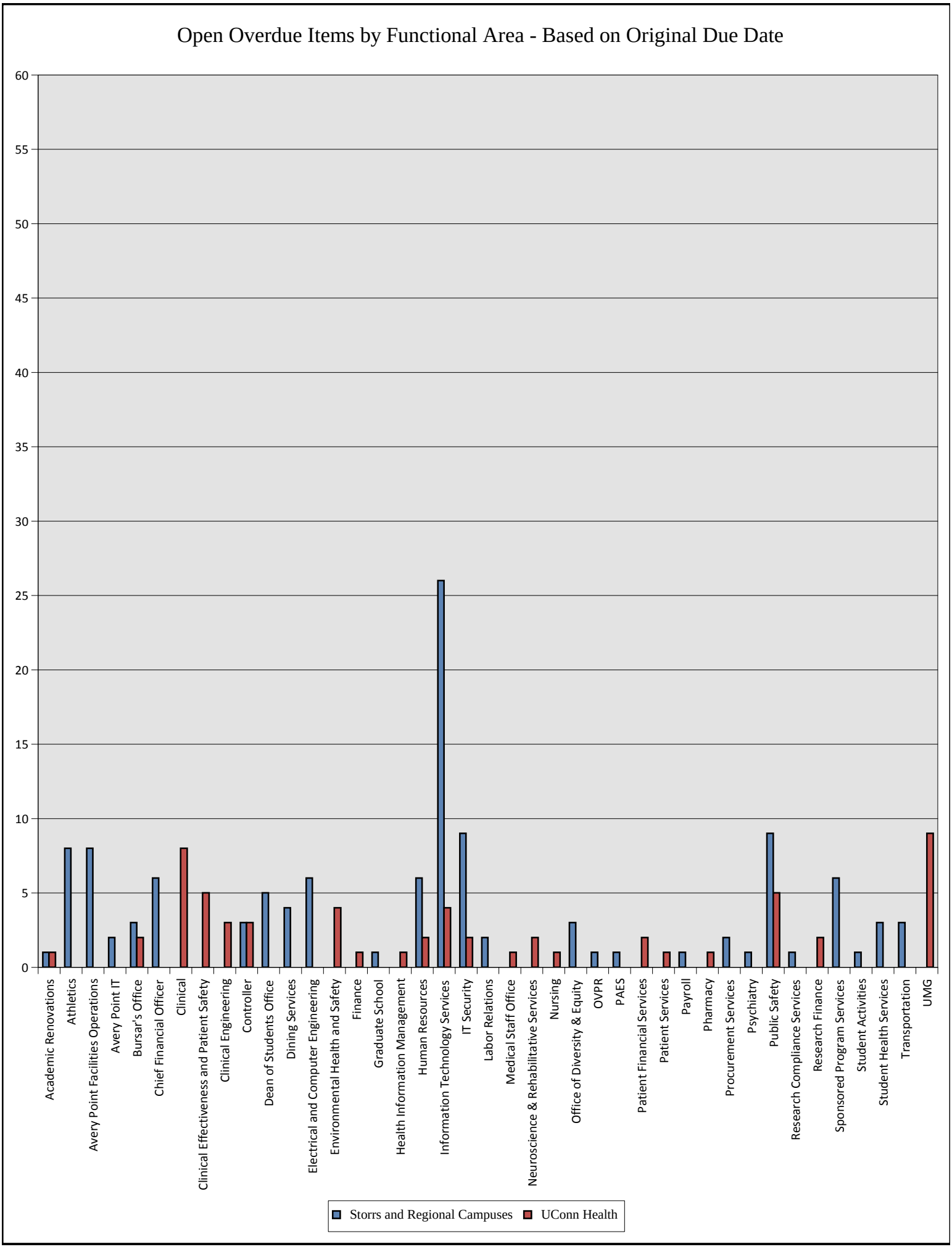

Open Overdue Items by Audit - Based on Original Due Date
Number of Open Overdue Items
0
5
10
15
20
25
30
35
40
45
50
55
60
07-51 UITS Active Directory
07-70 HIPAA Security Storrs
10-11 UCHC Human Subjects Research
11-05 Peoplesoft - Student Administration
11-08 NCAA Rules Compliance Program
11-10 Dining Services
12-32 Diagnostic Imaging
12-38 Stamford Business Operations and IT
12-40 Overtime Payments - Public Safety
12-45 Daily Campus
12-49 UConn Health Asset Management
13-01 Emergency Preparedness
13-07 Export Controls
13-12 American Disability Act (ADA)
13-13 User Authentication and Account Administration
13-21b Student Administration Systems - Jenzabar
13-22 Lab Safety
13-31b JDH Pharmacy Charge Capture
13-33 International Faculty and Students
14-09 Federal Grants - Cost Sharing
14-11 Server Implementation and Security
14-14 Advanced Beneficiary Notices
14-17 Avery Point Information Technology
14-18 UH Cash Handling
14-21 HIM Patient Record Management
14-24 UH Medical Device Security Audit
14-25 Extra Benefits and Camps and Clinics
14-30 Storrs Leave Time Benefits
14-30 UH Leave Time Benefits
14-31 SHS Business and Healthcare
14-31 SHS Clinical Systems Security
15-01 Dental Record Management
15-04 Storrs Firewall Security
15-08 UH Emergency Preparedness
15-10 Transportation & Parking Services
15-12 Research Laboratory Safety
15-14 Clinical Contracts
15-15 UH PCI
15-16 Storrs PCI
15-17 Storrs Human Subjects Research Data Security
15-18 Human Subject Incentive Payments
15-25 Clinical Overtime Payments
16-03 LCD: Outpatient Physical and Occupational Therapy Services
16-05 UH Travel
16-14 UH Respiratory Therapy
16-20 UC Family Medical Leave Act
17-03 Graduate School Fellowships
Audit Name

Open Items by Finding Category - Storrs

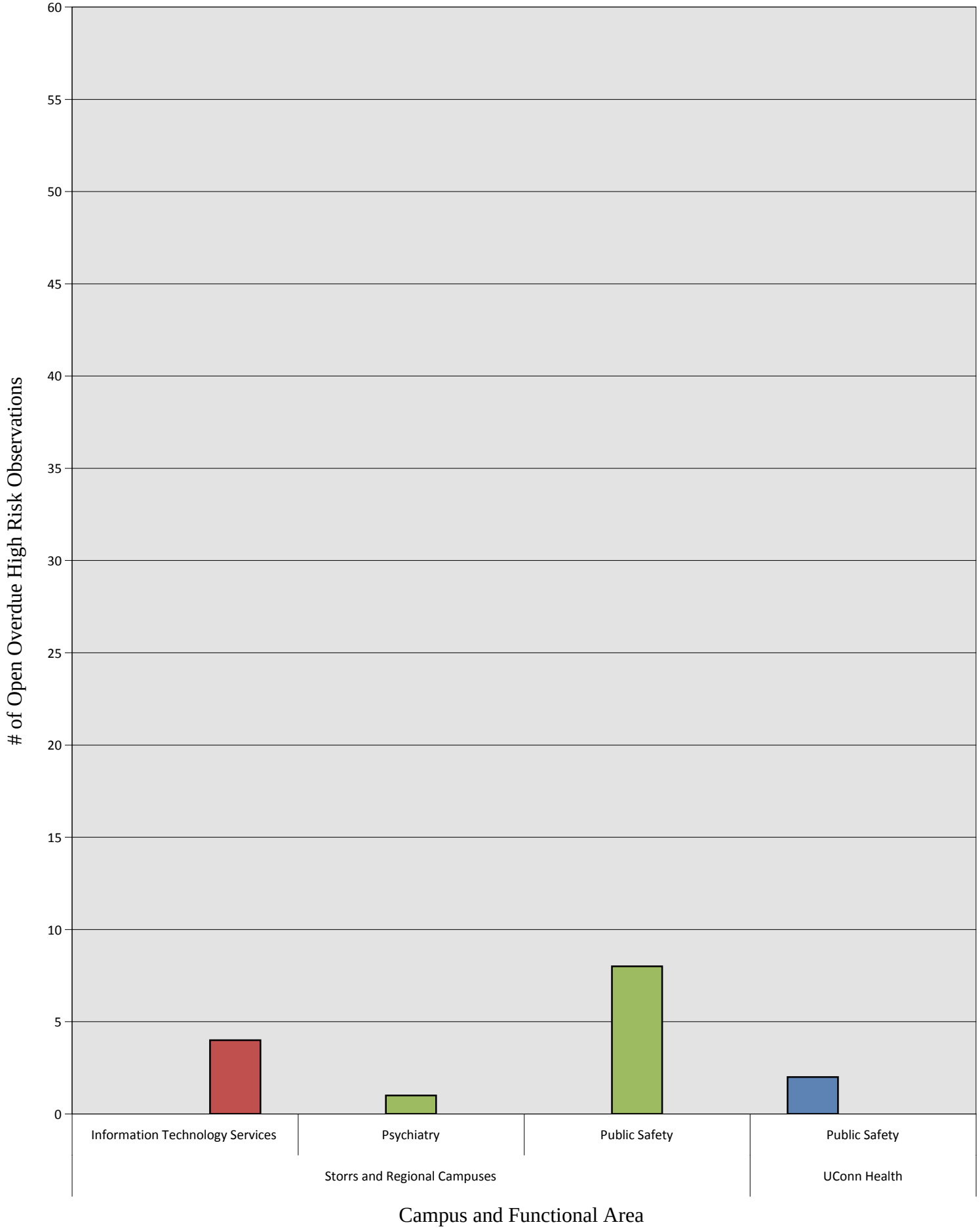


Open Items by Finding Category - UConn Health

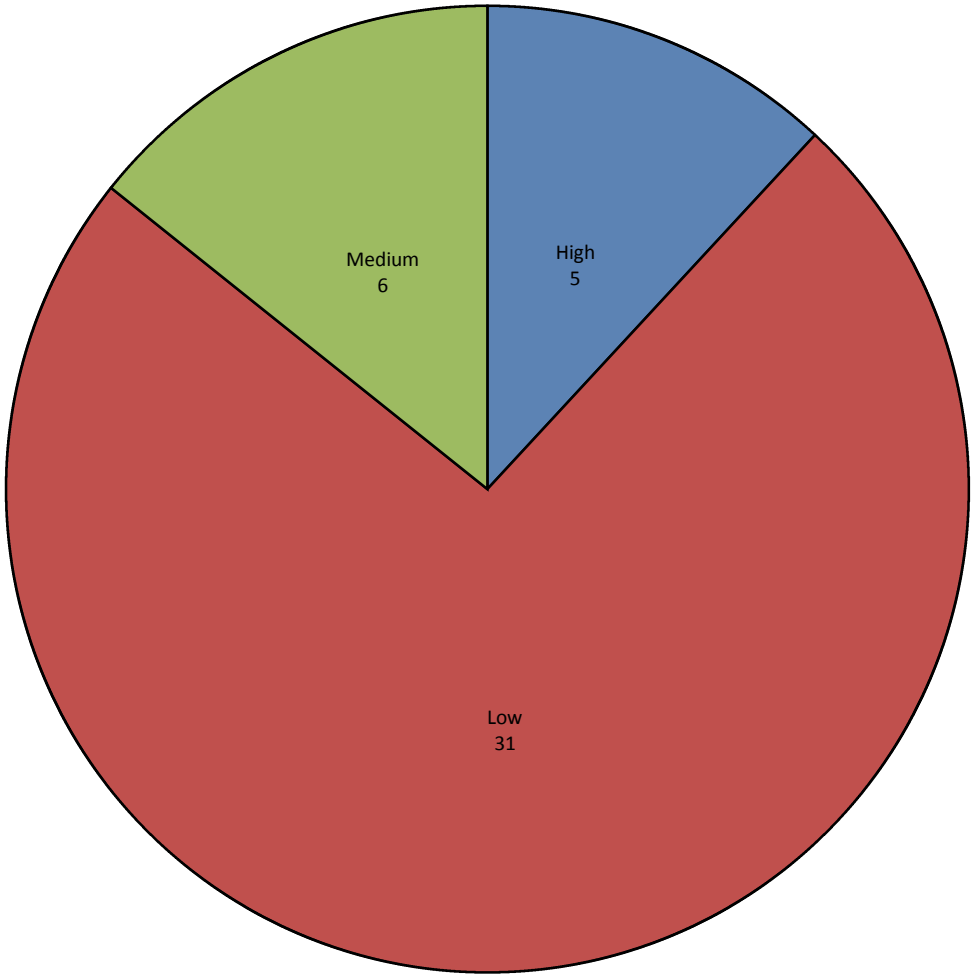



Open Overdue Items by Functional Area - Based on Original Due Date
60
55
50
45
40
35
30
25
20
15
10
5
0
Academic Renovations
Athletics
Avery Point Facilities Operations
Avery Point IT
Bursar's Office
Chief Financial Officer
Clinical
Clinical Effectiveness and Patient Safety
Clinical Engineering
Controller
Dean of Students Office
Dining Services
Electrical and Computer Engineering
Environmental Health and Safety
Finance
Graduate School
Health Information Management
Human Resources
Information Technology Services
IT Security
Labor Relations
Medical Staff Office
Neuroscience & Rehabilitative Services
Nursing
Office of Diversity & Equity
OVPR
PAES
Patient Financial Services
Patient Services
Payroll
Pharmacy
Procurement Services
Psychiatry
Public Safety
Research Compliance Services
Research Finance
Sponsored Program Services
Student Activities
Student Health Services
Transportation
UMG
Storrs and Regional Campuses
UConn Health

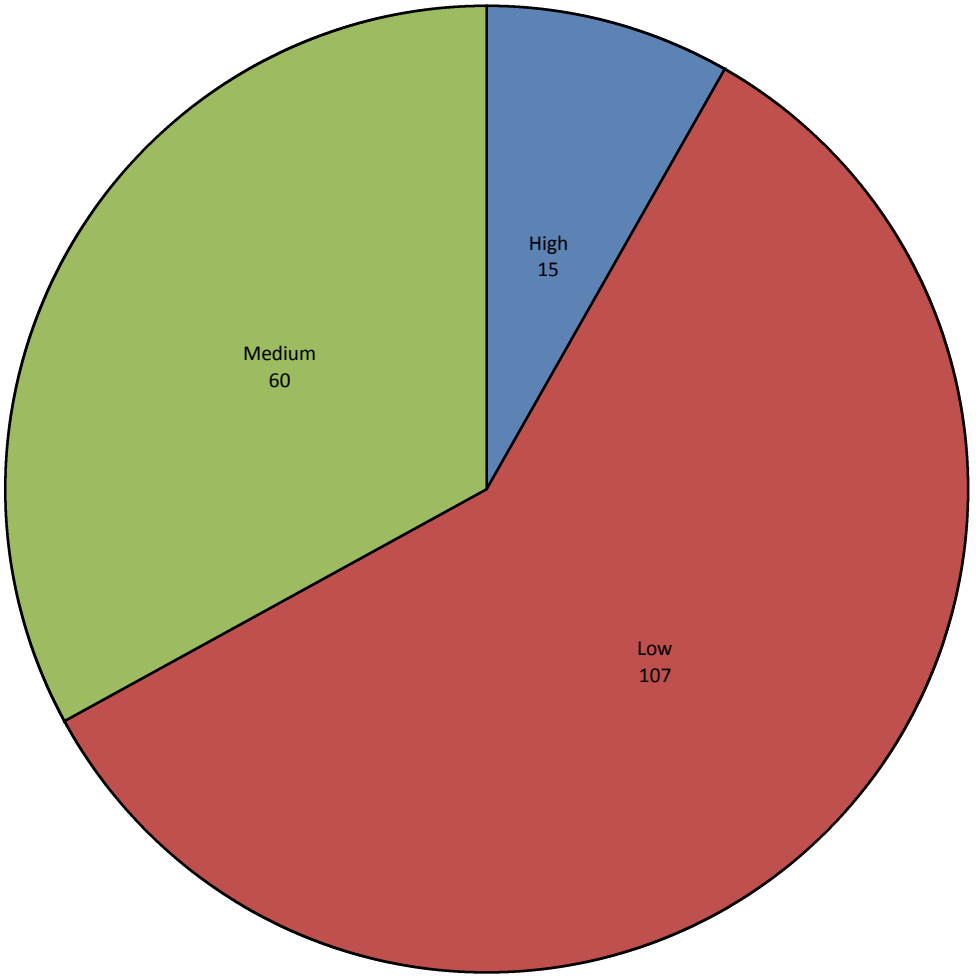
High Risk Overdue by Functional Area



Implemented



Open OverDue Items by Risk Level



University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Audit Finding Rating Definitions

Low

Meaningful reportable issue for client consideration that in the Auditor's judgment should be communicated in writing. The finding results in minimal exposure to the University or UConn Health and has little or no impact on the University's or UConn Health's compliance with laws and regulations. The issues related to this control weakness will typically not lead to a material error.

Medium

Significant exposure to the area under review within the scope of the audit. The finding results in the potential violation of laws and regulations and should be addressed as a priority to ensure compliance with University's or UConn Health's policies and procedures. The significance of the potential errors related to this control weakness makes it important to correct.

High

Significant exposure to the University or UConn Health that could include systemic University or UConn Health wide exposure. The finding could result in a significant violation of laws and regulations and should be viewed as a highest priority which the University or UConn Health must address immediately.

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 5

THIS PAGE INTENTIONALLY LEFT BLANK

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Storrs Audit Plan – FY18

Status Codes: *=Required

AUDIT	STATUS
RESEARCH/GENERAL COMPLIANCE	
Controlled Substances / Restricted Purchases in Research – evaluate the internal controls surrounding advance authorization for use of controlled substances and compliance with applicable regulations for purchase, use, storage, tracking and disposal of these materials	In Process
CT Regenerative Medicine Research Fund Grants FY17 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	In Process
CT Bioscience Innovation Fund Grants FY16 and FY17 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	In Process
Faculty Consulting FY2017 (07/01/16-06/30/17)* – evaluate the effectiveness of the established faculty consulting activity approval and oversight procedures and compliance with state regulations and University policies and procedures	
Sub-Recipient Monitoring - evaluate the procedures for monitoring payments and activities of sub-recipients to verify compliance with University policies and procedures, and federal regulations	
Effort Reporting - evaluate whether internal controls are adequate to properly manage, account for, monitor, and report salary and wage costs charged to sponsored projects in compliance federal regulations and determine whether salaries and wages charged to sponsored projects are allowable, allocable, and reasonable based on federal cost principles	
Debarment, Sanctions and Exclusions – assess compliance with federal debarment and suspension regulations that restrict awards, subawards, and contracts with certain parties that are debarred, suspended, or otherwise excluded from or ineligible for participation in Federal assistance programs or activities	
Undergraduate Student Safety Training – evaluate the distribution of course specific materials relevant to safety for the various academic content areas through HuskyCT; assess completion of undergraduate student safety training included in applicable classes for which the instructor must “grade” as completed (or not) the student’s class grade in the Student Administration System; review the Student Worker Safety training completed as an on-boarding process	
Center for Students With Disabilities – evaluate policies and procedures for determining and providing reasonable accommodations on campus to students with disabilities; verify compliance with the requirements of the applicable subtitle and title of the Americans with Disabilities Act; identify gaps or areas for improvement	
Tax Exempt Bond Compliance – evaluate compliance with master indenture terms; University policies and procedures; and relevant state and federal regulations	

DRAFT

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Storrs Audit Plan – FY18

Status Codes: *=Required

AUDIT	STATUS
Federal Grant Expenditures – review expenditures charged to federal grants and contracts for compliance with the federal regulations contained in the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards	
CT Regenerative Medicine Research Fund Grants FY18 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	
CT Bioscience Innovation Fund Grants FY18 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	
CONSTRUCTION/UCONN 2000	
Construction Life Cycle Review(s) – continuous monitoring initiation through close out – verify compliance with federal, state and University requirements, reasonableness of construction costs, and agreement with terms and conditions of the contract for:	
• Energy Savings Company (ESCO) Project – Report 2	In Process
• Hartford Campus Relocation – Report 2	In Process
• Innovative Partnership Building (IPB) – Report 2	
• Engineering Building	
Agreed upon Procedures non UConn 2000 Construction Expenditures – assess construction project expenditures for compliance with project budgets, cost allocations, agreements and applicable contracts, generally accepted accounting principles, and state statutes	
Unifier Workflow Review (Greensheet replacement) – assess the effectiveness of management's construction project lifecycle system for compliance with University policies and procedures, state and federal regulations, and internal controls over payment processing	
INFORMATION TECHNOLOGY (IT)	
CLAS IT (Selected IT Department) - assess general controls and compliance with IT security policies	In Process
Cogeneration Power Plant – review of general IT controls used to manage and secure systems	
Public Safety Systems – review of general IT controls used to manage and secure systems	
Web Application – assess the security of University hosted web applications	

DRAFT

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Storrs Audit Plan – FY18

Status Codes: *=Required

AUDIT	STATUS
Incident Response – review of processes used to respond to security breaches	
School of Pharmacy – review of general IT controls used to manage and secure systems	
Disaster Recovery/Business Continuity – assess the effectiveness of business continuity/disaster recovery preparedness, planning and testing to determine whether the plan is effective and in line with the University's objectives	
FINANCIAL & OPERATIONAL	
Purchasing Contract Management - assess the internal controls surrounding the contracts related to the purchase of goods and services to verify compliance with applicable state and federal regulations and University policies and provide for effective and efficient operations	In Process
Building / Room Access Controls - evaluate the effectiveness of internal controls implemented to selectively restrict access to various physical locations to authorized individuals, deter intruders, and protect the University community and resources	In Process
School of Law Financial Aid - review of financial aid operations to assess effectiveness of internal controls and operational efficiencies, and compliance with applicable regulations and institutional policies and procedures	In Process
Fire Marshall Building Inspection Office - review of business operations to assess compliance with applicable regulations and institutional policies and procedures, effectiveness of internal controls and operational efficiencies	In Process
Foundation Receipts and Disbursement FY17* - examine Foundation disbursements for compliance with University policies related to the disbursement of Foundation funds and gifts to the Foundation for compliance with Connecticut General Statute (CGS) Section 4-37 et seq., and University policies concerning the deposit of funds at the Foundation	In Process
Software Licensing - assess departmental controls over the procurement of software licenses, compliance with license agreements and practices related to software upgrades and maintenance	In Process
Student Employment – assess the internal controls in the student employment function to verify compliance with state / federal regulations and University policies and provide for effective and efficient operations	
Special Payroll – review payments to independent contractors / individuals for compliance with employment regulations; analyze payments to faculty and staff in excess of base institutional salary; review internal controls and approval process	

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Storrs Audit Plan – FY18

Status Codes: *=Required

AUDIT	STATUS
Events and Conference Services – review of business operations to assess compliance with applicable state regulations and institutional policies and procedures, effectiveness of internal controls and operational efficiencies	
Asset Management (Including Controllable Property) - assess management's asset tracking system to verify compliance with policies and procedures, & University, state and federal regulations on maintenance, disposal, safeguarding and reporting assets	
Selected Center/Institute/Department including research administration - evaluate the effectiveness of management oversight procedures and determine whether appropriate financial and programmatic controls have been established to verify compliance with State and Federal regulations and university policies and procedures	
Facilities Landscape Operations - review of business operations to assess compliance with applicable regulations and institutional policies and procedures, effectiveness of internal controls and operational efficiencies	
Procurement Card – assess whether existing internal controls detect and/or prevent significant errors or irregularities in a timely manner, administration of the Procard program is efficient, and compliance with University policies and procedures	
Business Expense Disbursements (Non-travel) – assess the internal controls surrounding disbursement requests submitted by departments after the liability for goods and/or services was incurred; determine the extent to which these disbursements by-pass the controls established by the Purchase Order process	
Selected Contract Review – review payment requests for compliance with contractual terms, conditions and statements of work, and University policies and procedures	
Tech Transfer – review current business operations related to patent expenses to assess compliance with institutional policies and procedures; applicable state and federal regulations; and the effectiveness of internal controls	
Innovation Partnership Building (IPB) Business Operations – review IPB business operations related to University / Industry partnerships, including the financial model to achieve self-sufficiency, spin-off creation, intellectual property ownership policies, access to University resources and cost allocation	
Student Clinical Placements – evaluate clinical placements including safety, physical setting, level of supervision and fulfillment of fulfillment of stated plan	
ATHLETICS	
Selected NCAA Compliance/Operational Areas: Recruiting; Ticketing; Equipment	

DRAFT

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Storrs Audit Plan – FY18

Status Codes: *=Required

AUDIT	STATUS
NCAA Division 1-A Membership Requirements* - annual agreed upon procedures to assist in evaluating whether NCAA Division I membership requirements have been met	
OTHER	
Risk Assessment	Ongoing
Follow-up Audit Activities	Ongoing
Contingencies/Special Projects/Investigations/Consulting	Ongoing

Submitted to the Joint Audit & Compliance Committee at their September 14, 2017 Meeting

DRAFT

THIS PAGE INTENTIONALLY LEFT BLANK

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

UConn Health Audit Plan – FY18

Status Codes: *=Required, **=Post HealthONE Implementation

AUDIT	STATUS
CLINICAL: FINANCIAL / OPERATIONAL / COMPLIANCE	
Cancer Center Revenue Cycle (registration through collections processes) – evaluate the effectiveness of policies and procedures related to achieving complete, accurate and timely processing of documentation and transactions and compliance with governmental regulations and the reimbursement requirements of various payers	In Process
Radiation Oncology – evaluate radiation oncology services provided at JDH under provider contract including clinical oversight of services, the development and implementation of policies and procedures, completion of documentation and charge capture	In Process
Dental Charge Capture and Billing - new system for capturing charges and billing; evaluate the effectiveness of policies and procedures related to achieving compliance with governmental regulations, internal policy and payer reimbursement requirements	In Process
Deaf and Hard of Hearing Services – quarterly audits required by JDH voluntary agreement with the United States Attorney's Office for the District of Connecticut and the U.S. Department of Health and Human Services Office for Civil Rights (OCR)	In Process
Inpatient Stays** - decision to admit and supporting documentation including an assessment of compliance with internal policy and government regulations	
Lab Utilization – utilize data analytics (ACL) and chart review to assess the medical necessity and utilization of lab services	
Urgent Care** - assess whether services billed by two relatively new Urgent Care practice locations were ordered, provided and documented in compliance with governmental regulations, payer requirements and the associated charges are complete, accurate and timely	
JDH/UMG Outpatient Billing for CMHC - evaluate the internal controls surrounding JDH/UMG billing practices for outpatient services provided to DOC inmates and billed to CMHC to verify the accuracy, completeness and timeliness of billings	
CMHC site review – comprehensive review of clinical operations at one selected facility to evaluate the effectiveness of internal controls to verify compliance with state and federal regulations, contractual requirements and internal policies and procedures	
JDH Controlled Substance Monitoring – Assess the policies and procedures surrounding controlled substance security, access and monitoring	
Operating Room** – assess whether services are provided, documented and billed in accordance with internal policy and governmental regulations	

DRAFT

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

UConn Health Audit Plan – FY18

Status Codes: *=Required, **=Post HealthONE Implementation

AUDIT	STATUS
UMG Medication Inventory and Charge Capture – evaluate the use of the Pyxis medication stations in UMG practices to assess internal controls and procedures surrounding inventory and charge capture	
HealthONE Pre-Implementation Chargemaster - evaluate the completeness and accuracy of the chargemaster in select UConn Health departments	
RESEARCH / GENERAL COMPLIANCE	
Clinical Trial Billing – assess the controls surrounding clinical trials billing including the identification of research subjects and the proper determination of billable services	In Process
Mandatory Training Compliance – assess whether employees are properly assigned mandatory trainings, completion of such trainings is monitored and appropriate action is taken for non-compliance	In Process
Controlled Substances/Restricted Purchases in Research - evaluate the internal controls surrounding advance authorization for use of controlled substances and compliance with applicable regulations for purchase, use, storage, tracking and disposal of these materials	In Process
CT Regenerative Medicine Research Fund Grants FY17 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	In Process
CT Bioscience Innovation Fund Grants FY16 and FY17 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	In Process
Federal Financial Aid - review of financial aid operations to assess effectiveness of internal controls and operational efficiencies, and compliance with applicable federal regulations and institutional policies and procedures	In Process
Grant, Sub Recipient Monitoring - evaluate the procedures for monitoring payments and activities of sub-recipients to verify compliance with UConn Health policies and procedures, and federal regulations	
Effort Reporting - evaluate whether internal controls are adequate to properly manage, account for, monitor, and report salary and wage costs charged to sponsored projects in compliance with federal regulations and determine whether salaries and wages charged to sponsored projects are allowable, allocable, and reasonable based on federal cost principles	
Faculty Consulting (07/01/16-06/30/17)* - evaluate the effectiveness of the established faculty consulting activity approval and oversight procedures and compliance with state regulations and University policies and procedures	
CT Regenerative Medicine Research Fund Grants FY18 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

UConn Health Audit Plan – FY18

Status Codes: *=Required, **=Post HealthONE Implementation

AUDIT	STATUS
CT Bioscience Innovation Fund Grants FY18 Expenditures* – the Program requires an annual audit to verify that program expenditures comply with the terms of each Agreement	
FINANCIAL / OPERATIONAL	
Transportation and Parking - review of business operations to assess compliance with applicable regulations and institutional policies and procedures, effectiveness of internal controls and operational efficiencies	In Process
Workers Compensation – verify that injuries are properly reported to human resources and the third party administrator, that human resources coordinates all employment aspects of lost time claims including wage audits, timecard instructions and return to work and the manager appropriately assigns the employee based upon their work status	
Co-Pay and Deductibles- evaluate the process for collecting co-pays and deductibles at selected JDH and UMG practice locations to determine the completeness, accuracy and timeliness of collections	
HealthONE Pre-Implementation Integration Testing- assess the completeness, accuracy and timeliness of the transfer of data from selected existing clinical systems to HealthONE	
Graduate Students Abroad – evaluate the policies and procedures surrounding medical, dental and graduate students abroad including accommodations, oversight, programing, and provisions for health and safety	
JDH and UMG Uncollectable Accounts – assess policies and procedures for patient accounts receivable write-offs	
Medicare Cost Reporting - examine of financial transactions and statistical data to test the JDH compliance with applicable Medicare regulations instructions	
Contract Monitoring - Review of services provided under a selected outsourced UConn Health service contract	
Fixed Asset Management – assess management's asset tracking system to verify compliance with policies and procedures, & University, state and federal regulations on maintenance, disposal, safeguarding and reporting assets	
Building Access Security – assess procedures for granting and monitoring building access UConn Health facilities	
Student Clinical Placements – Evaluate clinical placements including safety, physical setting, level of supervision and fulfillment of stated plan	

DRAFT

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

UConn Health Audit Plan – FY18

Status Codes: *=Required, **=Post HealthONE Implementation

AUDIT	STATUS
CONSTRUCTION / UCONN 2000	
Construction Life Cycle Reviews of Selected Projects (includes change order monitoring): • Hospital Renovation	
INFORMATION TECHNOLOGY (IT)	
Pharmacy Systems IT – assess general It controls used to manage and secure systems	In Process
HealthONE Implementation – review of governance throughout the EPIC implementation • Execution Phase – In Process	In Process
HealthONE Pre-Implementation Integration Testing– assess adequacy of controls related to the confidentiality, availability and integrity of data for selected systems that interface with EPIC	
Public Safety Systems - assess general IT controls used to manage and secure systems	
Mobile Devices – review of processes used for securing data stored, accessed or processed using mobile devices	
Wireless Network – review of Wireless network administration processes and configurations for compliance with industry standards and UConn Health policy	
Research Data Security - assess general controls and compliance with IT security policies	
OTHER	
Risk Assessment	Ongoing
Follow-up Audit Activities	Ongoing
Contingencies/Special Requests/Investigations/Consulting	Ongoing

Submitted to the Joint Audit & Compliance Committee at their September 14, 2017 Meeting

DRAFT

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 6

THIS PAGE INTENTIONALLY LEFT BLANK

University of Connecticut & UConn Health

Joint Audit & Compliance Committee Meeting

Status of External Audit Projects

Vendor	Area	Scope	Comments
Marcum, LLP	UConn Health	Audits of the John Dempsey Hospital and Dental Clinics (Clinical Programs Fund), including the OHCA filings, UConn Medical Group (UMG) and the University of Connecticut Health Center Finance Corporation for FY2017, 2018 and 2019.	The JACC approved the appointment of Marcum for FY2017, 2018 and 2019 at their February meeting. FY2017 Engagement is underway.
CohnReznick, LLP	UConn & UConn Health	Annual audit of UCONN 2000 named projects substantially completed and deferred maintenance projects with designated budgets substantially completed in FY2016, 2017, and 2018, and annual agreed upon procedures performed on total UCONN 2000 expenditures (named projects, deferred maintenance and equipment) for FY2016, 2017, and 2018.	The request for approval for the FY2017 engagement fee will be brought to the JACC at the September 2017 meeting.
BKD	UConn Athletics	NCAA agreed upon procedures performed on all revenues, expenses, and capital expenditures for or on behalf of the University's Athletics Program for FY2016, 2017, and 2018.	The request for approval for the FY2017 engagement fee will be brought to the JACC at the September 2017 meeting.

THIS PAGE INTENTIONALLY LEFT BLANK

UCONN
UNIVERSITY OF CONNECTICUT

TO: Members of the Joint Audit and Compliance Committee

FROM: Cheryl Chiaputti
Director of Audit Services

DATE: September 14, 2017

SUBJECT: FY17 Fee Notification - NCAA Financial Agreed Upon Procedures

RECOMMENDATION

On September 27, 2016 the Joint Audit and Compliance Committee (JACC) approved a 3-year contract with the accounting firm, BKD, to perform and report on agreed-upon procedures in compliance with The National Collegiate Athletic Association (NCAA) Financial Reporting Requirements for the fiscal years ending June 30, 2016, 2017 and 2018.

The Office of Audit, Compliance and Ethics seeks JACC approval of the BKD fees proposed for the second year of the contract, which covers the fiscal year ended, June 30, 2017. The proposed fee, totaling $27,208.48, includes $26,162 for performing agreed-upon procedures, plus a 4% administrative fee of $1,046.48.

The fee for third year of the contract, covering the fiscal year ending June 30, 2018, may increase based on hourly rate increases in an amount not to exceed the appropriate Consumer Price Index, and/or changes in duties or responsibilities due to new rules, regulations and accounting or auditing standards.

BACKGROUND

NCAA Constitution 3.2.4.15 and 3.2.4.15.1 require that "*an institution shall submit financial data detailing operating revenues, expenses and capital related to its intercollegiate athletics program to the NCAA on an annual basis in accordance with the financial reporting policies and procedures…The report shall be subject to annual agreed-on verification procedures approved by the membership (in addition to any regular financial reporting policies and procedures of the institution) and conducted by a qualified independent accountant who is not a staff member of the institution and who is selected by the institution's chancellor or president or by an institutional administrator from outside the athletics department designated by the chancellor or president. The independent accountant shall verify the accuracy and completeness of the data prior to submission to the institution's chancellor or president and the NCAA. The institution's chancellor or president shall certify the financial report prior to submission to the NCAA.*"

THIS PAGE INTENTIONALLY LEFT BLANK

September 6, 2017

Mr. Scott Jordan
Executive Vice President for Administration
and Chief Financial Officer
University of Connecticut
352 Mansfield Road, Unit 1122
Storrs, CT 06269-1122

Draft

9/6/2017

We are pleased to confirm the arrangements of our engagement and the nature of the services we will provide to the **UNIVERSITY OF CONNECTICUT** (University) (specified party). These services will be performed pursuant to that certain Purchasing Agreement for the National Collegiate Athletic Association (NCAA) Financial Auditing Services entered in by and between the University and **BKD, LLP** ("BKD" or "we"), dated as of October 10, 2016 (the "Agreement"). This letter, together with any attachments to this letter, shall constitute SOW #2 for purposes of the Agreement (this "SOW #2").

ENGAGEMENT OBJECTIVES AND SCOPE

We will apply the procedures enumerated in the attachment to this letter/SOW #2 to assist the DRAUniversity in complying with the NCAA Bylaw 3.2.4.15 for the year ended June 30, 2017. The sufficiency of these requested procedures is solely the responsibility of the specified parties listed above. Consequently, we make no representation regarding the sufficiency of the procedures for the purpose for which the report has been requested or for any other purpose.

Because we have not been engaged to conduct an examination or review, we will not express an opinion or conclusion, respectively, on specified elements, accounts or items referred above. In addition, we have no obligation to perform any procedures beyond those listed in the attachment to this letter/SOW #2.

OUR RESPONSIBILITIES

We will conduct our agreed-upon procedures engagement in accordance with attestation standards established by the American Institute of Certified Public Accountants.

Our engagement will not include a detailed examination of all transactions and cannot be relied upon to disclose misstatements that might exist due to error, fraud and illegal acts. However, we will inform you of any such matters, if material, that come to our attention.

We will submit a report summarizing the procedures performed and the results of those procedures. The report is intended solely for the information and use of the University and is not intended to be and should not be used by anyone other than these specified parties.

Draft

Mary McKinley, partner, is responsible for supervising the engagement and authorizing the signing of the report or reports. If, for any reason, we are unable to complete our procedures, we may decline to issue a report as a result of this engagement.

9/6/2017

YOUR RESPONSIBILITIES

It should be understood that the management of the University is responsible for the proper recording of transactions and preparation of financial statements. Management of the University is also responsible for establishing and maintaining effective internal control over financial reporting and setting the proper tone, creating and maintaining a culture of honesty and high ethical standards and establishing appropriate controls to prevent, deter and detect fraud and illegal acts. Management of the University is also responsible for identifying and ensuring compliance with laws and regulations applicable to its activities and for establishing and maintaining effective internal control over compliance.

To facilitate our engagement, management is responsible for providing a written assertion about the measurement or evaluation of the subject matter against the criteria, supplying us with all necessary information and for allowing us access to personnel to assist in performing our services. It should be understood that management is responsible for the accuracy and completeness of these items, for the subject matter and the written assertion(s) referred to above and for selecting and determining the appropriateness of the criteria.

At the conclusion of our engagement, management will provide to us a letter confirming the availability of this information, the written assertion(s), certain representations made during the engagement and acknowledging certain responsibilities outlined in this engagement letter.

OTHER SERVICES

We may perform other services for you not covered by this engagement letter. You agree to assume full responsibility for the substantive outcomes of those services, including any findings that may result. You also acknowledge those services are adequate for your purposes, and you will establish and monitor the performance of those services to ensure they meet management's objectives. Any and all decisions involving management responsibilities related to those services will be made by you, and you accept full responsibility for such decisions. We understand you will designate a management-level individual to be responsible and accountable for overseeing the performance of those services, and you will have determined this individual is qualified to conduct such oversight.

ENGAGEMENT FEES

The fees for our service under this letter/SOW #2 will be $26,162. In addition, you will be billed an administrative fee of 4% to cover items such as copies, postage and other delivery charges, supplies, technology-related costs such as computer processing, software licensing, research and library databases and similar expense items in the manner described in the Agreement.

.

Our fees are based upon the understanding that the personnel of the University will be available to assist us. Assistance is expected to include:

Draft
9/6/2017

- Preparing schedules and analysis
- Responding to inquiries
- Pulling selected documents from files
- Helping to resolve any difficulties encountered

We will provide you with a detailed list of assistance and schedules required and the date such assistance and schedules are to be provided before the engagement begins. All schedules should be provided in electronic form unless indicated otherwise.

Our engagement fee does not include any time for post-engagement consultation with your personnel or third parties, inquiries from regulators or testimony or deposition regarding any subpoena. Charges for such services will be billed separately.

OTHER ENGAGEMENT MATTERS AND LIMITATIONS

Our workpapers and documentation retained in any form of media for this engagement are the property of BKD. We can be compelled to provide information under legal process. In addition, we may be requested by regulatory or enforcement bodies to make certain workpapers available to them pursuant to authority granted by law or regulation. You agree that we have no legal responsibility to you in the event we provide such documents or information.

This engagement letter/SOW #2, along with the University's general terms and conditions, request for proposal, along with BKD's complete technical and financial proposal dated June 8, 2016, to RFP No. KA051016 and contract number UC-KA051016, represents the entire agreement regarding the services described herein and supersedes all prior negotiations, proposals, representations or agreements, written or oral, regarding these services. It shall be binding on heirs, successors and assigns of the University and BKD.

You agree you will not modify documents provided by BKD to you for internal use or for distribution to third parties. You also understand that we may on occasion send you documents marked as draft and understand that those are for your review purpose only, should not be distributed in any way and should be destroyed as soon as possible.

Any time you intend to reference our firm name in any manner in any published materials, including on an electronic site, you agree to provide us with draft materials for our review and approval before publishing or posting such information.

BKD is a registered limited liability partnership under Missouri law. Under applicable professional standards, partners of **BKD, LLP** have the same responsibilities as do partners in a general accounting and consulting partnership with respect to conformance by themselves and other professionals in BKD with their professional and ethical obligations. However, unlike the partners in a general partnership, the partners in a registered limited liability partnership do not have individual civil liability, directly or indirectly, including by way of indemnification, contribution, assessment or otherwise, for any debts, obligations or liabilities of or chargeable to the registered limited liability partnership or each other, whether arising in tort, contract or otherwise.

Draft
9/6/2017

We are an independent accounting firm allowed to use the name "Praxity" in relation to our practice. We are not connected by ownership with any other firm using the name "Praxity," and we will be solely responsible for all work carried out by us on your behalf. In deciding to engage us, you acknowledge that we have not represented to you that any other firm using the name "Praxity" will in any way be responsible for the work that we do.

We will be pleased to discuss this letter/SOW #2 with you at any time and look forward to the opportunity of serving you. If the above arrangements are acceptable to you, please sign the enclosed copy of this letter and return it to us. If the signed copy you return to us is in electronic form, you agree that such copy shall be legally treated as a "duplicate original" of this agreement.

BKD, LLP

BKD, LLP

The services and arrangements described in this letter are in accordance with our understanding and are acceptable to us.

UNIVERSITY OF CONNECTICUT

BY _____
Mr. Scott Jordan
Executive Vice President for Administration
and Chief Financial Officer

DATE _____

University of Connecticut

Agreed-Upon Procedures

Attachment to Engagement Letter Dated September 6, 2017

For the Year Ended June 30, 2017

We will obtain the statement of revenue and expenses (Statement), as prepared by the administration of the University of Connecticut (University). We will compare the amounts disclosed in the Statement to the University's general ledger. For relevant revenue and expense categories, we will perform the following:

Draft

1. We will compare the amount of each operating revenue and expense category reported in the Statement during the year ended June 30, 2017, to supporting schedules provided by the administration of the University. We will recalculate the totals per the supporting schedules. The following revenue reporting categories are expected to be less than 4.0% of total revenues and the following expense categories are expected to be less than 4.0% of total expenses, and therefore, no procedures will be required for these categories:

9/6/2017

Revenues

a. Direct state or other government support revenue
b. Indirect institutional support revenue – athletic facilities debt service, lease and rental fees
c. Guarantees
d. In-kind revenue
e. Media rights
f. National Collegiate Athletic Association (NCAA) distributions
g. Compensation and benefits provided by a third party
h. Program sales, concessions, novelty sales and parking
i. Sports camp revenues
j. Athletics restricted endowment and investments income
k. Other operating revenues
l. Bowl revenues

Expenses

m. Guarantees expense
n. Coaching salaries, benefits and bonuses paid by a third party
o. Support staff/administrative compensation, benefits and bonuses paid by a third party
p. Severance
q. Recruiting

r. Equipment, uniforms and supplies

s. Fund raising, marketing and promotion

t. Sports camp expenses

u. Spirit groups expense

v. Athletic facilities debt service, leases and rental fees

w. Direct overhead and administrative expenses

x. Indirect institutional support expense

y. Medical expenses and medical insurance

z. Memberships and dues expense

aa. Student-athlete meals (nontravel)

bb. Bowl expenses

Draft 9/6/2017

Other Reporting Items

cc. Transfers to the University

2. We will inquire of the University's management whether there were any revenues, expenses or other reporting items listed above during the year ended June 30, 2017.

3. We will compare each revenue and expense amount to prior year amounts and current year budget estimates. We will obtain and document an understanding of any significant variances (significant defined as a 10% change) from prior year amounts or current year budget estimates. We will report the analysis in the agreed-upon procedures report.

Operating Revenues

4. Ticket sales – We will compare the detail of tickets sold, complementary tickets provided and unsold tickets per the supporting schedules during the year ended June 30, 2017, to the related revenue reported in the Statement. We will also select a sample of 20 batches of tickets and agree them to the related cash deposit report, to the Paciolan System (season tickets) or the Ticket Master System (single game tickets), the Kuali Financial System (KFS) and to the Statement.

5. Student fees – We will compare the amount of student fees approved and documented in board materials for the year ended June 30, 2017, with the amount per the Statement. We will obtain and document an understanding of the University's methodology for allocating student fees to the Division of Athletics.

University of Connecticut

Agreed-Upon Procedures

Attachment to Engagement Letter Dated September 6, 2017

For the Year Ended June 30, 2017

6. Direct institutional support – We will compare the direct institutional support recorded by the University during the reporting period with the institutional supporting budget transfers documentation and other corroborative supporting documentation and recalculate totals.
7. Transfers back to institution – We will compare the transfers back to the University per the Statement with transfers back to the University from the Division of Athletics and recalculate totals.
8. Contributions – We will compare supporting documentation for any contributions received directly from the Division of Athletics to contributions per the Statement. We will inquire of University management whether there were any single contributions that constituted 10% or more of all contributions received during the year ended June 30, 2017, and if so, we will obtain supporting documentation for each such contribution.
9. Conference distributions – We will obtain and read agreements related to the University's conference distributions and participation in revenue from tournaments during the reporting period to gain an understanding of the relevant terms and conditions. We will obtain a supporting schedule relating to the University's allocation of revenues for regular season football television, American Athletic Conference football championship game, post-season bowl games, regular season basketball games, the American Athletic Conference basketball tournament and the NCAA basketball tournament. We will recalculate the totals per the supporting schedule and agree the related revenues to those per the Statement. We will compare the amount per the supporting schedule for American Athletic Conference distributions to correspondence from the American Athletic Conference.
10. Royalties, licensing, advertisements and sponsorships – We will obtain all agreements related to the University's participation in revenues from royalties, licensing, advertisements and sponsorships during the year ended June 30, 2017, and gain an understanding of the relevant terms and conditions. We will agree the terms of the IMG contract to the supporting schedule of such revenues and agree the supporting schedule to the Statement.

Draft
9/6/2017

University of Connecticut

Agreed-Upon Procedures

Attachment to Engagement Letter Dated September 6, 2017

For the Year Ended June 30, 2017

Draft
9/6/2017

Operating Expenses

11. Athletic student aid – We will select a sample of students (no less than 10% of the total student-athletes for institutions that have used NCAA's compliance assistant (CA) software to prepare athletic aid detail with a maximum of 40 and 20% of total student-athletes for institutions that have not used NCAA's compliance assistant software, with a maximum sample size of 60) from the listing of University student aid recipients. We will obtain individual student account detail for each selection and compare total aid to data per the NCAA's CA software or the NCAA's Membership Financial Reporting System. We will also compare the following per the student's account detail to data per the NCAA's CA software or the NCAA's Membership Financial Reporting System:

    a. The equivalency value for each student-athlete in all sports, including head-count sports, needs to be converted to a full-time equivalency value. The full-time equivalency value is calculated using the athletic grant amount reported on the squad list as the numerator and the full grant amount, which is the total cost of tuition, fees, books, room and board for an academic year as the denominator. If using the NCAA's CA software, this equivalency value should already be calculated and labeled as "Rev. Dist. Equivalent Award" in the system.

    b. If an athlete participates in more than one sport, the Rev. Dist. Equivalent Award can only be included in one sport. Note: NCAA CA software will place an asterisk by the student-athlete within the sport that is not countable towards grants-in-aid revenue distribution.

    c. All equivalency calculation should be rounded to two decimal places. Note: The NCAA CA software and the online summary form will automatically round to two decimal places.

    d. The full grant amount should be the full cost of tuition for an academic year, not semester. The "Period of Award" column on the NCAA CA squad list can identify those student-athletes receiving aid for a particular semester.

    e. If a sport is discontinued and the athletic grant(s) are still being honored by the institution, the grant(s) are included in student-athlete aid for revenue distribution purposes.

    f. Student-athletes receiving athletic aid who have exhausted their athletic eligibility or are inactive due to medical reasons should be included in the student-athlete aid total and correctly noted on the squad list.

    g. Only athletic grants awarded in sports in which the NCAA conducts championship competitions, emerging sports for women and FBS football should be included in the calculations.

h. If a selected student received a Pell Grant, the value of the grant should not be included in the calculation of equivalencies or the total dollar amount of student athletics aid expense for the University.

i. If a selected student received a Pell Grant, the student's grant should not be included in the total number and total value of Pell Grants reported for Revenue Distribution purposes in the NCAA Membership Financial Reporting System.

Draft 9/6/2017

12. Coaching salaries, benefits and bonuses paid by the University and related entities – We will obtain a listing of coaches employed by the University during the year ended June 30, 2017. We will select a sample of four coaches' contracts that include football and men's and women's basketball and one other sport. We will agree the financial terms and conditions of each selection to the related coaching salaries, speaking fees, automobile stipends and bonuses recorded by the University in the summary payroll registers and in the Statement during the year ended June 30, 2017. We will inquire of University management whether there were any coaches employed by related entities.

13. Support staff/administrative salaries, benefits and bonuses paid by the University and related entities – We will select a sample of four athletic support staff/administrative personnel employed by the University. We will obtain supporting salary information per the KFS system for each selection and agree the information to supporting schedules and to the expense recorded by the University in the Statement. We will inquire of University management whether there were any coaches employed by related entities.

14. Team travel – We will obtain an understanding of the University's team travel policies and compare them to the NCAA's policies. We will obtain supporting schedules for team travel expenses and compare them to the Statement.

15. Game expenses – We will obtain and agree supporting schedules for game expenses to the Statement. We will select two of the largest contracts and agree the amounts per the contracts to the supporting schedules.

16. Other operating expenses and transfers to the University – We will obtain the supporting schedules for other operating expenses and transfers to the University to the Schedule. We will select a sample of one expense and compare the selected item to invoices and supporting schedules and agree the information to expense recorded by University management.

Additional Minimum Procedures

We will compare and agree the sports sponsored reported in the NCAA Membership Financial Reporting System to the squad lists of the University. If there is a discrepancy in the sports sponsored between the NCAA Membership Financial Reporting System and the squad lists, we will inquire of the University's management about the discrepancy and document the response.

University of Connecticut

Agreed-Upon Procedures

Attachment to Engagement Letter Dated September 6, 2017

For the Year Ended June 30, 2017

We will obtain the University's Sports Sponsorship and Demographics Forms Report for the reporting year. We will compare the countable sports reported by the University with the minimum requirements set forth in Bylaw 20.9.6.3 for the number of contests and the number of participants in each contest that is counted toward meeting the minimum contest requirement. We will note whether the University has reported these sports as countable for revenue distribution purposes within the NCAA Membership Financial Reporting System.

Draft

We will agree the total number of Division I student-athletes who, during the academic year, received a Pell Grant award (*e.g.*, Pell Grant recipients on Full Grant-in-Aid, Pell Grant recipients on Partial Grants-in-Aid and Pell Grant recipients with no Grants-in-Aid) and the total value of these Pell Grants reported in the NCAA Membership Financial Reporting System to a report, generated from the University's financial aid records, of all student-athlete Pell Grants.

9/6/2017

Agreed-Upon Procedures Related to Affiliated and Outside Organizations

17. The University will identify all intercollegiate athletics-related outside organizations incurring expenses on behalf of the Division of Athletics, which were not under University's accounting control. We will obtain statements of expenses incurred on behalf of the Division of Athletics. We will agree the amounts reported in those statements to inclusion in the Statement.
18. We will obtain the audited financial statements of the University of Connecticut Foundation, Inc. and the related internal control observations letter and the compiled statements of the UConn Club as of and for the year ended June 30, 2017, noting any matters that would significantly affect the Statement.

Minimum Agreed-Upon Procedures Program for Other Reporting Items

19. We will inquire of the University's management whether there were excess transfers to the University or conference realignment expenses.
20. We will inquire of the University's management whether there was any athletics-related debt.
21. We will inquire of the University's management whether there was any institutional debt.
22. We will inquire of the University's management whether there were any athletics-dedicated endowments.
23. We will inquire of the University's management whether there were any institutional endowments.
24. We will inquire of the University's management whether there were any athletics-related capital expenditures.

UCONN
UNIVERSITY OF CONNECTICUT

TO: Members of the Joint Audit & Compliance Committee

FROM: Cheryl Chiaputti
Director of Audit Services

DATE: September 14, 2017

SUBJECT: FY17 Fee Notification – UConn 2000 Auditors CohnReznick LLP

RECOMMENDATION

On September 27, 2016 the Joint Audit and Compliance Committee (JACC) approved a 3-year contract with the accounting firm, CohnReznick LLP to perform and report on UCONN 2000 expenditures for the 2016 through 2018 fiscal years.

The Office of Audit, Compliance and Ethics seeks JACC approval of the CohnReznick LLP fees proposed for the second year of the contract, which covers the fiscal year ended, June 30, 2017. The proposed fee, totaling $150,000, includes $104,500 for performing an audit of the construction expenditures of substantially completed UConn 2000 projects for the year ended June 30, 2017 and $45,500 for performing agreed-upon procedures detailed in Sections A and B of the engagement letter.

BACKGROUND

Section 10a-109z of the Connecticut General requires that *"the Board of Trustees for the University of Connecticut shall select and appoint independent auditors, as defined in subdivision (7) of section 4-230, to annually conduct an audit of any project of UConn 2000, as defined in subdivision (25) of section 10a-109c. Such audit shall review invoices, expenditures, cost allocations and other appropriate documentation in order to reconcile project costs and verify conformance with project budgets, cost allocation agreements and applicable contracts."*

THIS PAGE INTENTIONALLY LEFT BLANK

COHNREZNICK
ACCOUNTING • TAX • ADVISORY

CohnReznick LLP
350 Church Street
Hartford, CT 06103-1136

Main: 959-200-7000
Fax: 959-200-7300
cohnreznick.com

July 13, 2017

DRAFT

Mr. Scott Jordan
Chief Financial Officer
University of Connecticut
362 Mansfield Road
Storrs, CT 06269

RE: June 30, 2017 Audit Services for University of Connecticut

Dear Mr. Jordan:

Thank you for choosing CohnReznick LLP ("CohnReznick" and/or “we”) to perform professional services for the University of Connecticut (referred to herein as the “UConn”, “University” and/or “you”). This engagement letter and the master contract (No. UC-KA041416-8) (collectively, the “Agreement) shall confirm our understanding of the services we are to provide the University of Connecticut for the year ended June 30, 2017. This letter shall constitute Statement of Work (“SOW”) #4 for purposes of the Contract.

We will audit the Construction Expenditures of UCONN 2000 Projects Substantially Completed for the year ended June 30, 2017. The report under audit has two schedule provided by UConn; a Schedule of UCONN 2000 Construction Projects and a Schedule of UCONN 2000 Reported Project Values (the “Schedules”) as of June 30, 2017 and the related notes to the Schedules.

Audit Objective

The objective of our audit is the expression of an opinion about whether these Schedules are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles for project values and the requirements for the UCONN 2000 Construction Program under Public Act 07-166 which amends Sec. 13 section 10a-109z of the Connecticut General Statutes. Our audit will be conducted in accordance with auditing standards generally accepted in the United States of America and will include tests of your accounting records and other procedures we consider necessary to enable us to express such an opinion. We will issue a written report upon completion of our audit of the Schedules. Our report will be addressed to the Board of Trustees and the Joint Audit and Compliance Committee of the University of Connecticut. We cannot provide assurance that an unmodified opinion will be expressed. Circumstances may arise in which it is necessary for us to modify our opinion or add an emphasis-of-matter or other-matter paragraph. If our opinion is other than unmodified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed an opinion, we may decline to express an opinion or withdraw from this engagement.

Audit Procedures

Our procedures will include tests of documentary evidence supporting the transactions and amounts recorded in the Schedules. We will also request written representations from your attorneys as part of the engagement, and they may bill you for responding to this inquiry. At the conclusion of our audit, we will require certain written representations from you about the Schedules and related matters.

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the Schedules; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the Schedules. We will plan and perform the audit to obtain reasonable assurance about whether the Schedules are free of material misstatement, whether from (a) errors, (b) fraudulent financial reporting, (c) misappropriation of assets, or (d) violations of laws or governmental regulations that are attributable to the entity or to acts by management or employees acting on behalf of the entity.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements may exist and not be detected by us, even though the audit is properly planned and performed in accordance with U.S. generally accepted auditing standards. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the Schedules. However, we will inform the appropriate level of management of any material errors, fraudulent financial reporting, or misappropriation of assets that comes to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Our audit will include obtaining an understanding of the University and its environment as it relates to the UCONN 2000 Construction Program, including internal control sufficient to assess the risks of material misstatement of the Schedules and to design the nature, timing and extent of further audit procedures. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. However, during the audit, we will communicate to you and those charged with governance internal control related matters that are required to be communicated under professional standards.

If circumstances occur related to the condition of your records, the availability of sufficient, appropriate audit evidence, or the existence of a significant risk of material misstatement of the Schedules caused by error, fraudulent financial reporting, or misappropriation of assets, which in our professional judgment prevent us from completing the audit or forming an opinion on the Schedules, we retain the right to take any course of action permitted by professional standards, including declining to express an opinion or issue a report, or withdrawing from the engagement.

Management Responsibilities

You are responsible for establishing and maintaining internal controls, including monitoring ongoing activities; for the selection and application of accounting principles; and for the preparation and fair presentation of the Schedules in conformity with U.S. generally accepted accounting principles for project values and the requirements for the UCONN 2000 Construction Program under Public Act 07-166, which amends Sec. 13 Section 10a-109z of the Connecticut

General Statutes. You are also responsible for making all financial records and related information available to us and for the accuracy and completeness of that information. You are also responsible for providing us with (a) access to all information of which you are aware that is relevant to the preparation and fair presentation of the Schedules, (b) additional information that we may request for the purpose of the audit, and (c) unrestricted access to persons within the University from whom we determine it necessary to obtain audit evidence.

Your responsibilities include adjusting the Schedules to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the Schedules taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud and for informing us about all known or suspected fraud affecting the University involving (a) management, (b) employees who have significant roles in internal control, and (c) others where the fraud could have a material effect on the Schedules. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the University received in communications from employees, former employees, regulators, or others. In addition, you are responsible for identifying and ensuring that the University complies with applicable laws and regulations.

Except as stated otherwise herein above, CohnReznick shall not have responsibility for prevention and detection of fraud, and CohnReznick's services cannot be relied upon to detect fraud, defalcations or other irregularities. Because of the characteristics of fraud, particularly those involving concealment through collusion, falsified documentation and management's ability to override controls, an audit designed and executed in accordance with auditing standards generally accepted in the United States may not detect a material fraud. CohnReznick expressly disclaims any responsibility for detecting fraud affecting the University and the University releases CohnReznick from any liability for failure to detect fraud. If the University needs assistance in this area, CohnReznick can refer the University to others who specialize in fraud detection and investigations, and who can provide such services pursuant to a separate engagement setting forth the agreed upon scope of such services.

You agree to assume all management responsibilities for preparation of the Schedules, and any other nonattest services we provide; oversee the services by designating an individual, preferably from senior management, with suitable skill, knowledge, or experience; evaluate the adequacy and results of the services; and accept responsibility for them.

Engagement Administration, Fees and Other

We understand that your employees will provide the Change Order Analysis, the Anticipated Remaining Commitments as of April 13, 2018, and any additional costs paid directly by the UConn Health Center. Your employees will also locate any additional information needed by us for testing.

Paul R. Ballasy, CPA is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it.

To ensure that CohnReznick's independence is not impaired under the AICPA Code of Professional Conduct, you agree to inform the engagement partner before entering into any substantive employment discussions with any of our personnel.

The University of Connecticut agrees to pay CohnReznick LLP invoices for fees and costs as per Contract No. UC-KA041416-8, which will be rendered periodically as work progress and are payable on presentation.

We estimate that our fee for these services will not exceed $104,500 (the "Fee").

This SOW #4 does not constitute an engagement to perform any services other than those specified in this SOW #4, and only for the entities referred to as University herein. Should additional services be requested, we will separately agree to the terms of the engagement by means of an addendum to this SOW #4 or a separate engagement letter.

The University authorizes CohnReznick to post any draft and final versions of its Schedules and other related engagement documents to the CohnReznick Portals in order to facilitate the University's access to these documents. The Portal site is intended solely to accommodate the University (and the University alone will be given access to the Portal site). The University is not authorized to grant access to the Portal site to any third party.

By your execution of the SOW #4, the undersigned represent and warrant that he or she is authorized on behalf of the University to bind and are in fact binding such entity to the terms and conditions of this SOW #4.

We appreciate the opportunity to be of service to you. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this SOW #4, please sign the enclosed copy and return it to us.

Sincerely,

Paul R. Ballasy, CPA
Partner

PRB:aks

AGREED TO AND ACCEPTED BY:

University of Connecticut

By: _____
Authorized signature

Print Name: _____

Title: EVP for Administration and Chief Financial Officer

Date: _____

COHN REZNICK
ACCOUNTING • TAX • ADVISORY

CohnReznick LLP
350 Church Street
Hartford, CT 06103-1136

Main: 959-200-7000
Fax: 959-200-7300
cohnreznick.com

July 13, 2017

DRAFT

Mr. Scott Jordan
Chief Financial Officer
University of Connecticut
352 Mansfield Road
Storrs, CT 06269

RE: June 30, 2017 Agreed Upon Procedures Services for University of Connecticut

Dear Mr. Jordan:

Thank you for choosing CohnReznick LLP ("CohnReznick" and/or “we”) to perform professional services for the University of Connecticut (referred to herein as the “University”, “UConn” and/or “you”). This engagement letter and Contract No. UC-KA041416-8 (collectively, the "Agreement") shall confirm our understanding of the services we are to provide UConn. This letter and the attached schedules shall constitute SOW #3 for purposes of the contract.

We will apply the agreed-upon procedures listed in the attached schedule that were specified and agreed to by the University, its Board of Trustees (“BoT”) and the Joint Audit and Compliance Committee (“JACC”) on the UCONN 2000 contracts and expenditures for the fiscal year ended June 30, 2017 – for UCONN 2000 Projects not yet substantially complete.

Our engagement to apply agreed-upon procedures will be conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. The sufficiency of the procedures performed or to be performed is solely the responsibility of the University and we will require an acknowledgment in writing of that responsibility. Consequently, we make no representation regarding the sufficiency of the procedures described in the attached schedule either for the purpose for which the agreed-upon procedures report has been requested or for any other purpose. If, for any reason, we are unable to complete the procedures, we will describe any restrictions on the performance of the procedures in our report, or will not issue a report as a result of this engagement.

Because the agreed-upon procedures listed in the attached schedule do not constitute an audit or review, we will not express an opinion or conclusion, respectively, on the UCONN 2000 contracts and expenditures for the fiscal year ended June 30, 2017 – for UCONN 2000 Projects not yet substantially complete. In addition, we have no obligation to perform any procedures beyond those listed in the attached schedule.

We will submit a written report upon completion of our engagement that lists the procedures performed and our findings. This report is intended solely for the use of the University, its BoT and the JACC, and should not be used by anyone other than these specified parties. Our report will contain a paragraph indicating that had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

An agreed-upon procedures engagement is not designed to detect instances of fraud or noncompliance with laws or regulations; however, we will communicate to you any known and

suspected fraud and noncompliance with laws or regulations affecting the UCONN 2000 contracts and expenditures for the fiscal year ended June 30, 2017 – for UCONN 2000 Projects not yet substantially complete that come to our attention. CohnReznick shall not have responsibility for prevention and detection of fraud, and CohnReznick's services cannot be relied upon to detect fraud, defalcations or other irregularities. Because of the characteristics of fraud, particularly those involving concealment through collusion, falsified documentation and management's ability to override controls, our services may not detect a material fraud. CohnReznick expressly disclaims any responsibility for detecting fraud affecting the University and the University releases CohnReznick from any liability for failure to detect fraud. If the University needs assistance in this area, CohnReznick can refer the University to others who specialize in fraud detection and investigations, and who can provide such services pursuant to a separate engagement setting forth the agreed upon scope of such services.

In addition, if, in connection with this engagement, matters come to our attention that contradict the UCONN 2000 contracts and expenditures for the fiscal year ended June 30, 2017 – for UCONN 2000 Projects not yet substantially complete, we will disclose those matters in our report. Such disclosures, if any, may not necessarily include all matters that might have come to our attention had we performed additional procedures or an audit or review.

You are responsible for and assert that the UCONN 2000 contracts and expenditures for the fiscal year ended June 30, 2017 – for UCONN 2000 Projects not yet substantially complete is presented in accordance with Public Act 07-166 which amends Sec. 13 section 10a – 109z of the Connecticut General Statutes; and for selecting the criteria and procedures and determining that such criteria and procedures are appropriate for your purposes.

In addition, you are responsible for providing us with (1) access to all information of which you are aware that is relevant to the performance of the agreed-upon procedures on the subject matter, (2) additional information that we may request for the purpose of performing the agreed-upon procedures, and (3) unrestricted access to persons within the University from whom we determine it necessary to obtain evidence relating to performing those procedures.

You are responsible for assuming all management responsibilities and for overseeing the services we provide by designating an individual, preferably within senior management, who possesses suitable skill, knowledge, and/or experience. In addition, you are responsible for evaluating the adequacy and results of the services performed and accepting responsibility for the results of such services.

Paul R. Ballasy, CPA is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it.

We plan to begin our procedures on approximately October 15, 2017 and, unless unforeseeable problems are encountered, the engagement should be completed by May 15, 2018. At the conclusion of our engagement, we will require certain written representations in the form of a representation letter from management that, among other things, will confirm management’s responsibility for the UCONN 2000 contracts and expenditures for the fiscal year ended June 30, 2017 – for UCONN 2000 Projects not yet substantially complete in accordance with Public Act 07-166 which amends Sec. 13 section 10a – 109z of the Connecticut General Statutes.

If the need for additional procedures arises, or the procedures need to be modified, our agreement with you will need to be revised in writing. It is customary for us to enumerate these revisions in an addendum to this letter. If additional specified parties of the report are added, we will require

that they acknowledge in writing their agreement with the procedures performed or to be performed and their responsibility for the sufficiency of procedures.

We estimate that our fee for these services will not exceed $45,500.

The University agrees to pay CohnReznick LLP invoices for fees and costs as per the Contract, which will be rendered periodically as work progresses and are payable on presentation.

This SOW #3 does not constitute an engagement to perform any services other than those specified in this SOW #3, and only for the entities referred to as the University herein. Should additional services be requested, we will separately agree to the terms of the engagement by means of an addendum to this SOW #3 or a separate engagement letter.

The University authorizes CohnReznick to post any draft and final versions of its report and other related engagement documents to the CohnReznick Portals in order to facilitate management's access to these documents. The Portal site is intended solely to accommodate the University (and the University alone will be given access to the Portal site). The University is not authorized to grant access to the Portal site to any third party.

By your execution of this SOW #3, the undersigned represent and warrant that he or she is authorized on behalf of the University to bind and are in fact binding such entity to the terms and conditions of this SOW #3.

We appreciate the opportunity to be of service to you. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this Agreement, please sign the enclosed copy and return it to us.

Sincerely,

Paul R. Ballasy, CPA
Partner

PRB:aks

AGREED TO AND ACCEPTED BY:

University of Connecticut

By: _____
Authorized signature

Title: EVP for Administration and Chief Financial Officer

Date: _____

Agreed-Upon Procedures

Section A - Agreed-Upon Procedures: University of Connecticut ("UConn") and Named Projects for the University of Connecticut Health Center ("UConn Health")

Expenditure Testing:

1. Obtain a report of total expenditures by project from the University of Connecticut (UConn) for FY16.
2. From the report obtained in Procedure 1, select all projects, excluding the projects included in the completed project audit, with total expenditures greater than $50,000. (For Deferred Maintenance ("DM") / Equipment and certain Furniture, Fixtures & Equipment ("FF&E") expense reimbursements to UConn Health, separate procedures relating to UConn Health are performed. Please see “UConn Health UConn 2000 Procedures”).
3. For projects selected in Procedure 2, select all individual expenditures greater than $100,000. For projects without any expenditures greater than $100,000, select the highest dollar value expenditure.
4. For all expenditures selected in Procedure 3, identify if the expenditure is to an external source supported by a third-party invoice (Kuali Financial System ("KFS") Payment Request ("PREQ") & certain Disbursement Vouchers ("DV")) or internal source (KFS Internal Billing ("IB") / Distribution of Income and Expense ("DI") / Journal Voucher ("JV") / General Error Correction ("GEC") & certain DV).
5. For all selected expenditures made to external sources that are supported by third-party invoices (PREQ & certain DV):
    a. Inspect the addressee of the supporting invoice for evidence the invoice is addressed to UConn Health, the University of Connecticut or UConn.
    b. Inspect the invoice for the Vendor, Invoice Number or Payment Application number, Invoice Date, and Invoice Amount and compare the attributes to the KFS e-doc for agreement, noting the following for construction Payment Applications: a) the invoice date may be any date within one month of the application period end date; b) the invoice number must reference the payment application number, and / or be the invoice number assigned by the vendor, if provided.
    c. Obtain a list from UConn identifying approved authorizers and their authorized designees based on UConn authorization thresholds and payment types.
    d. Inspect the Route Log within the KFS e-doc and compare authorizations to the list of authorized approvers obtained in Procedure 5.c and determine the electronic approvals match based on authorization guidelines. Approval may alternately be located in the “Notes” section of the e-doc if ad-hoc routing was not obtained.
    e. Mathematically check the amount of the supporting invoice.

6. For all selected expenditures made to internal sources that are supported by internal documents (IB/DI/JV/GEC & certain DV):
    a. Obtain Internal Billing or Distribution of Income and Expense or Journal Voucher or General Error Correction or Disbursement Voucher KFS e-doc.
    b. Obtain a list from UConn identifying approved authorizers and their authorized designees with corresponding approval thresholds for the type of e-doc.
    c. Inspect the Route Log approvals in KFS e-doc and compare authorizations to the list obtained in Procedure 6.b and determine the electronic approvals match based on authorized dollar thresholds. Approval may alternatively be located in the “Notes” section of the e-doc if ad-hoc routing was not obtained.
    d. Compare the support within the KFS e-doc “attachments” section to the entry in KFS and check for agreement, noting this can take a variety of forms.
7. For selected expenditures in Step 6 supported by a DI e-doc that specify “management fee” or “payroll allocation” in the explanation field of the DI e-doc:
    a. Inspect the backup documents in the “attachments” section to identify the Project ID of the expenditure selected and compare the Project ID to the report obtained in Procedure 1 for agreement.
    b. Inspect the DI e-doc to identify the Project ID and compare the Project ID to the backup document obtained in Procedure 7.a for agreement, excluding DI e-docs that specify “management fee" or "payroll allocation" for capital equipment as these do not have Project IDs.
    c. Inspect the DI e-doc to identify the amount shown for Project ID selected and compare the amount to the “management fee/payroll” amount shown in the backup document obtained in Procedure 7.a for agreement. (Note that certain project accounts are excluded from this allocation as follows: cost allocation clearing accounts, certain projects in financial close-out stage, property acquisitions, code projects exclusively funded by operating funds.) Mathematically check the amount of the “management fee" or "payroll allocation” selected by multiplying the percentage and period expenses in the backup document obtained in 7.a.

Contract Testing:

1. Obtain a report of total expenditures by project for FY16 from UConn, which also identifies the projects included in the completed project audit performed by CohnReznick LLP.
2. From the report obtained in Procedure 1, select all projects, excluding the projects included in the completed project audit, with
    a. Total expenditures greater than $500,000 and
    b. Deferred maintenance projects with board budgets over $500,000 and total expenditures greater than $50,000.

Procedures numbered 3 to 16 below are for all projects except for the contractual relationship with HB Nitkin / FSD University, LLC, which is applicable to the Hartford Relocation project only (project #901779 – PO 58898), as this follows a unique developer agreement prepared outside of Capital Projects & Contract Administration ("CPCA"). For this contractual relationship refer to testing procedures numbered 17 to 21.

3. For projects selected in Procedure 2, obtain the Board of Trustees (“BoT”) budget approval from UConn.
4. For projects selected in Procedure 2, identify those where a construction contractor has been engaged, and obtain the Contract Approval Request Form (CAR) or Approval of Change to Original Contract, Workplan or Purchase Order Request Form (ACR – a.k.a. Greensheet) or electronic workflow ACR (a.k.a. Electronic Greensheet) for construction services.
5. For projects selected in Procedure 4, obtain a list from UConn identifying the type of construction project (i.e. on-call contract vs. new bid, etc.), indicating whether it was initiated by CAR or ACR, and a list of approved authorizers or their authorized designees based on project type and contract value.
6. Inspect the CAR or ACR for the Vendor, Project Name, and Project ID and compare the attributes to the report obtained in Procedure 1 for agreement.
7. Inspect the CAR or ACR for authorizations and compare to the list of approved authorizers or their authorized designees provided by UConn for agreement based on approval dollar thresholds.
8. For projects selected in Procedure 2, obtain a Change Order ("CO") Analysis report from UConn, if applicable.
9. For projects selected in Procedure 4, obtain the executed contract and President’s Contract Signing Authority Delegation letter. Inspect the executed contract to identify the title of the person who signed the owner’s authorization and compare it to the President’s Contract Signing Authority Delegation letter for agreement based on approval dollar thresholds. Inspect the executed contract to identify the Contractor signature line has been signed by the Contractor.

10. Inspect executed contract to identify the initial contract amount and compare the amount to KFS purchase order for agreement.
    a. If amounts do not match, then inspect the CAR/ACR document and/or the Notes section of the KFS PO e-doc for written comments identifying the amounts which are to be designated as “Allocated”, “Obligated” and/or “Future Funding”.
    b. Mathematically add all amounts designated as “Allocated”, “Obligated” and/or “Future Funding” to the PO amount and compare the result to the initial contract amount identified in the executed contract for agreement.
11. Inspect the CO Analysis to identity the total amount of the contract. Compare the amount identified to the PO total in the Purchase Order screen in KFS. If the identified amount from the CO Analysis exceeds the total from the Purchase Order screen in KFS, proceed to step 11a & 11b.
    a. If the total amount of the Contract from the CO Analysis exceeds the KFS PO total, inspect the Change Order documentation and/or the Notes section of the KFS PO e-doc for written comments identifying the amounts which are to be designated as “Allocated”, “Obligated” and/or “Future Funding”.
    b. Mathematically add all amounts designated as “Allocated”, “Obligated” and/or “Future Funding” and add the total to the PO amount and compare the results to the total on the CO Analysis for agreement.
12. From the CO Analysis, select all change orders greater than $100,000. For projects without any change orders greater than $100,000, select the highest dollar value change order.
13. For change orders selected in Procedure 12, obtain the ACR and executed change order document from KFS.
14. Inspect executed change order to identify the Vendor, Project ID and Amount and compare the attributes to the ACR and CO Analysis for agreement.
15. Inspect the executed change order to identify the overhead and profit markup used and compare the percentage to the executed contract for agreement.
16. Inspect the ACR for authorizations and compare them to the list of approved authorizers or their authorized designees provided by UConn and determine authorizations agree based on approval dollar thresholds.

Procedures numbered 17 to 21 are applicable to the Hartford Relocation project (project #901779), and are specific to the contractual relationship with HB Nitkin and FSD University LLC (PO 58898) only:

17. Identify all PO increases related to construction activity (Early Bid, Guaranteed Maximum Price ("GMP") and Work Authorization Approval ("WAA")).
18. Obtain the “Approval of Change to Original Contract, Workplan or Purchase Order Request Form” ("ACR" – a.k.a. "Greensheet") for construction related increases (exclude increases for future funding and soft costs).
19. Inspect the ACR for authorizations and compare them to the list of approved authorizers or their authorized designees provided by UConn and determine authorizations agree based on approval dollar thresholds.
20. Inspect the ACR for the amount and compare the amount to the increase to the PO for agreement.

21. Identify the contractor (third party) documentation within the ACR. Compare the amount of the documentation (may be labeled Early Bid Package, GMP or WAA) provided by the third party to the amount of the ACR for agreement, noting the final amount on the ACR should be adjusted for the developer fee. This specific adjustment is not an exception.

Section B – Agreed-Upon Procedures: University of Connecticut Health Center (UCH)

Expenditures Testing:

1. For the items identified as UConn Health DM/Equipment and/or FF&E Expenditures reimbursements in the report provided in Storrs Procedure 1, obtain from UConn Health a report of total expenditures by project for FY16.
2. From the report obtained in Procedure 1, select all expenditures greater than $100,000. For projects without any expenditure greater than $100,000, select the highest dollar value expenditure.
3. For all expenditures selected in Procedure 2, obtain from UConn Health a third-party invoice or UConn Health Internal Charge support.
4. For expenditures supported by a third party-invoice:
    a. Obtain HuskyBuy Purchase Order Invoice.
    b. Compare Invoice amount on expenditure report to Husky Buy Purchase Order Invoice Screen for agreement. If amounts do not agree or were overridden in Husky Buy, obtain from UConn Health the detailed accounting breakout showing the allocation from total invoice amount to amount expensed.
    c. Inspect the third-party invoice for the Invoice number, Supplier Invoice Number or AIA application Number, Vendor and Invoice Amount and compare the attributes to the Purchase Order Invoice for agreement.
    d. For manually matched invoices, obtain from UConn Health a Signature Authorization report for the Fund/Organization on the Invoice or, if the approval was routed electronically, the Husky Buy Bioscience Invoice Approval list. Inspect the invoice or electronic routing for the authorizer(s) based on purchase order coding and compare the authorizations to the Signature Authorization report or the Husky Buy Bioscience invoices approval list for agreement.
        i. If the invoice was approved on the face of the invoice and if an individual is not on the signature authorization report provided, identify the individual's position and compare the individual's name and position to support provided by UConn Health that the approval was proper based on the employee's position/title at the time of signing.
        ii. If the invoice was approved in HuskyBuy and the approver is not on the Bioscience Invoice Approval list, obtain the "Electronic Approval Changes Notes" listing from UConn Health. Inspect the "Electronic Approval Changes Notes" to identity the authorized approver at the time of the invoices' authorization. Compare the authorized approver on the invoice to the authorized approver on the "Electronic Approval Changes Notes" for agreement.
    e. For system-matched invoices (typically equipment invoices), obtain from UConn Health the Husky Buy PO History and Receiving forms.
        i. Inspect the PO History for a Match Status of "Matched".
        ii. Inspect the HuskyBuy Purchase Order Invoice obtained in 4.a. and identify the quantity and unit price invoiced. Compare these attributes to the Receiving form for agreement. This agreement represents an approval for payment.

iii. Invoices that do not agree may be subject to UConn Health's institutional tolerances. If an invoice does not match, obtain UConn's current institutional tolerance levels. Inspect tolerance levels to results of step 4eii to ensure variances are less than established tolerances. Agreement within tolerances levels represents an approval for payment.

f. Obtain from UConn Health a signature plate for all relevant approvers including name, authorization threshold (if applicable) and signature sample (and initials sample if relevant).
   i. If authorizations were performed on the face of the invoice, inspect the invoice for the authorizer(s) signature and compare them to the signature plate obtained in Procedure 4.f for agreement.

g. Mathematically check the amount due of the supporting invoice.

h. For each selected expenditure, obtain from UConn Health a Banner Report (typically the Detail Transaction Activity report, "FGITRND") showing the expense posting to the ledger.

i. Inspect the FGITRND and identify the Purchase Order Invoice number, the coding strings, and amounts, and compare the attributes to the Purchase Order Invoice Screen for agreement..

5. For expenditures from UConn Health Internal Charges:

   a. Obtain from UConn Health the internal source document for the expenditure. Source documents can come from a large number of different departments and typically include: Work Orders, Hot Work Permits, Firewatch, Key Charges, Move Orders, Telecommunication Charges, Freight JE's, Misc. Departmental Charges (Copy Center, Room Reservation, etc.), and institutional PCard charges.

   b. Inspect the internal source document obtained in Procedure 5.a to identify the amount of the expenditure and compare the amount to the UConn Health Internal Charge entry on total expenditure report for agreement.

   c. For each selected expenditure, obtain from UCH a Banner Report (typically the Detail Transaction Activity report, "FGITRND") showing the expense posting to the ledger. Inspect the internal source document and identify the expenditure amount and compare the amount to the Banner Report for agreement.
      i. For the telecommunications back-up that does not list the amount; inspect the back-up document to identify the reference number and compare the reference number to the Banner line description for agreement.

   d. For payroll costs originating from the UConn Health (denoted on the expenditure file as account 79722) which are selected as part of the overall selection above:
      i. Obtain the journal entry which supports the costs charged
      ii. Compare amount selected as capitalized salary and fringe to the amounts on the journal entry calculation for agreement.
      iii. Mathematically check the capitalization calculation.
      iv. Inspect the journal entry for authorization and compare the signature to the listing of members of the Finance department or appropriate supervisor.

Contract Testing:

1. For all the items identified as UConn Health DM or UConn Health initiated construction reimbursements in the report provided in Storrs Contract Testing Procedure 1, obtain from UConn Health a report of total expenditures by project for FY16.
2. For projects identified in Procedure 1, obtain the most recent Board of Trustees (BOT) Project Budget approval from the UCONN website. Note that the most recent version of the Project Budget approved by the BOT will be identified as either "Final" or "Revised Final."
3. For all projects identified in Procedure 1, obtain from UConn Health the Banner FRIGITD summary (project inception to date budget). Note that a single project may have more than one FOAPAL and therefore more than one Banner FRIGITD summary.
4. Inspect the BOT Project Budget to identify the approval amount from Procedure 2 and identify the amount on the Banner FRIGITD summary from Procedure 3. If the budget amount in the Banner FRIGITD summary exceeds the BOT Project Budget approval amount, this is an exception.
5. For all projects identified in Procedure 1, identity the total project spend. Compare the total project spend to the budget amount in the Banner FRIGITD Summary obtained in Procedure 3. If the total project spend exceeds the budget amount, this is an exception.
6. Obtain from UConn Health a list or matrix identifying approved authorizers based on authorization thresholds for Purchase Requisitions (PRs) and Purchase Orders (POs).
7. For projects identified in Procedure 1, obtain from UConn Health the following:
    a. Purchase Requisition documentation from HuskyBuy:
        i. Original PR and PR Approvals, which generated the original PO
        ii. All Change Order Requests (CORs) and COR Approvals, which generated each of the PO Revisions
    b. Purchase Order documentation from HuskyBuy:
        i. Current PO Summary and Accounting Codes
        ii. PO Revisions list and PO History, including Approvals for each PO Revision
        iii. Original PO and all PO Revisions
    c. Contract documentation: The executed contract or purchase agreement and all executed change orders or amendments
8. Inspect the original HuskyBuy PO obtained in Procedure 7b.iii to identify the supplier/contractor and Project Number (and/or Project Name) and compare the attributes to the original executed contract obtained in 7c for agreement.
9. Inspect the Current PO Summary obtained in 7b.i to identify the total PO amount and compare the attribute to the sum of the Original PO and all Po revisions from Step 7b.iii.
10. Authorizations.
    a. For original PR approval: Inspect the Original PR and PR Approvals obtained in Procedure 7a.i to identify the person who approved the Department Approval step(s) and compare that person to the authorized approver for the value of the PR according to the list or matrix from Procedure 6.
    b. For original PO approval: The PO History obtained in Procedure 7b.ii will be sorted by Date/Time in chronological order so that the earliest PO activity is displayed on Page 1. Inspect the PO History and identify the approver of the Purchasing step for the original PO and compare the approver to the list or matrix from Procedure 6 for the original value of the PO obtained in Procedure 7b.iii for agreement.

11. For UConn Health initiated projects identified in Procedure 1, obtain the Change Order Analysis prepared by UCH.
12. Inspect the Change Order Analysis from Procedure 10 to identify the total contract value. Inspect the most recent PO revision, obtained in Procedure 7b.iii, to identify the final PO value. If the final PO value exceeds the total from the Change Order Analysis, this is an exception.
13. From the Change Order Analysis, select all change orders greater than $100,000. For projects without any change orders greater than $100,000, select the highest dollar value change order.
14. For the change order(s) selected in Procedure 12, Inspect the executed contract change order(s) obtained in Procedure 7c to identify the contractor/supplier and dollar values and compare the attributes to the CORs from Procedure 7a.ii and PO Revisions from Procedure 7b.iii for agreement.
15. For the change order(s) selected in Procedure 12, Inspect each COR and PO revision to identify the approvals and compare the authorizations to the authorized approver list obtained in Procedure 6 for agreement based on authorized dollar thresholds.
    a. For COR approvals: Inspect the COR and COR Approvals obtained in Procedure 7a.ii, to identify the person who approved the Department Approval step(s) and compare the approvers to the list or matrix from Procedure 6 for agreement. (Alternatively, this same approval information can be confirmed on the PR History tab, or by printing a .csv file from the PR History tab.)
    b. For PO Revision approvals: The PO History obtained in Procedure 7b.ii will be sorted by Date/Time in chronological order so that the earliest PO activity is displayed on Page 1. Inspect the PO History and revised value of the PO obtained in Procedure 7b.iii. to identify the approver of the Purchasing step for the PO revision and compare the approver to the list or matrix from Procedure 6 for agreement.

University of Connecticut
&
UConn Health

Joint Audit & Compliance Committee Meeting

TAB 7

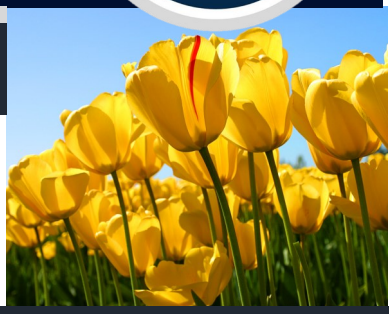
THIS PAGE INTENTIONALLY LEFT BLANK

Compliance Courier

Volume 10, Issue 4 — Summer 2017

Use of Students in Outside Employment

Potential conflicts may occur when a University employee personally hires a student in any non-University supported activity. Please remember that you must follow the requirements specified within the Policy for the Use of Students in Outside Employment. Visit http://policy.uconn.edu/?p=1077 for more information.



Are You Separating from UConn? Here are some things you need to know:

If you are leaving the University or actively pursing other employment opportunities, you must consider the State Code of Ethics obligations that address post-state employment. One year and lifetime bans may apply depending on the circumstance. The Office of State Ethics (OSE) specifies instances of these bans in "Public Officials and State Employees Guide to the Code of Ethics." The following are examples:

Lifetime– You may never disclose any confidential information you learned during the course of your state service for anyone's financial gain. "Confidential information" is any information not generally available to the public. The information may be in any form (written, photographic, recorded, computerized, etc.) including orally transmitted information, e.g., conversations, negotiations, etc.

One year– You may not be hired for one year after you leave state service by a party to a state contract valued at $50,000 or more if you were substantially involved in, or supervised, the negotiation or award of that contract and it was signed within your last year of service.

The State Code of Ethics and related policies may be challenging to understand at times. Support and resources are available to help make sense of the code's requirements and how they may impact you. For more information, please refer to the Guide to the State Code of Ethics located at policy.uconn.edu.

Ethics questions may be directed to Kim Fearney, Director of Compliance and Ethics Liaison at kim.fearney@uconn.edu or 860-486-2530.

Compliance Training Complete

Annual compliance training for Faculty and Staff is complete. Thank you for your continued support—together we achieved 100% participation.

Find our latest Compliance Chats Podcast on how to defend against "Phishing Attacks" at: http://audit.uconn.edu/compliance-chats-a-podcast-series/

REPORTLINE

1-888-685-2637

https://uconncares.alertline.com/gcs/welcome

New Animals on Campus Policy

The University recently adopted a new Animals on Campus Policy, effective June 9, 2017. The policy provides a single resource for rules and guidance related to individuals bringing animals on University property, including service animals, service animals in training, emotional support animals and pets. The policy also includes newly implemented UConn Health Clinical Practice Procedures Regarding Animals. The policy outlines procedures in line with federal and state laws regarding animals for individuals with disabilities.

The new Animals on Campus Policy replaces the following related policies:

UConn (Storrs and Regional)

Pets at Work

Service Animals Policy

Assistance Animal Policy and Procedure

UConn Health

JDH Pets Visitation 11-023

UMG/JDH Ambulatory Services – Service Animals in the Practice Locations

Please review the full policy, including an FAQ and the UConn Health Clinical Practice Procedures Regarding Animals, at http://policy.uconn.edu/?p=7086. For more information regarding this policy, contact The Office of Institutional Equity at (860) 486-2943 or equity@uconn.edu.

Newly Revised Non-Discrimination Policy Statements for Publications

The University recently adopted changes to the *Non Discrimination Policy Statements for Publications including Accessibility Statements for University Events and Section 1557 Statements for Health Programs* (previously entitled *Non-Discrimination Policy Statements for Publications, Printed Material and Electronic Media*), effective June 13, 2017.

This is a University-wide policy that requires University publications that describe or invite participation in UConn programs or activities to contain one of the non-discrimination statements found at: http://policy.uconn.edu/2011/05/31/non-discrimination-policy-statements/. Departments producing publications subject to the policy must incorporate the required non-discrimination statement into existing, revised and new material. Departments should review and develop a strategy to incorporate the non-discrimination statement into existing publications while operating with the understanding any new or revised publications will include the required statement.

Event-specific publications must also include an accessibility statement intended to ensure an opportunity for participants with disabilities to request accommodations and fully participate in University events or activities. The following is the Event Accessibility Statement required for all University-sponsored events that may be found in this policy.

> *If you require an accommodation to participate in this event, please contact (INSERT SPONSORING DEPARTMENT CONTACT NAME) at (INSERT TELEPHONE AND EMAIL CONTACT INFORMATION) by (SPECIFIC DATE (suggestion: at least 5 days in advance)).*

For more information regarding this policy, contact The Office of Institutional Equity at (860) 486-2943 or equity@uconn.edu.

Any questions related to the University's non-discrimination, AA/EEO policies, and reasonable accommodations process may be directed to the Office of Institutional Equity at (860) 486-2943 or equity@uconn.edu.

August 2017 Volume 11, Issue 3

Compliance Courier

QUALITY PAYMENT PROGRAM

The transition to a Quality Payment Program (QPP) for professional services provided under Medicare is underway. Most clinicians will participate in QPP under the Merit Based Incentive Payment System (MIPS) where their Medicare payment will be adjusted based on performance in four categories including quality and cost. Clinicians eligible to participate in MIPS are: physicians, physician assistants, nurse practitioners, clinical nurse specialists and certified registered nurse anesthetists. Performance reporting under MIPS opened January 1, 2017 and closes December 31, 2017 with the first performance payment adjustments going into effect on January 1, 2019.

CMS recently posted the following new resources for clinicians participating in MIPs

- Advancing Care Information Measure Specifications and Transition Measure Specifications - Updated: Includes additional details on each objective and measure in the Advancing Care Information performance category.
- An Introduction to Group Participation in MIPS in 2017: Offers an in-depth overview of how to participate as a group in MIPS. This user guide is interactive for quick navigation.
- CMS-Approved Qualified Clinical Data Registries (QCDRs) Vendor List for 2017: Provides contact information for the QCDRs that will be able to report data for the Quality, Advancing Care Information, and Improvement Activities performance categories in 2017.
- Consumer Assessment of Healthcare Providers & Systems (CAHPS) for MIPS – CMS-Approved Survey Vendor List: Includes contact information for the survey vendors approved by CMS to administer the CAHPS for MIPS Survey in 2017.
- MIPS Measures Guide for Cardiologists - Updated: Highlights a sample of measures and activities for the Quality, Improvement Activities, and Advancing Care Information performance categories that may apply to cardiologists in 2017.
- MIPS Measures Guide for Primary Care Clinicians: Offers a sample of measures and activities for the Quality, Improvement Activities, and Advancing Care Information performance categories that may apply to primary care clinicians in 2017.

Most Clinicians will participate in QPP under the Merit based Incentive Payment System

UCONN HEALTH

LEAVING STATE SERVICE?

The State Code of Ethics has several "revolving door" provisions that apply to individuals ending their employment with UConn Health or any other state agency. If you are planning to leave UConn Health, it is important to review the ethics rules and to seek guidance as needed from the Office of Audit Compliance and Ethics or from the Office of State Ethics.

WHAT YOU NEED TO KNOW ABOUT THE STATE CODE OF ETHICS

One-year Prohibitions

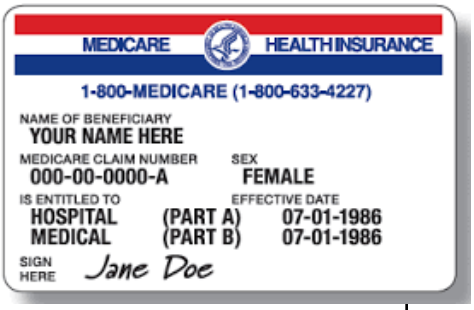
You may not represent anyone before UConn Health for compensation. If, after leaving state service, you begin work with another entity that conducts business with UConn Health, there is a one-year "cooling off" period. In such cases, "represent" includes any activity that reveals your identity or informs UConn Health of your relationship with your new employer. Examples include attending meetings with UConn Health employees, phone calls to UConn Health, and signatures or identification on documents or your new company's letterhead. The reason is to prevent former employees from using their UConn Health contacts or influence to gain an advantage in business dealings. This does not prohibit social interactions with former UConn Health colleagues as long as no business matters are discussed. It also does not forbid you from using your expertise or advising your private employer as long as your identity or company association is not revealed and no confidential information learned during your state service is used. *You may not accept employment with a party to a contract valued at $50,000 or more if you participated substantially in the negotiation or award of that contract and the contract was signed during your final year of state service*. Substantial participation applies whenever a former employee has exercised discretionary authority at any level of the contract award process.

Lifetime Prohibitions

You may never use or share confidential information obtained in your state position for financial gain for yourself or any other person. "Confidential information" is data in any form that is not generally available to the public. This includes written, photographic, recorded, electronic and oral information obtained through conversations, negotiations, or other verbal exchanges.

You may never represent anyone concerning a particular matter in which you personally and substantially participated while in state service and in which the state has a substantial interest. A "particular matter" refers to a specific contract, project, or report that is most often determined on a case by case basis. This prevents a former employee from "side-switching" on a specific matter to obtain an improper benefit. For questions or to review a specific scenario, please contact Ginny Pack, UConn Health Ethics Liaison, at 860-679-1280 or pack@uchc.edu or the Office of State Ethics at 860-263-2400 or ethics.code@ct.gov

GET READY FOR NEW MEDICARE CARDS



Medicare is taking steps to remove Social Security numbers from Medicare cards. Through this initiative the Centers for Medicare & Medicaid Services (CMS) will prevent fraud, fight identity theft and protect essential program funding and the private healthcare and financial information of our Medicare beneficiaries. CMS will issue new Medicare cards with a new unique, randomly-assigned number called a Medicare Beneficiary Identifier (MBI) to replace the existing Social Security-based Health Insurance Claim Number (HICN) both on the cards and in various CMS systems being used today. CMS will start mailing new cards to people with Medicare benefits in April 2018. All Medicare cards will be replaced by April 2019. Based on feedback from healthcare providers, practice managers and other stakeholders, CMS is developing capabilities where doctors and other healthcare providers will be able to look up the new MBI through a secure tool at the point of service. To make this change easier, there is a 21-month transition period where all healthcare providers will be able to use either the MBI or the HICN for billing purposes.

Here are 5 steps you can take today to help your office or healthcare facility get ready: 1) Go to the CMS provider website and sign-up for the weekly MLN Connects® newsletter. 2) Attend CMS quarterly calls to get more information. Upcoming calls will be scheduled in the MLN Connects newsletter. 3) Verify all of your Medicare patients' addresses. If the addresses you have on file are different than the Medicare address you get on electronic eligibility transactions, ask your patients to contact Social Security and update their Medicare records. 4) Work with CMS to help your Medicare patients adjust to their new Medicare card. When available, later this fall, you can display helpful information about the new Medicare cards. Hang posters about the change in your offices to help spread the word. 5) Test your system changes and work with your billing office staff to be sure your office is ready to use the new MBI format.

To learn more, visit: cms.gov/Medicare/SSNRI/Providers/Providers.html

(Source: Connecticut Dept. of Social Services, Important Message to Providers July 2017)

A MEMO TO MANAGERS:

When's the last time you took a few moments to do an ethics and compliance risk assessment on...yourself? Things at UConn Health, like all organizations, can change quickly, including managers' span of control, members of your team, which vendors we use and more. As your partners, we in the Compliance Department want to be a resource for you when your exposure to ethics and compliance risk changes or expands.

So take a moment and review this list: do any of these sound familiar?

- Your span of control has increased, and you are now dealing with employees or third parties that you haven't worked with before.
- You've started working with a new internal team.
- You're dealing with fast-moving structural changes to your team or your department.
- A new law or regulation has come into effect and you're not sure what the implications might be for your team.

Has your compliance risk profile changed?

- You have new team members from a generation or cultural heritage you're not accustomed to working with.
- You've recently been promoted to a management position, and wish you had a better grasp on ethics and compliance issues that might come up in your new role.
- An employee brings a potential compliance violation to you and you aren't sure how to respond.
- You're not entirely clear on how to apply one of our new or updated policies—or a longstanding policy hat now applies to you more directly.

Any and all of these issues (and many more like them!) can create new ethics and compliance challenges for managers. We want to remind you that you are not on your own! If you have questions about ethics and compliance concerns, we want to connect you with help. From one-on-one consultations, training resources and advice to setting up mentoring relationships with other managers within our organization, we are committed to equipping you for success. Raising your hand when issues come up is a major part of owning ethics and compliance. There is no question too small to ask. Set an example for your team: "speak up" when you face new ethics and compliance challenges. Together, we'll continue to build an ethical and compliant organizational culture we can all be proud of. Please contact us directly by phone: 860-679-4180, Fax: 860-679-1608, via email at compliance.officer@uchc.edu or mail at 263 Farmington Avenue, MC 8214 Farmington, CT 06030. **You may also call our REPORTLINE at 1-888-685-2637.**

Taken from Navex Global tools accessed on July 5, 2017

compliance next™

We feature a monthly Compliance Quandary on our website which may be found at http://audit.uconn.edu/uconn-health-quandaries/

Previous editions of our quarterly newsletter may be found at: http://audit.uconn.edu/uconn-health-compliance-courier/

IRIS MAURIELLO

Compliance Integrity/ Privacy Officer

P: 860.679.3501
Mauriello@uchc.edu

REPORTLINE: 1-888-685-2637