

The University of Texas
Rio Grande ValleyTM

UT Health RGV Behavioral Health Clinic

Report No. 22-AEN-154

November 18, 2022

Office of Audits & Consulting Services

EXECUTIVE SUMMARY

Overall Assessment:

Overall, the Behavioral Health Clinic’s front-end controls and processes were in place and functioning as intended.

Background: The UT Health RGV Behavioral Health Clinic provides service in the area of Psychiatry and Behavioral Health Services. The clinic providers include five medical doctors, one nurse practitioner and residents in training. Support staff includes two patient services representatives and two medical assistants. The clinic has been in operation since 2020.

Objective: Evaluate the effectiveness and efficiency of clinic front end internal controls and operational processes.

Scope/Period: Current policies, procedures, and activities from January 2021 to April 2022.

Observations Summary

No issues identified. The clinic offers multiple ways for patients to schedule appointments, and the medical office manager has access to various reports within the Athena report library to monitor appointment scheduling. Reports are generated to monitor no show appointments. Standardized patient registration forms are scanned and maintained with the patient’s chart.

Patient services representatives (PSRs) have attended insurance and eligibility training. Additionally, the clinic manager and PSRs have access to a General Training Guide that provides information on standard operating procedures. Providers complete and sign off medical notes and billing information timely. Providers with open records are monitored by the revenue cycle team and sent email notifications at specific intervals.

The medical office manager meets regularly with the patient access manager to review key performance indicators within the patient access function. Target goals are set and month to month progress is monitored.

The clinic has a standardized process to collect and reconcile Time of Service payments. Clinic staff followed proper cash handling procedures. Time of service collections for both outstanding copays and balances are monitored.

Risk Levels Appendix I

Priority
High
Medium
Low

We appreciate the courtesy and cooperation from UT Health RGV management and staff throughout this audit.

APPENDIX I

Risk Classifications and Definitions

Priority	High probability of occurrence that would significantly impact UT System and/or UT Rio Grande Valley. Reported to UT System Audit, Compliance, and Risk Management Committee (ACRMC). Priority findings reported to the ACRMC are defined as <i>“an issue identified by an internal audit that, if not addressed timely, could directly impact achievement of a strategic or important operational objective of a UT institution or the UT System as a whole.”</i>
High	Risks are considered substantially undesirable and pose a significant level of exposure to UT Rio Grande Valley operations. Without appropriate controls, the risk will happen on a consistent basis. Immediate action is required by management in order to address the noted concern and reduce exposure to the organization.
Medium	Risks are considered undesirable and could moderately expose UT Rio Grande Valley. Without appropriate controls, the risk will occur some of the time. Action is needed by management in order to address the noted concern and reduce the risk exposure to a more desirable level.
Low	Low probability of various risk factors occurring. Even with no controls, the exposure to UT Rio Grande Valley will be minimal. Action should be taken by management to address the noted concern and reduce risk exposure to the organization.

APPENDIX II

Criteria & Methodology

Criteria

- UT Health RGV's Patient Services Representative Standard Operating Procedures
- UT Health RGV's School of Medicine Clinical Operations Policies and Procedures
- Policy ADM 10-701 Cash and Credit Card Handling and Reporting
- Bursar's Office Cash Handling Training

Methodology

We conducted this audit in conformance with the Institute of Internal Auditor's International Standards for the Professional Practice of Internal Auditing. Additionally, we conducted this audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for findings and conclusions based on our audit objectives. The Office of Audits and Consulting Services is independent per both standards for internal auditors. These standards are also required by the Texas Internal Auditing Act.

To achieve our objective, we performed the following:

1. Interviewed management to gain an understanding of clinic workflows.
2. Reviewed the Bursar's office cash handling training and current training log.
3. Reviewed information maintained within the Athena System
4. Requested documentation such as organizational charts, job descriptions, and other supporting information

APPENDIX III

Report Distribution & Audit Team

Report Distribution

Dr. Michael Hocker, Dean of the School of Medicine
Michael Patriarca, Executive Vice Dean of the School of Medicine, and Vice President of UT Health RGV
UTRGV Internal Audit Committee
UT System Audit Office
Governor's Office - Budget and Policy
State Auditor's Office
Legislative Budget Board

Audit Team

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