Office of Internal Audit

September 4, 2019

Dr. Kirk A. Calhoun, President
UT Health Science Center at Tyler
11937 U.S. Highway 271
Tyler, TX 75708

Dr. Calhoun,

We have completed the Network Management, Incident Detection and Response Audit (Texas Administrative Code (TAC) Section 202 Audit) that was part of our Fiscal Year (FY) 2019 Audit Plan as a risk-based audit. TAC 202.76 (TAC 202) requires that a risk-based review of compliance with Texas information security standards be conducted at least biennially by an individual independent of the Information Security function. This audit was risk-based and was also included on the plan to address the TAC 202 biennial requirement.

The UT Health Science Center at Tyler's (UTHSCT) Office of Internal Audit was informed at the beginning of FY 2019 by the UT System (UTS) Audit Office that the UTS Information Security Office engaged a third party to perform incident response assessments at all UT Institutions. The assessments, performed by the third party in collaboration with the UTS Information Security Office, were to include identification of best practices and compliance with the related rules. As was communicated to our Institutional Audit Committee, and as was consistent with other UT Institutions who had a TAC 202 Audit on their FY 2019 Audit Plan, a decision was made to postpone our Network Management, Incident Detection and Response Audit (TAC 202) until the scope and objective of the third party's review at UTHSCT was available for our review. The goal was to leverage their work, if possible, in an effort to reduce any duplication of effort. Based on our review of the third party's scope and objectives for the work being performed at UTHSCT, and having participated in their all-day onsite meeting at UTHSCT, it was clear the work met the TAC 202 requirements and the objective of our Network Management, Incident Detection and Response Audit (TAC 202). As a result, the decision was made to leverage the work being performed by the third party and the UTS Information Security Office (the "review team"), with no additional testing required to be performed by the UTHSCT Office of Internal Audit to meet our planned audit objective.

In the review team's communication of the results to UTHSCT, there were a number of opportunities for improvement identified, with each rated as low, medium, or high risk. We reviewed all noted observations and agree with their risk ratings. Three (3) of the identified gaps

were deemed by the review team to be high risks. The high-risk gaps noted in the communication will be added to our Continuous Audit Tracking System (CATS) to help ensure actions are taken to address these gaps and the risks will be reassessed during next fiscal year's annual IT risk assessment.

Sincerely,

Stephen Ford
AVP, Chief Audit Executive

Enclosure
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