



UConn

UNIVERSITY OF CONNECTICUT

UConn HEALTH

JOINT AUDIT & COMPLIANCE COMMITTEE MEETING

September 29, 2022

PUBLIC SESSION

Meeting held by Telephone

Public Call in # +1-415-655-0002 US Toll
Access Code: 2623 712 2807

Public Access Link: <https://ait.uconn.edu/bot>

(A recording of the meeting will be posted on the Board website <https://boardoftrustees.uconn.edu/> within seven days of the meeting.)

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University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting
September 29, 2022

Agenda

10:00 am – 10:30 am - Executive Session / 10:30 am – 12:00 pm - Public Session

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Topic	Proposed Action	Attachment
Executive Session Anticipated	Review	None
1. GENERAL		
• Public Comment*		None
• Minutes of the June 23, 2022, Meeting	Approval	1.1
2. EXTERNAL AUDIT ACTIVITIES		
• Status of External Audit Engagements	Update	2.1
• UConn Health 340B Program Independent Outside Audit Closeout Report	Informational	2.2
3. SIGNIFICANT INTERNAL AUDIT ACTIVITIES		
• Status of Audits	Update	3.1
• Status of Audit Findings	Update	3.2
• Draft Audit Plan 2023	Approval	3.3
4. COMPLIANCE ACTIVITIES		
• Draft Compliance Plan – FY23	Approval	4.1
• Significant Compliance Activities	Update	4.2
• Athletics Compliance Update	Presentation	None
• Informational/Educational Items	Informational	4.3
5. INFORMATION TECHNOLOGY		
• UConn	Update	5.1
• UConn Health	Update	5.2
6. OTHER BUSINESS		
7. ADJOURNMENT		

* If members of the public wish to address the Committee during the Public Participation portion of the meeting, you must submit a request in writing 30 minutes prior to the start of the meeting (by 9:30 a.m.) to the following email address: BoardCommittees@uconn.edu. Please indicate your name, telephone number, and topic to be discussed. Per the University By-Laws, the Board may limit public comment. As an alternative, you may also submit your comments via email which will be shared with the Board.

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ATTACHMENT 1.1

**University of Connecticut & UConn Health
Joint Audit & Compliance Committee
Minutes of the Meeting of June 23, 2022
Telephone Meeting**

Attendees	
Committee Members: Board of Trustees & UConn Health Board of Directors	BOT: Mark Boxer (Vice-Chair), Andrea Dennis-LaVigne, Jeanine Gouin, Bryan Pollard UCH BOD: Francis Archambault, Jr., Richard Carbray, Jr., Timothy Holt
Other Trustees:	Board of Trustees Chair Daniel Toscano
University Staff:	Christopher Bernard, Jeffrey Blumenthal, Lakeesha Brown, Adam Buckley, Patricia Casey, Anne D’Alleva, Christopher Delello, Kimberly Fearney, Nicole Gelston, Jeffrey Geoghegan, Anne Horbatuck, Andrea Keilty, Dennis Leber, Bruce Liang, Radenka Maric, Kimberly Metcalf, Michael Mundrane, Gregory Perrotti, Angelo Quaresima, Rachel Rubin, Caryl Ryan, Janel Simpson, Jody Terranova, Reka Wrynn
External Invitees:	Brian Sullivan and Patrick Quinn

1. Opening

The Joint Audit and Compliance Committee (JACC) meeting was called to order at 10:01 a.m. by Vice-Chair Boxer.

2. Executive Session

On a motion by Trustee Pollard and seconded by Trustee Gouin, the JACC voted unanimously to go into executive session to discuss:

- C.G.S. 1-210(b)(1)– 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.
- C.G.S. 1-200(6)(B) – Records or the information contained therein pertaining to strategy and negotiations with respect to pending claims.
- C.G.S. 1-210(b)(10) – Records, reports and statements privileged by the attorney-client relationship.
- C.G.S. 1-210(b)(20)– 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.

The entire executive session was attended by the following:

JACC Members: Boxer, Archambault, Carbray, Dennis-LaVigne, Gouin, Holt, Pollard.

Other Trustees: Toscano.

President and Senior Staff: Maric, Blumenthal, Casey, D’Alleva, Fearney, Gelston, Geoghegan, Keilty, Liang, Perrotti, Quaresima, Rubin, Simpson, Wrynn.

DRAFT

**University of Connecticut & UConn Health
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The following were in attendance for part of Executive session: Bernard, Brown, Buckley, Horbatuck, Leber, Mundrane, Ryan, Terranova.

The Executive Session ended at 10:41 a.m.

OPEN SESSION

The JACC returned to public session at 10:43 a.m.

1. Public Participation

No members of the public wished to address the Committee.

On a motion by Trustee Dennis-LaVigne and seconded by Director Archambault, the minutes of the March 18, 2022, JACC meeting were unanimously approved.

2. External Audit Activities

A. Quaresima provided an update on the status of external audit engagements.

B. Sullivan and P. Quinn from Mayer Hoffman McCann provided a presentation on the FY21 UCONN 2000 Infrastructure Program Agreed-Upon Procedures Audit.

K. Metcalf provided a presentation on the Annual 340B Drug Pricing Program Audits for the period June 1, 2021 – November 30, 2021, for:

- John Dempsey Hospital
- Ryan White (Ryan White Part A)
- Hemophilia Treatment Center (HTC)

3. Significant Internal Audit Activities

A. Quaresima introduced the two new staff auditors, Mary Alice Gendreau and Nataliya Lestage.

A. Quaresima provided an update on the status of internal audits. The JACC reviewed and accepted five audit reports. He also provided an update on the status of internal audit findings.

4. Compliance Activities

K. Fearney introduced a new member of the Office of University Compliance, Kimberly Colon, Associate Compliance Officer.

DRAFT

University of Connecticut & UConn Health
Joint Audit & Compliance Committee
Minutes of the Meeting of June 23, 2022
Telephone Meeting

K. Fearney also provided an update on significant compliance activities and gave a brief presentation on the required Compliance Training Completion Data. She noted that there are informational and educational compliance items included in the materials.

5. Information Technology Updates

M. Mundrane and C. Bernard provided an update on the UConn information technologies.

A. Buckley and D. Leber provided an update on the UConn Health information technologies.

6. 2022 Retirement Updates

C. Delello gave a presentation on the University of Connecticut's 2022 Retirement Status, and L. Brown provided information on UConn Health's 2022 Retirement Status.

7. Conclusion of Full Meeting

On a motion by Director Archambault and seconded by Trustee Pollard, the Committee voted unanimously to adjourn the meeting.

There being no further business appearing, the meeting was adjourned at 11:54 a.m.

Respectfully submitted,

Karen Violette

ATTACHMENT 2.1

**University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting**

September 29, 2022

Status of External Audit Engagements

Auditor	Area	Scope	Current Status of Audit	Prior Report Issued
CliftonLarsonAllen	UConn Health	Audits of Financial Statements for UConn Health's John Dempsey Hospital, University Medical Group, & Finance Corporation	FY 22 Underway	FY 21 Issued 12/13/21 (Marcum)
James Moore	UConn Athletics	NCAA agreed upon procedures performed on all revenues, expenses, and capital expenditures for the Athletics Program	FY 22 Underway	FY 21 Issued 11/17/21
Mayor Hoffman McCann P.C.	UConn & UConn Health	Annual audit of UCONN 2000 agreed upon procedures	FY 22 Underway	FY 21 Issued 5/18/22
Pharmacy Optimization Consultants	UConn Health	Audit of UConn Health's Covered Entities 340B Drug Pricing Program required by Health Resources and Services Administration	CY 21 3 Audits Completed	CY 21 Issued 1/22, 1/22 & 4/22
State Auditors	UConn	Annual audit of Federal Funds required under the Federal Single Audit Act	FY 21 Underway	FY 20 Issued 7/30/21
State Auditors	UConn Health	Annual audit of Federal Funds required under the Federal Single Audit Act	FY 21 Underway	FY 20 Issued 7/30/21
State Auditors	UConn	Annual audit of financial statements included in the Annual Comprehensive Financial Reports	FY 21 Completed	FY 21 Issued 12/7/21
State Auditors	UConn Health	Annual audit of financial statements included in the Annual Comprehensive Financial Reports	FY 21 Completed	FY 21 Issued 12/15/21
State Auditors	UConn	Departmental Statutory Required Audit (CGS Sec 2-90)	FYs 19, 20 & 21 Underway	FYs 16, 17 & 18 Issued 4/13/21
State Auditors	UConn Health	Departmental Statutory Required Audit (CGS Sec 2-90)	FYs 19 & 20 Completed	FYs 19 & 20 Issued 2/22/22

ATTACHMENT 2.2

UConn Health 340B Program Independent Outside Audit Closeout Report

The Findings and Areas for Improvements of the independent outside audit conducted by 340B Compliance Partners were presented to JACC in June of 2022. The following is a report out for each Covered Entity of items which were pending completion at the time of the June presentation.

JDH DSH 340B Program

FINDINGS:

1. *"OPAIS error for CVS 01903."*

- Close-out notes: The 340B Management team resolved this finding through an amendment to our Pharmacy Services Agreement with this contract pharmacy.

There were no other Findings pending completion for this covered entity.

HTC 340B Program

FINDINGS:

1. *"Multiple issues with NDCs used/replenished across the board. Unable to match prescriptions easily to samples provided. NDC on RX of 00944284310 from Accredo. None of the Accredo samples have that NDC nor do any invoices provided for purchase history for six months. Lack of program oversight would be a finding in no visibility into accumulations and replenishments currently- need training."*

- Close-out notes: The 340B Management team resolved this finding through aligning with the pharmacy department. The HTC 340B program is currently being managed by the pharmacy 340B team and have adopted applicable inventory replenishment processes and QA metrics. Multiple Third Party Administrator vendors have been assessed for future engagements and opportunities.

2. *"Some dispenses are for greater amount than prescription is written above the +10% as indicated. This would result in accumulation issues in Rx does not match dispense/accumulation/purchases."*

- Close-out notes: The 340B Management team resolved this finding through aligning with the pharmacy department which has provided the necessary expertise to correctly evaluate and monitor prescription filling compliance amongst contract pharmacies to ensure the 340B HTC does not over replenish on 340B.

There were no other Findings pending completion for this covered entity.






Ryan White 340B Program

There were no Findings pending completion for this covered entity.

ATTACHMENT 3.1

University of Connecticut & UConn Health
Joint Audit & Compliance Committee
September 29, 2022

Office of Audit and Management Advisory Services
Status of Open Audits
As of August 31, 2022

Audits Approved in the FY 2022 Audit Plan	Campus	Current Status	Anticipated JACC Meeting			
			Sept 2022	Dec 2022	Mar 2023	Jun 2023
CT Bioscience Innovation Fund and Regenerative Medicine Research Fund – FY22	UC/UH	Report				
Denials Management - JDH and UMG	UH	Report				
Patch Management - College of Liberal Arts & Sciences	UC	Report				
Radiology	UH	Report				
University of Connecticut Foundation FY 2021	UC/UH	Report				
Cash Handling – JDH and UMG	UH	Draft				
Memorandum of Understandings	UC/UH	Draft				
School of Business Entrepreneurial Programs on Stamford Campus	UC	Draft				
Approval Authority Review	UC	Fieldwork				
Compensatory Time	UC	Fieldwork				
Cyber Incident Management and Response	UC	Fieldwork				
Cyber Incident Management and Response	UH	Fieldwork				
Electronic Prescriptions	UH	Fieldwork				
Student Health and Wellness Electronic Prescriptions	UC	Fieldwork				
International Disclosures in Research	UC/UH	Planning				
Indirect Cost Recovery Revenues from Grants	UC	Planning				
University of Connecticut Foundation FY 2022	UC/UH	Planning				

ATTACHMENT 3.2

University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting
September 29, 2022

Status of Audit Findings
Aging of Overdue Management Actions by Functional Area Based on Original Due Date
As of August 31, 2022

Functional Area	Not Due			0-3 Mos			3-6 Mos			6-12 Mos			1-2 Yrs			2-3 Yrs			> 3 Yrs			Total
	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	
UConn:																						
UC Athletics													1									1
UC Controller					2	1		1					1									5
UC Facilities Operations																7				1		8
UC Human Resources		1									2								1	1		5
UC OVPR																			1			1
UC Procurement																1						1
UC Research Compliance Services										2			1									3
UC School of Law																			1			1
UC Student Activities													4									4
UC Student Affairs Administration													1			4	4					9
UC Office of Global Affairs	1	2			1																	4
UC Dean of Students					1																	1
UConn Total	1	3			4	1		1		2	2		7	1		4	12		3	2		43
UConn Health:																						
UCH School of Medicine																2		1				3
UCH Information Technology Services		10	7		1					1	1		4	4	2	7	5					42
UCH School of Dental Medicine	3	1											1			1	4					10
UCH Human Resources	1	1		1	2														5	2		12
UCH JDH Administration											3		6			1	3	1				14
UCH Controller							2	1									1					4
UCH JDH and UMG Revenue Cycle Management				2										1		1	4	1				9
UCH Epic													1									1
UCH CEO and EVP for Health Affairs													2									2
UC Office of Institutional Equity																2	2					4
UConn Medical Group											1											1
UCH JDH Quality and Patient Services													1									1
UCH Graduate Medical Education				1																		1
UCH CFO								2														2
UCH Ambulatory Care				2																		2
UConn Health Total	4	12	7	6	3		2	3		5	1	1	15	4	9	21	8	5	2			108
Total	5	15	7	6	7	1	2	4		2	7	1	8	16	4	13	33	8	8	4		151

Note: The net number of management open actions increased by 16 from 135 to 151 from the prior reported quarter due the issuance of new audit reports.

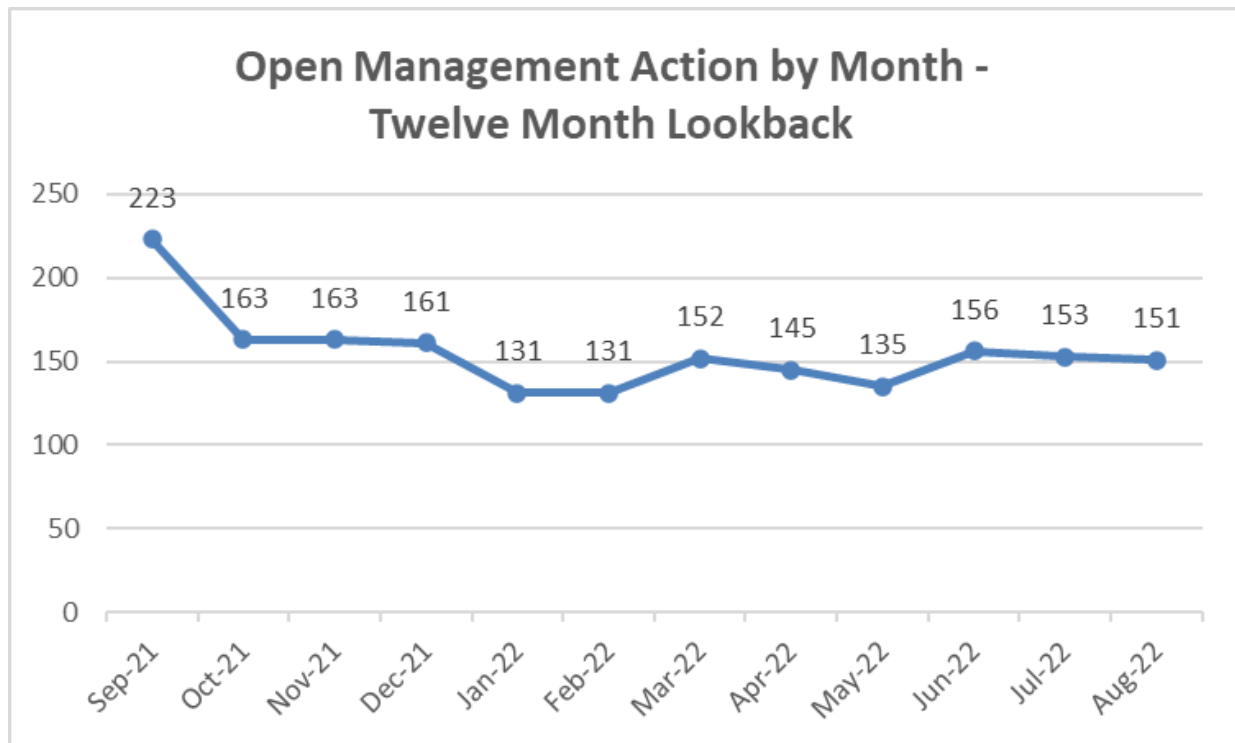
University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting
September 29, 2022

Status of Audit Findings
Aging of Overdue Management Actions by Finding Category Based on Original Due Date
As of August 31, 2022

Finding Category	Not Due			0-3 Mos			3-6 Mos			6-12 Mos			1-2 Yrs			2-3 Yrs			> 3 Yrs			Total
	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	
UConn:																						
Business Process Improvement					2						1		4	1		1	1		1	1		12
Business Purpose																			1			1
Documentation													1									1
Governance																2	1					3
Management Oversight																1						1
Monitoring																	1					1
Physical Security of Assets					1												1					2
Policy	1	2						1		1	1						1			1		8
Regulatory Compliance		1			1	1				1			1				1					6
Security																	6					6
Segregation of Duties													1									1
Use of Resources																			1			1
UConn Total	1	3			4	1		1		2	2		7	1		4	12		3	2		43
UConn Health:																						
Business Process Improvement	3													1		2	1	1	2	1		11
Documentation		3		3							4					2	1		1			14
Governance																				1		1
Management Oversight				1	1								2			2	1					7
Monitoring			2										3			2		1				8
Physical Security of Assets													1									1
Policy	1	3		1	1								1	3		3	3		1			17
Regulatory Compliance				1			1	2					3			1	2					10
Security		3	5							1	1			3		5	1					19
Segregation of Duties		1			1																	2
Technology		2											2			2	5					11
Use of Resources							1	1							1	1	3					7
UConn Health Total	4	12	7	6	3		2	3		5	1	1	15	4	9	21	8	5	2			108
Total	5	15	7	6	7	1	2	4		2	7	1	8	16	4	13	33	8	8	4		151

University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting
September 29, 2022

Status of Audit Findings
Trend Analysis of Monthly Balances of Open Management Actions
As of August 31, 2022



Analysis:

A substantial effort was made by UConn and UConn Health to decrease of the number of open actions.

The effective collaboration between UConn and UConn Health and AMAS reflects a continued commitment to resolving outstanding open actions, as depicted in the downward trend in the above line graph minus the upticks for new required management actions.

University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting
September 29, 2022

Status of Audit Findings
Management Actions Closed By Functional Areas by Risk Level
For the Period June 1, 2022 to August 31, 2022

Functional Area	Implemented			Recommendation Moved to / Included in Another Audit			Total
	L	M	H	L	M	H	
UConn:							
UCH School of Medicine	1						1
UC Enrollment Planning and Management		1					1
UConn Total	1	1					2
UConn Health:							
UCH Information Technology Services	1						1
UCH JDH Administration		1	2				3
UCH Human Resources	1						1
UC Office of Institutional Equity				1			1
UCH CFO		1					1
UConn Health Total	2	2	2	1			7
Total	3	3	2	1			9

University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting
September 29, 2022

Status of Audit Findings
Risk Level Descriptions

The description of the risk levels identified in this report is based on the following methodology. Observations are ranked based on an analysis of the likelihood and impact of a control or process failure. Considerable professional judgment is used to determine the risk ratings. Accordingly, others could evaluate the results differently and draw different conclusions. The risk levels provide information about the condition of risks and internal controls at one point in time. Future changes in environmental factors and personnel actions may significantly impact the risk ratings.

Low	<p>Observation has a low probability of occurring. Preventive controls do not exist but detection and mitigating controls exist. Minimal exposure that will not typically lead to a material error and corrective action may lead to improvements in efficiencies and effectiveness. The issues identified may include:</p> <ul style="list-style-type: none">• Noncompliance with internal policies• Lack of internal policy that is not mandated by federal and state requirements• Minimal financial losses• Minor operational issues
Moderate	<p>Observation is likely to occur or has occurred. Preventive and detection controls do not exist but mitigating controls exist. Exposure that requires priority attention because the observation has or may result in:</p> <ul style="list-style-type: none">• More than minimal financial losses or fraud or theft of resources• Noncompliance with laws and regulations or accreditation standards• Ineffective internal policy or practice• Reputation damage• Negative impact to audit area under review, which includes continuity, security and privacy issues• Safety and health concerns
High	<p>Observation has a high probability of occurring or has occurred at a high rate. Preventive, detection and mitigating controls do not exist. High impact exposure that requires immediate attention because the observation has or may result in:</p> <ul style="list-style-type: none">• Substantial financial losses or fraud or theft of resources• Noncompliance with significant laws and regulations• Serious reputation damage• Negative impact to systemwide operations, which includes continuity, security and privacy issues• Significant safety and health concerns

ATTACHMENT 3.3

University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting

Office of Audit and Management Advisory Services
Audit Plan 2023

TITLE	AREA / SCOPE	STATUS	SYSTEM
CLINICAL			
Electronic Prescriptions	Review access to the prescription functionality in the Epic electronic record and assess whether transmitted prescriptions correspond with a documented medical condition.	In Process	UConn Health
Student Health and Wellness Electronic Prescriptions	Review access to the prescription functionality in the electronic record and assess whether transmitted prescriptions correspond with a documented medical condition.	In Process	UConn
Lab Utilization	Assess the medical necessity, utilization and reimbursement of lab services using data analytics and chart review. Trend analysis of Medicare Laboratory Billing with potential for abuse with COVID-19 Add-on Testing.	Carryforward	UConn Health
Student Health and Wellness Counseling and Mental Health	Assess whether services are planned, provided, documented, and billed in compliance with governmental regulations, payor requirements and the associated charges are complete, accurate and timely.	Carryforward	UConn
Cardiology	Assess whether services billed by Cardiology were ordered, provided and documented in compliance with governmental regulations, payor requirements and the associated charges, and copayments/deductibles are complete, accurate and timely.	New	UConn Health
Emergency Department Revenue Cycle	Assess whether services billed by the Emergency Department were ordered, provided and documented in compliance with governmental regulations, payor requirements and the associated charges, and copayments/deductibles are complete, accurate and timely.	New	UConn Health
Inpatient Psychiatry Services	Assess whether services billed by Inpatient Psychiatry were ordered, provided and documented in compliance with governmental regulations, payor requirements and the associated charges, and copayments/deductibles are complete, accurate and timely.	New	UConn Health
FINANCIAL & OPERATIONAL			
Cash Handling JDH and UMG	Assess the internal controls surrounding the collection of cash related to co-payments and deductibles at medical offices at John Dempsey Hospital and UConn Medical Group practices.	Draft	UConn Health
Memorandum of Understandings between UConn and UConn Health	Evaluate the Memorandum of Understandings between UConn and UConn Health to determine whether services are being provided as agreed and whether there is potential for cost savings across both systems.	Draft	UConn & UConn Health
School of Business Entrepreneurial Programs on Stamford Campus	Analyze the revenue, expenditures and campus resources used for existing School of Business Graduate entrepreneurial programs on the Stamford Campus and the distribution of net income.	Draft	UConn

**University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting**

**Office of Audit and Management Advisory Services
Audit Plan 2023**

TITLE	AREA / SCOPE	STATUS	SYSTEM
Approval Authority Review at UConn	Assess the appropriateness and accuracy of designated approvers in the significant systems including CORE-CT, Concur, KFS, HuskyBuy, HuskyTime and Sage.	In Process	UConn
Compensatory Time UConn	Assess approval and documentation practices to determine compliance with bargaining unit contracts and UConn Policy.	In Process	UConn
Indirect Cost Recovery Revenues from Grants	Analyze the basis of the revenue generated from and the uses and oversight of Indirect Cost Recovery funds (4-ledger accounts) posted to unrestricted KFS accounts, as well as compliance with UConn policies.	In Process	UConn
Clinical Engineering – Equipment Management	Assess whether clinical equipment is replaced at the end of its useful life, recorded and tracked in inventory, and inspected and maintained in accordance with UConn Health policy and manufacturer's specifications.	Carryforward	UConn Health
Concur PCard (Purchasing)	Assess effectiveness of internal controls related to compliance with PCard and purchasing policies. Compare prices to HuskyBuy vendor catalogues.	Carryforward	UConn
Mark Edward Freitas Ice Forum	Review and assess Ice Forum financial operations and related controls designed to account for revenue and expenses, including facility and equipment rentals.	Carryforward	UConn
Patient Billing	Evaluate whether charges for services billed under the hospital and professional billing functionality in Epic are captured and reimbursed in accordance with the terms of payor contracts.	Carryforward	UConn Health
Physician Workloads	Review and evaluate physician workloads to determine whether physicians' schedules are full based on the number of patients. Determine whether Physician Incentive Payments are made in accordance with UConn Health policy.	Carryforward	UConn Health
Technology Commercialization Costs and Revenue Assessment	Assess operating procedures for reporting royalty revenue and reconciling royalty revenue to cash receipts. Analyze patent costs and number of patents filed to identify potential cost savings associated with filing internally to reduce expenditures associated with outside legal firm.	Carryforward	UConn & UConn Health
Vendor Management – Husky Buy	Assess the effectiveness of the vendor management policies and procedures implemented in HuskyBuy including duplicate vendors, payment terms/discounts and debarment verification procedures.	Carryforward	UConn
University of Connecticut Foundation FY22	Examine fiscal year 2022 disbursement of funds and gifts to the Foundation for compliance with Connecticut General Statute Section 4-37 et seq. and fiscal year 2022 deposit of funds for compliance with University policies.	Mandatory	UConn & UConn Health
Cash Handling Dental	Assess the internal controls surrounding the collection of cash related to co-payments and deductibles at UConn Health dental clinic offices.	New	UConn Health

University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting

Office of Audit and Management Advisory Services
Audit Plan 2023

TITLE	AREA / SCOPE	STATUS	SYSTEM
Client Contracts and Receivables	Review and assess effectiveness of contract management and controls designed within Epic to bill and collect receivables from clients for contractual services provided by UConn Health.	New	UConn Health
Concur Travel	Review and evaluate Concur travel procedures and controls surrounding planning, approvals, and use of travel cards to assess compliance with UConn policies.	New	UConn
Special Payroll	Assess Special Payroll operations for compliance with State laws CGS10a-20 and CGS10a-108(a) and UConn policies; and determine the effectiveness of related controls designed to administer and manage Special Payroll.	New	UConn
INFORMATION TECHNOLOGY			
Cyber Incident Management and Response UConn	Ensure response plans are adequate to deal with potential harm to internal systems, infrastructure and loss of customers and reputation. Evaluate the overall process to detect and respond to security incidents such as ransomware. Evaluate whether the response plan is adequate relative to the size and scope of threats in the current threat landscape.	In Process	UConn
Cyber Incident Management and Response UConn Health	Ensure response plans are adequate to deal with potential harm to internal systems, infrastructure and loss of customers and reputation. Evaluate the overall process to detect and respond to security incidents such as ransomware. Evaluate whether the response plan is adequate relative to the size and scope of threats in the current threat landscape.	In Process	UConn Health
Decentralized IT General Controls	Assess compliance with Information Security policies, regulatory requirements, and industry standards for decentralized IT organizations such as Radiology, Pharmacy, School of Dental Medicine, and Clinical Engineering.	Carryforward	UConn Health
Patch Management for Decentralized IT - School of Business	Evaluate effectiveness of control processes for identifying, acquiring, installing, and verifying patches for infrastructure-related systems such as operating systems and server software for the decentralized IT organization within the School of Business.	Carryforward	UConn
PeopleSoft Student Administration System - User Account Security	Assess the PeopleSoft application's compliance with Information Technology policies, regulatory requirements such as Gramm-Leach Bliley Act (GLBA) and the Federal Educational Rights and Privacy Act (FERPA), and industry standards for access control.	Carryforward	UConn

**University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting**

**Office of Audit and Management Advisory Services
Audit Plan 2023**

TITLE	AREA / SCOPE	STATUS	SYSTEM
Microsoft Office 365 Security and Configuration	Assess the University's implementation of the Microsoft Office 365 and OneDrive cloud service in accordance with vendor recommendations and industry best practices for the secure configuration of the platform. Areas of focus may include controls for user accounts and authentication, application permissions, data management, email security, auditing and storage.	New	UConn
Microsoft Office 365 Security and Configuration	Assess the University's implementation of the Microsoft Office 365 and OneDrive cloud service in accordance with vendor recommendations and industry best practices for the secure configuration of the platform. Areas of focus may include controls for accounts and authentication, application permissions, data management, email security, auditing and storage.	New	UConn Health
Oracle DBMS Security and Configuration	Evaluate the configuration of Information Technology Services Oracle database management system, including the use of Oracle platforms such as Exadata. Assess the implementation of security measures including access controls, data backup and recovery, physical security, event logging and monitoring, integrity assurance, and data encryption.	New	UConn
COMPLIANCE			
International Disclosures in Research	Assess current policies and procedures related to defining, preventing, and detecting unallowable foreign influences on faculty and intellectual property including examining current process for reviewing contracts prior to UConn and UConn Health commitment.	In Process	UConn & UConn Health
CT Bioscience Innovation Fund and Regenerative Medicine Research Fund FY23	Verify fiscal year 2023 program expenditures were appropriate in accordance with the State of Connecticut – Office of Policy and Management cost standards, University cost accounting standards, and sponsor requirements; effort commitments were met; indirect cost charges were accurately calculated; and annual reports were submitted as required in the terms of each Agreement.	Mandatory	UConn & UConn Health
Faculty Consulting FY22	Evaluate the effectiveness of the established faculty consulting activity approval and oversight procedures and compliance with state regulations and University Faculty Consulting policies and procedures during the period July 1, 2021 and June 30, 2022.	Mandatory	UConn & UConn Health
NCAA Division I Reporting	Perform agreed upon procedures to evaluate the University's compliance with NCAA Division I membership requirements based on NCAA bylaw 20.9.9 for the academic year 2022-2023.	Mandatory	UConn

**University of Connecticut & UConn Health
Joint Audit & Compliance Committee Meeting**

**Office of Audit and Management Advisory Services
Audit Plan 2023**

TITLE	AREA / SCOPE	STATUS	SYSTEM
Hospital Price Transparency	Verify that John Dempsey Hospital is compliant with new CMS regulations regarding hospital price transparency requirements	New	UConn Health
OTHER			
	Risk Assessment		
	Follow-up Audit Activities		
	Contingencies/Special Projects/Investigations/Consulting		

Presented for approval by the Joint Audit & Compliance Committee at their September 29, 2022 Meeting

ATTACHMENT 4.1

Each Compliance Plan deliverable is linked to one or more of the seven elements of an effective compliance program as established in the US Federal Sentencing Guidelines, and outlined below.

Seven Elements of an Effective Compliance Program



























Deliverables	
Continue to enhance the institution-wide policy program including launching the MCN policy management software system at UConn Health for clinical policies;	● ●
Provide policy development guidance and education to policy owners;	● ● ●
Evaluate and centralize UConn privacy policies and procedures inventory to enhance accessibility and ensure compliance;	● ●
Develop and communicate UConn policy inventory and status reports to policy owners to increase regular review and revision of policies and accompanying procedures;	● ● ●
Expand the current sharing of program data at Joint Audit and Compliance Committee (JACC) meetings to illustrate where compliance efforts are making the most difference;	●
Establish UConn Data Governance Committee in collaboration with IT Security;	● ● ●
Engage new UConn and UConn Health leadership in key-compliance positions and expand work with Regional Campus Directors;	● ● ●
Establish Annual Compliance Program Report to JACC to increase communication on key compliance accomplishments and goals;	● ● ●
Develop Educational Resources for Managers and Supervisors to enhance compliance understanding, a culture of compliance, and training completion and enforcement;	● ● ● ● ●
Develop increased micro-learning resources for UConn and UConn Health;	● ●
Enhance existing FERPA training program for faculty and staff;	● ●
Establish requirement for specific employees and Graduate Assistants with job-related access to student information to complete FERPA training;	● ●
Create University-wide mandatory compliance training committee to focus on developing a framework of best practices, self-assessment tools, and the standardization of training follow-up methods to promote accountability and consistency across the compliance program;	● ● ● ● ●
Collaborate with Audit and Management Advisory Services to develop monitoring plan that compliments the annual audit plan;	● ● ●

Seven Elements of an Effective Compliance Program



Deliverables

Develop and disseminate University-wide compliance culture survey to provide the workforce a mechanism to provide feedback on UConn and UConn Heath's culture of compliance and identify opportunities for enhancement;	 
Enhance process for monitoring and follow up with senior leadership on recommendations following a compliance investigation;	  
Support "listen-up" culture with management/supervisors;	  
Enhance internal investigation guidance including the development of a compliance investigation guidance manual;	 
Engage with investigative offices across the University to share development opportunities and resources and establish consistent mechanisms for collecting and evaluating investigation data to identify trends and opportunities for enhancement;	  
Work with Human Resources to offer compliance-related recognition opportunities (i.e. President's Spirit Awards);	 
Develop and propose certification program for compliance competencies and education as a compliance incentive;	 
Partner with Labor Relations at UConn and UConn Health to evaluate the effectiveness of accountability measures for compliance violations;	 
Continue education of management and senior leadership on response and prevention efforts; Expand the use of innovative prevention tools, such as the "Test Your Knowledge" initiative to assist employees in assessing understanding of compliance topics and policies;	 
Collaborate with IT Security to review the Data Breach Response Protocol and Data Subject Rights as well as applicable procedures to ensure existing response is compliant with current laws, best practices, and institutional policies;	  

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ATTACHMENT 4.2

University of Connecticut & University of Connecticut Health Center Joint Audit & Compliance Committee Meeting

SIGNIFICANT COMPLIANCE ACTIVITIES

Organizational Update - The Office of University Compliance welcomed Anida Sundara on July 29th to fill the Policy Software Manager role, which will be primarily responsible for the administration and management of the MCN Policy Manager software for the University as well as document control functions at Storrs and the Regional Campuses.

Training - Graduate Assistant (GA) Training has launched for the 2022-2023 academic year. All Graduate Assistants are required to complete the training within 45 days of starting their GA position.

University Compliance developed an [online resource page](#) to supplement this year's GA training and to encourage further engagement in the training content and supplement learning.

Education and Awareness - University Compliance completed its Summer Series, providing education and awareness to the UConn and UConn Health communities on the following topics since the June meeting:

- Outside Employment
- Hiring Employees for Outside Employment
- Asset Control Policy
- Surplus Property Policy
- Social Media Policy
- Reemployed-Retirees
- Workplace Violence Prevention
- Animals on Campus Policy
- UConn's Policy on Policies

Investigations - As of September 1, 2022, University Compliance has received 80 reported concerns, 66% of which have since been reviewed and closed. Of the 80 reports, 43 are from UConn and 37 are from UConn Health. The total number of reports received in 2022 to date reflect a 34% increase from 2021.

Privacy - Privacy provided FERPA training to students in the Honors Guides for Peer Success Team of the Honors Program and partnered with the Office of the Registrar to provide FERPA training to approximately 100 students in the UConn Connects mentoring program.

Privacy collaborated with Information Security in the formation of the membership and inaugural meeting of the Information Governance Committee for September 2022.

University of Connecticut & University of Connecticut Health Center Joint Audit & Compliance Committee Meeting

SIGNIFICANT COMPLIANCE ACTIVITIES

Healthcare Compliance and Privacy -

The Office of Healthcare Compliance and Privacy welcomed Elle Box to the role of AVP for Healthcare Compliance and Privacy.

Compliance documentation and coding reviews are currently underway for:

- Facet Joint injections
- Telehealth services
- Concurrent surgeries
- Co-surgery procedures

Policy Update - With the support of the Migration Team and University Communications, Dr. Liang issued an institution-wide memo alerting UCH community members to the project, Executive Steering Committee, and Migration Team.

Approximately 1,200 standards documents have been migrated to the software and programmed with metadata to automate policy processes and enhance searchability. The UCH Nursing Practice Manual (~200 active documents) is being prepared for software migration according to the system requirements.

OUC is working with UCH senior leadership to standardize document classification definitions for consistency (e.g., clinical guideline, nurse-driven protocol, clinical protocol, clinical pathway, standing order, etc.).

The University approved a new Academic Affairs Policy on Policies and Protocols. It applies to the Storrs, Regional and UConn Health campuses, and sets the standard for all Academic Affairs units (i.e., school/college, campus, department, division, and other units therein).

Additionally, Policies on Faculty Consulting; and Conduct History Review (Admissions) were revised and approved by the Senior Policy Council.

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ATTACHMENT 4.3

HEALTHCARE COMPLIANCE AND PRIVACY MATTERS



2021 Open Payments Data

On Thursday, June 30 CMS published the 2021 Open Payments data. If you fall under a covered provider type, we encourage you to check the data disclosed under your name.

[Read More](#)



Office of Healthcare Compliance and Privacy
263 Farmington Avenue, Farmington, CT 06030

Phone: 860.679.4177 Fax: 860.679.1016

UConn
HEALTH

HEALTHCARE COMPLIANCE AND PRIVACY MATTERS



Unauthorized Access to Patient Records

Unauthorized access to patient records occurs when an individual accesses protected health information (PHI) without authorization or permission.

[Read More](#)



The Office of Healthcare Compliance and Privacy Has a New Location

In order to accommodate our growing team, the OHCP office has expanded to include AGO69.

[Read More](#)



Office of Healthcare Compliance and Privacy
263 Farmington Avenue, Farmington, CT 06030

Phone: 860.679.4177 **Fax:** 860.679.1016

UCONN
HEALTH

HEALTHCARE COMPLIANCE AND PRIVACY MATTERS



Medical Student Documentation

Did you know that Medicare allows teaching physicians to utilize medical student documentation to support billing evaluation and management (E&M) services?

[Read More](#)



Office of Healthcare Compliance and Privacy
263 Farmington Avenue, Farmington, CT 06030

Phone: 860.679.4177 Fax: 860.679.1016

**UConn
HEALTH**

Compliance Summer Series



COMPLIANCE INFORMATION AND RESOURCES ALL SUMMER LONG



After 27 great years as a UConn employee, Toni will soon be retiring. **Congratulations Toni!**

Toni wants to ensure a smooth transition prior to departing the University and has been learning about **post state employment requirements**, as well as **managing records at work**.

In addition to pictures of her loved ones and several accolades, Toni's office is filled with equipment that they have accumulated over the years. While Toni's office furniture is fairly new, items such as Toni's computer, and tablet are a bit dated. Toni is wondering if it would be okay to discard or keep such items. **What do you think?**



START WITH UCONN HEALTH'S ASSET CONTROL POLICY

In this case, Toni should review **UConn Health's Asset Control Policy** and Procedures. This is important because proper disposition of State of Connecticut assets is required by law.

Toni should also engage UConn Health's Office of Logistics Management (OLM) Surplus Property Unit. They are responsible for administering the removal and reuse of UConn Health equipment. OLM provides UConn Health departments the opportunity to surplus serviceable equipment which then go to the Surplus Property Unit where other departments and the general public have an can acquire the materials at a reasonable cost on the **public surplus website** . Recycling surplus property helps to:



Reduce the institution's waste stream



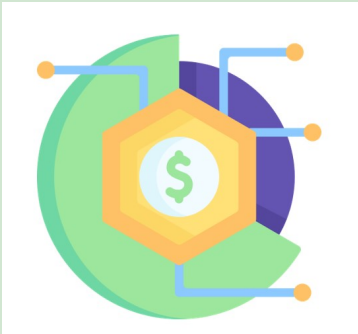
Provide departments a low cost alternative to purchasing new equipment



Maximize the recovery of capital investment in our equipment

HERE ARE THE TYPES OF ASSETS COVERED UNDER THE POLICY

Items or equipment that are deemed either Capital, Controllable, or Surplus by the UConn Health.



Capital Asset:

An item with an expected useful life longer than a single reporting period (i.e. a fiscal year), arising from an expenditure of \$5,000.00 or greater.

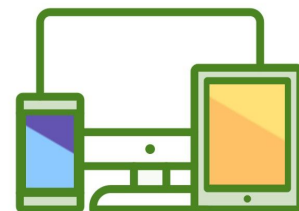
In general, capital assets must be physically tagged and their current location must be kept up-to-date in UConn Health's official Capital/Controllable Inventory List.

Some items that cannot be physically tagged (such as software, surgical instruments or other assets where physical tagging would be impossible or impair the use of the asset) are tagged virtually, rather than physically.

Controllable Asset:

An item which does not meet the financial criteria for a capital asset, being less than \$5,000.00 in value, but which must be tracked because of its sensitive, portable and/or theft-prone nature. UConn Health has designated the following types of assets as controllable:

- Computers (desktops and laptops)
- Equipment storing confidential data related to HIPAA, FERPA or State of Connecticut intellectual property
- Smart phones
- Tablets



UConn Health's controllable asset inventory is maintained in the MACOLA system.



Surplus Property:

Any tangible item owned by UConn Health that is no longer required for use in a department. Using the [Electronic Forms Workflow](#) system, such items should be communicated to Logistics and scheduled for removal.

Regardless of the category the item falls under, all are UConn Health property and it would not be permissible to keep.

Under no circumstances shall UConn Health property be discarded without proper disposition through the established asset control process.

Completion of an LM-2 allows for surplus items in your unit to be removed and evaluated for reuse by other departments, public sale or disposal.

EMPLOYEE RESPONSIBILITIES

Employees within each custodial department are responsible for:



Ensuring the department's assets are procured, stored, secured and maintained appropriately



Documenting and reporting asset purchases, moves, trade-ins, transfers, leases, loans, donations, impairments, disposals, or losses in a timely manner (within 1 week) using the **Electronic Form Workflow** system



Providing asset control inventory staff with timely access to equipment; and assisting with inventory reconciliation as needed

Additional information about asset control responsibilities, procedures and forms can be found in UConn Health's Asset Control Procedure Manual:

<http://opa.uchc.edu/OLM/AssetCtrlProc.aspx>

NEED MORE INFORMATION?

Contact UConn Health's Office of Logistics Management's Surplus Property Unit

860-679-1956

assets@uchc.edu

http://opa.uchc.edu/OLM/surplus_property.aspx

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Compliance Summer Series



COMPLIANCE INFORMATION AND RESOURCES ALL SUMMER LONG

Workplace Violence Prevention Policy

Both UConn and UConn Health are committed to maintaining a working environment that is free from workplace violence, with the safety and security of workforce members being of the utmost importance. As such, both UConn and UConn Health have policies designed to provide for the protection from workplace violence as well as outlined procedures for reporting and responding to such incidents. These policies support the executive order, issued by the Governor of the State of Connecticut that was implemented in 1999 outlining a zero tolerance policy for workplace violence.

UConn Policy

UConn Health Policy

WHAT BEHAVIORS MAY CONSTITUTE "WORKPLACE VIOLENCE"?



The **Executive Order** specifically identifies three types of workplace violence.

Bringing any weapon or dangerous instrument into any state worksite

Using, attempting to use, or threatening to use any weapon or dangerous instrument in a state worksite

Causing or threatening to cause death or physical injury to any individual in a state worksite

The spectrum of impermissible behavior is, however, broader than these three examples. According to the National Institute for Occupational Safety and Health (NIOSH), "workplace violence" is defined as: "any physical assault, threatening behavior or verbal abuse occurring in the work setting. It includes but is not limited to beatings, stabbings, suicides, shootings, rapes, near suicides, psychological traumas such as threats, obscene phone calls, an intimidating presence, and harassment of any nature such as being followed, sworn at, or shouted at." **The State of Connecticut Violence in the Workplace Policy and Procedures Manual, April 2012**

EXAMPLES OF BEHAVIORS IDENTIFIED AS POTENTIAL INCIDENTS OF WORKPLACE VIOLENCE



Threatening, intimidating, and/or harassing an employee

Possession or use of a weapon on UConn / UConn Health property, or the attempt or threat of such possession or use (unless required to do so as a component of one's job)

Cause or threaten to cause physical injury or death

REPORTING A CONCERN



UConn

All must report incidents of workplace violence to the administration immediately by contacting the Office of Faculty and Staff Labor Relations at 860-486-5684.

UConn Health

All must report incidents of workplace violence to the administration immediately using the **UConn Health Workplace Violence Incident Report Form**. Supervisors and managers have an elevated responsibility to ensure all acts and behaviors or workplace violence are appropriately reported.

Should there be concern for immediate threat to health, safety, or property, please call 911.

SAFER CARE.

UConn Health is a healing environment.

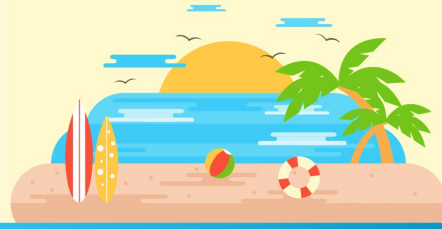
Work in the healthcare setting?

Check out the "SAFER CARE" campaign for expectations of staff, patients, and the UConn Health community. **[View it here.](#)**

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Compliance Summer Series



COMPLIANCE INFORMATION AND RESOURCES ALL SUMMER LONG

Have you ever wondered if you could hire another UConn Health employee to complete work for you outside of UConn Health?

If you are considering hiring another UConn Health employee to conduct work for you external to UConn Health, there are some important things to consider to ensure compliance with the State Code of Ethics.



Based on the State Code of Ethics, it is impermissible for a UConn Health supervisor to hire a subordinate employee for outside work and vice versa, as it could impair the independence of judgement and create a conflict of interest. This applies to all supervisors and subordinates up and down the chain of supervision (**Advisory Opinion 2008-5**).



It is also impermissible for a UConn Health employee to advertise or solicit clients for an outside business while acting in their UConn Health employment, as this would be utilizing one's state position for their personal financial gain and the financial gain of an associated business.



Lastly, one is not permitted to utilize UConn Health time, materials, resources, or personnel in completing work for an outside business.

Applicability and Resources

Ultimately, it is the individual responsibility of UConn and UConn Health employees to adhere to the State Code of Ethics. Violations of the outside employment rules could be enforced by the Office of State Ethics and result in fines up to \$10,000 per violation. For more information on the State Code of Ethics and the Post-State Employment rules, go to **compliance.uconn.edu** or **<https://portal.ct.gov/Ethics/Public-Official-and-State-Employees-Information>**.

Test Your Knowledge

Now that you've engaged with these resources, be sure to take our "**test your knowledge**" challenge by clicking below.

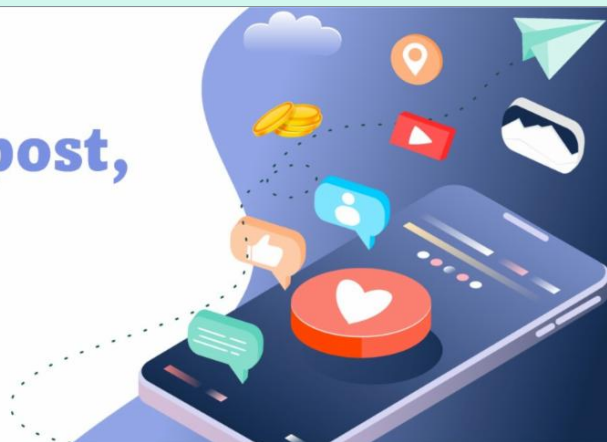
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Before you post, read this.

UConn's Social Media Policy



Compliance Summer Series

Whether it be to help enhance the institution's reputation, increase the visibility of our initiatives, engage new audiences, or promote news and accomplishments, when used properly, social media can be a valuable addition to your department's communications strategy.

The University's Social Media Policy was prepared by University Communications to apply to all forms of social media, such as Facebook, Twitter, Instagram, Snapchat, blogs, YouTube, Flickr, text messages, and other, lesser known platforms.

This policy establishes standards for the responsible use of University-affiliated social media accounts and provides guidelines for differentiating an employee's personal voice on social media from their professional connection to the University.

Specific guidance on how to establish, monitor and use social media accounts can be found on UConn's Social Media Brand Guidelines.

Because standards may be updated from time to time, you are encouraged to regularly consult these standards.

[View the Policy](#)

[View Guidelines](#)

Need Further Assistance?

Office of University Communications
860.486.3530
communications.uconn.edu/

TEST YOUR KNOWLEDGE

Now that you've engaged with these resources, be sure to take our "test your knowledge" challenge by clicking below.

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ATTACHMENT 5.1

University of Connecticut
Joint Audit & Compliance Committee Meeting
Public Session
September 29, 2022

UConn – Information Technology Services

Financials FY2023 Operating

State Appropriation and Tuition Budget and Forecasted Expenditures:

	Budget	<u>\$40.9M</u>
Forecasted Personal Services and Fringe Benefits		\$27.9M
Forecasted Operating Expenses		<u>\$ 12.2M</u>
Forecasted Carryforward		<u>\$ 0.8M</u>

To date in FY2023 ITS's operating budget was cut by \$765K, our deferred maintenance budget remains at \$1.7M and our 5-year wired access layer refresh budget was decreased to \$2.0M (our original request was 5-years at \$6.0M per year and FY2023 is year 4).

Also, in FY2023, ITS received operating budget for Cyber Security and Kual Cloud, capital funds for the \$1.3M investment in high performance computing hardware, and one time capital for Cyber Security equipment and Kual software implementation.

Information Technology Staffing (as of 8/23/22)

- ITS has ten new open positions.
- There have been eleven new hires since July 1, 2022.
- There have been eight new Special Payroll hires since July 1, 2022.
- Since July 1, there has been one separation and no new retirements.

Major Outages (as of 08/23/22)

<u>Outage Taxonomy</u>	<u># of Issues</u>	<u>Systems Affected</u>
Network Issue - Hardware	0	
Network Issue - Software	1	Issues affecting upgrade of Core network routers
Network Issue – Request Flood	0	
System Issue - Hardware	0	
System Issue - Software	2	SSO Outage, Inbound Email issues
Third Party	0	

Total # of Major Outages: 3

UConn – IT Projects Status (as of 08/23/22)

Project Name	Brief Project Description	Planned Budget	Actual Spend	Status	Rational for Yellow and Red Status	Expected Completion Date
WALR FY 2021 Phase 2	Upgrade all network equipment and wired access infrastructure for the University	\$4.200M	\$3.790M	GREEN	Construction was completed on time, under budget. Completed designs for future phases.	12/31/2022
WALR FY 2022 Phase 3	Upgrade all network equipment and wired access infrastructure for the University	\$4.000M	\$0.935M	GREEN	Completed planned summer work. A portion of the Phase 3 budget and scope has been shifted into Phase 4.	02/28/2023
WALR FY 2023 Phase 4	Upgrade all network equipment and wired access infrastructure for the University	\$2.000M	\$0.028	GREEN	Initiated work on Phase 4.	06/30/2023
Kuali 2022	Migrate university Kuali Financials system from on-prem to Kuali-Co cloud solution.	\$1.400M	\$0.024	GREEN	Began planning phase in August.	TBD

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ATTACHMENT 5.2

Joint Audit & Compliance Committee: September 2022

UConn Health Information Technology Services

Public Session Key Takeaways

- **Financials FY2022: (\$2,652,465) driven by a unbudgeted Salary/fringe benefits expense changes.**
- **16 positions open**
- **0 new positions**
- **Completed 28 projects May – July 2022 (off rolling annual avg 11/month)**
- **Interim leadership in CISO, AVP for Applications and Director of Project Management Office**
- **All projects are green except for a wireless upgrade (red) and network segmentation and three are complete:**
 - **Wireless upgrade (RED):** Project is delayed due to Supply Chain delays.
 - **Network Segmentation (YELLOW):** Strategy to provide segmentation changed due to receiving funding for network Switch replacements which is not a precursor event to the segmentation. This efforts timeline needs to be shifted to Spring of 2023.
 - **3rd Party Risk Management Vendor Selection, Social Engineering Studies and Cloud Access Security Broker projects have all completed**
- **Three meetings of IT Governance have occurred to approve and prioritize major projects**
- **Epic focus has been: Monkeypox; COVID vaccine boosters; Epic EMR go live for NICU; projects approved and managed via ITG**

University of Connecticut
Joint Audit & Compliance Committee Meeting
Public Session
September 2022

UConn Health – Information Technology Services

Financials FY2022 Operating

State Appropriation and Tuition Budget and Forecasted Expenditures:

Budget	\$55,710,081
Personal Services and Fringe Benefits	\$36,398,351
Purchased Services	\$19,311,730
FY22 YTD Actual/Projected	<u>\$58,363,046/55,710,081</u>
YTD Variance	\$(2,652,465)

Information Technology Staffing (as of 08/31/2022)

Open Positions, New Positions, Positions on Hold, Terminations and the areas they represent.

1. Open Positions:
 - a. 16 Open Technology Positions
2. New Positions: none
3. Hold: none
4. Terminations: none

Outages (06/01/22 – 8/19/22)

<u>Outage Taxonomy</u>	<u># of Issues</u>	<u>Duration</u>	<u>Systems Affected</u>	<u>Remediation</u>
Virtual Private Network	1	90 minutes	A variety of critical and non-critical systems	Outage related to old hardware which was immediately replaced.

Total # of Outages: 1