UTHealth® Houston
Auditing and Advisory Services
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Epic Interfaces

#HSC26AS1053

EXECUTIVE SUMMARY

Auditing & Advisory Services (A&AS) has completed an assurance engagement of Epic Interfaces. This engagement was performed at the request of the UTHealth Houston (UTHealth) Audit Committee and was conducted in accordance with the Global Internal Audit Standards.

Background

UTHealth uses Epic, an electronic health record (EHR) system, to manage patient information, clinical workflows, scheduling, billing, and care coordination. Epic interfaces connect the organization's EHR system with internal and external applications, enabling the secure and automated exchange of critical patient, clinical, operational, and financial data. These interfaces facilitate the seamless flow of information such as patient demographics, clinical orders, laboratory results, and billing details across integrated systems.

Objectives

Our objective was to determine whether controls over selected Epic interfaces are adequate and functioning as intended. Specifically, to determine if:

- Policies and procedures are documented and maintained.
- Interface governance and oversight processes are established.
- Data integrity and reconciliation controls are implemented and operating effectively.
- Error handling and monitoring controls are implemented and operating effectively.
- Security and access controls are implemented and operating effectively.

Scope Period

January 1, 2026, to May 26, 2026

Conclusion

Overall, controls around Epic Interfaces are adequate and functioning as intended. We noted the following opportunities for improvement:

#	Observation Summary	Risk	Risk Rating
1	Processes have not been established to ensure interface owners listed on the master inventory are routinely reviewed for accuracy.	Increased risks of ineffective monitoring and delayed issue resolution.	**Medium**
2	Processes have not been established to ensure adequate documentation and retention of Rhapsody user access.	Inappropriate and/or unauthorized access.	**Medium**

Epic Interfaces

3	A process has not been established to ensure the claims file transfer (FTP) policies and procedures are routinely reviewed and updated.	Outdated policies and procedures may lead to billing inaccuracies or regulatory noncompliance.	**Medium**

OBSERVATIONS & MANAGEMENT RESPONSES

#1 – Interface Operational Owners
Cause Processes have not been established to ensure interface owners listed on the master inventory are routinely reviewed for accuracy. **Risk** Increased risks of ineffective monitoring and delayed issue resolution. **Condition** We selected a sample of 20 interfaces from the Master Inventory and noted that 15 interfaces did not accurately list the owner. **Criteria** HOOP 175 Roles and Responsibilities for University Information and University Data states that "All Users must be aware of their role(s) and accept the associated responsibilities. Role responsibilities cannot be delegated except as provided" in the policy.
Recommendation(s) Implement a process to periodically review and update interface ownership information to ensure responsibility assignments remain current and accurate. **Rating** Medium
Management Response Epic team will establish a recurring ownership review process for the Interface/Integrations. Ownership validation will be performed with both vendors and UT Operations through explicit outreach during every EPIC-TADR event cycle, which is currently conducted annually and is planned to transition to a bi-annual cadence. Any ownership changes identified during the review will be updated in the 3rd Party Integration and Interfaces.xlsx consolidated document, and tracked to ensure responsibility assignments remain current and accurate. **Responsible Party** James Griffiths, MD, Associate Vice President of Healthcare IT **Implementation Date** November 12, 2026

#2 – Rhapsody Access
Cause Processes have not been established to ensure adequate documentation and retention of Rhapsody user access. **Risk** Inappropriate and/or unauthorized access. **Condition** We reviewed the access controls process for Rhapsody, the institution's primary integration engine for supporting data exchange between Epic and connected systems, and noted the following: • The date the user access review was completed cannot be independently verified. While the file name includes a completion date, the file's "last accessed" date is updated each time the file is opened on SharePoint, which prevents an accurate determination of when the review was actually completed. • The Assistant Director, with Administrator's access, serves as the reviewer and approves their own access with no independent review or secondary approval. **Criteria** ITPOL-004 Access Control Policy, Section 6.2.6 states, "Owners or their designees must review access at least quarterly to ensure access privileges, including administrative and special access accounts, are appropriate. A user's access authorization shall be appropriately modified or removed when the user's employment or job responsibilities within the agency change." The EDI Standard Operating Procedures (SOP), along with the Onboarding and Offboarding Checklists, outline procedures for access to integration platforms as follows: • Logical access to integration platforms is periodically reviewed. • Audit and compliance requests related to interfaces are supported with documented evidence. • Access Management Controls requires that review results are documented and retained.
Recommendation(s) Work with IT Security to assess the feasibility of provisioning Rhapsody access controls through SailPoint. In addition, management should implement a formal process to ensure that user access records are maintained, access reviews are conducted periodically, and evidence of completion is appropriately documented. **Rating** Medium
Management Response Management will implement provisioning Rhapsody access through SailPoint. Quarterly access reviews will be managed and documented in SailPoint, with Assistant Director's access subject to review and approval by Dr. Griffiths. **Responsible Party** Larry Amerman, IT Security Architect Anitha Chandran, Assistant Director, Epic and Clinical Integration Healthcare IT **Implementation Date** November 12, 2026

#3 – Claims FTP Policies and Procedures
Cause A process has not been established to ensure the claims file transfer (FTP) policies and procedures are routinely reviewed and updated. **Risk** Outdated policies and procedures may lead to billing inaccuracies or regulatory noncompliance. **Condition** Policies and procedures for Epic Claim FTP have not been updated to align with current practices. Some claims and payment data are transferred as files from Epic's network-attached storage (NAS) to UT's NAS via the institution's scheduling platform. Management informed us that the policies and procedures originally developed during the Epic implementation are currently under review and being updated to align with the current file-based transfer process. **Criteria** COSO Internal Control – Integrated Framework describes control activities as "actions established through policies and procedures that help ensure that management's directives to mitigate risks to the achievement of objectives are carried out." Control activities are performed at all levels of the entity and may be either preventive or detective.
Recommendation(s) Implement a monitoring process to ensure that policies and procedures are reviewed periodically and updated as necessary to reflect current processes and practices. **Rating** Medium
Management Response Management agrees with the recommendation. A formal review process will be established to ensure that claims file transfer (FTP) policies and procedures remain current, accurate, and aligned with operational processes. Claims FTP documentation, including applicable procedures, process flows, and data flows, will be formally reviewed twice annually, in February and August, and additionally whenever significant system, process, vendor, or data-flow changes occur. The review will include validation of the documented procedures against the current production process and updates to documentation as necessary. Evidence of each review, including the review date and any resulting changes, will be maintained to demonstrate completion of the control. Review Frequency: Bi-annually (February and August) and as needed following material changes. **Responsible Party** James Griffiths, MD, Associate Vice President of Healthcare IT Tony Murry, Associate Vice President of IT Infrastructure **Implementation Date** February 28, 2027

We would like to thank the Healthcare IT staff and management who assisted us during the engagement.

Daniel G. Sherman, MBA, CPA, CIA
Vice President & Chief Audit Officer

OBSERVATION RATINGS

Priority	An issue that, if not addressed timely, has a high probability to directly impact achievement of a strategic or important operational objective of UTHealth or the UT System as a whole.
High	An issue considered to have a medium to high probability of adverse effects to a significant office or business process or to UTHealth as a whole.
Medium	An issue considered to have a low to medium probability of adverse effects to an office or business process or to UTHealth as a whole.
Low	An issue considered to have minimal probability of adverse effects to an office or business process or to UTHealth as a whole.

NUMBER OF PRIORITY OBSERVATIONS REPORTED TO UT SYSTEM
None

MAPPING TO A&AS FY2026 RISK ASSESSMENT

Reference	Risk
3	Epic has a large amount of functionality that is not fully understood and utilized, resulting in operational inefficiencies.

DATA ANALYTICS UTILIZED
None

ENGAGEMENT TEAM
VP/CAO – Daniel G. Sherman, MBA, CPA, CIA
Supervisor – Kathy Tran, CIA, CISA, CISSP, CFE, CGAP
Lead – Chandra Jones, CPA, CIA, CHIAP®

END OF FIELDWORK DATE
July 23, 2026

ISSUE DATE
September 1, 2026

REPORT DISTRIBUTION
Audit Committee

Epic Interfaces

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