

Board of Examiners in Optometry

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Mescheca C. Bunyon, Board President — Patricia G. Bennett, Executive Director 4201 Patterson Avenue, Baltimore MD 21215 Phone: 410-764-4710; Email: mdh.optometry@maryland.gov

2022 SESSION POSITION PAPER

BILL NO: SB 202

COMMITTEE: House Health and Government Operations

POSITION: Support with Amendment

TITLE: State Board of Examiners in Optometry – Sunset Extension

<u>BILL ANALYSIS</u>: This bill, as originally written, would continue the State Board of Examiners in Optometry (the Board) in accordance with the provisions of the Maryland Program Evaluation Act (sunset law) by extending the Board's existence to July 1, 2033.

POSITION AND RATIONALE: The Board supports SB 202 with a Board amendment.

This bill was <u>amended</u> in the Senate to change the termination provisions relating to the statutory and regulatory authority of the Board to only two (2) years until July 1, 2025, instead of the originally proposed Bill that extended the Board for ten (10) years until July 1, 2033. The Board strongly disagrees with this two (2) year amendment for the following reasons:

The State Board of Examiners of Psychologists - (SB 195), the State Board of Examiners in Optometry - (SB 202), and the State Board of Physical Therapy Examiners - (SB 209) are aware that during the voting session, an amendment was made to extend these Boards for two (2) years instead of ten (10) because of legislative audit findings of all health Boards, not necessarily the three that are up for a Sunset review. It is important to note that the Boards were not given the opportunity to provide any information or answer questions about the audit report since this concern was not raised until the voting session. The Boards continuously work with the Office of Internal Controls and Audit Compliance, implementing corrective actions to remedy any cited issues. Quarterly progress reports are also provided to the Office of Internal Controls and Audit Compliance. The most recent and approved report of January 18, 2022, is included as an attachment for your review. The Boards take the auditors' findings seriously and want nothing more than to operate as securely and efficiently as possible.

During the 2021 legislative session, SB 125 - State Board of Chiropractic Examiners – Sunset Extension and SB 247 - State Board of Podiatric Medical Examiners – Sunset Extension were introduced. The termination provisions for both Boards were extended for ten (10) years without regard to the audit findings. However, both the Senate and House had received the fiscal compliance audit report of the Health Professional Boards.

The Board of Examiners in Optometry has no outstanding deficiencies to correct. The passing of this SB 202 with amendment will ensure the continuation of the Board's mandated

responsibilities to carry out its mission to protect the citizens of Maryland by promoting quality health care in optometry, licensing optometrists, receiving and resolving complaints, and setting standards for the practice of optometry.

The Board respectfully asks that the committee amend this legislation to extend the termination provisions relating to the statutory and regulatory authority of the Board, as was originally proposed, to the following:

Amendment 1

Page 2, line 7: Strike **2025** and insert **2033**.

The Board appreciates your consideration and requests a favorable report with amendment. If you'd like to discuss this further, please do not hesitate to contact Gwendolyn Joyner, Executive Director at gwendolyna.joyner@maryland.gov or at 410-764-5994.

See separate attachment.

The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.

Finding 1

The Board of Nursing and the Board of Professional Counselors and Therapists did not provide sufficient oversight to ensure that complaints against licensees were investigated timely. Our review disclosed that numerous complaints were not investigated within one year.

Recommendation 1

We recommend that the Board of Nursing and Board of Professional Counselors and Therapists

a. properly monitor complaints (such as by periodically reviewing the tracking logs) and develop a strategy to ensure the timely disposition of complaints (repeat); and

b. properly maintain the tracking logs and ensure the logs reflect all critical information, including key dates such as initial receipt (repeat).

	Agency Response
Background / Analysis	Agree
Please explain any concerns with factual accuracy.	
	Agree Estimated Completion Date: See Below
of corrective action or	Board of Nursing – COMPLETED – 7/23/20 – A triage tracking tool was developed in March of 2019 to track complaints from the date of receipt to the disposition of the case. The Investigators assignment tracking tool and the triage tracking tool were revised July 23, 2020, to include critical information. The Complaint Coordinator updates the log during the processing of each new complaint. The complaint is tracked throughout the triage, charging and hearing phase, if applicable, up to disposition.
	The Board of Professional Counselors and Therapists – ESTIMATED COMPLETION DATE – 2/28/22 – BPCT has worked to hire investigators who can keep the ongoing investigation of cases moving smoothly. It has hired both contractual and temporary investigators, having not been able to get approval for full—time permanent investigators. The Board recently lost a contractual investigator and a temporary investigator but is in the search process to fill those positions with two contractual investigators. The Board is also searching for a Compliance Assistant who will help the

	Compliance Manager wit investigative files.	th the paperwork associated w	ith
Recommendation b	Agree	Estimated Completion Date:	See Below
of corrective action or	maintain the tracking log critical information, inclu complaint. The Assistant Investigators tracking too Enforcement monitors fo information is not left blathe tracking tool as needed.	PLETED – 7/23/20 – MBON of a say well as ensure the logs refuding key dates such as initial Director of Enforcement monol monthly. The Assistant Director key dates and ensures that on the monthly. Each Investigato ed. The Assistant Director of Ecorrect any concerns noted at	lect all receipt of the itors the ector of ther critical r completes inforcement
	COMPLETION DATE — an electronic case manag from the filing of a complorder. The Compliance U	Al Counselors and Therapists – 6/1/21 – BPCT_has purchased ement system. This system will laint on the website to issuing a Unit can generate reports that hase of the complaints process	l and set up ll track cases of a public detail how

Finding 2

The Office of Health Care Quality did not conduct required annual inspections of all assisted living facilities and developmental disabilities service providers.

Recommendation 2

We recommend that OHCQ, in conjunction with MDH, ensure inspections of the assisted living facilities and developmental disabilities service providers are completed as required by law (repeat).

	Agency Re	esponse
Background / Analysis	Agree	
Please explain any concerns with factual accuracy.		
Recommendation a	Agree	Estimated Completion Date: 6/30/2025
of corrective action or	OHCQ every year for five staffing plan to adequate allow us to complete more year staffing plan ends we 2025 was given to account which can take up to a year eceived 2 new nurse sure by January 2022. The deadministrative officer III November 2021. The coop be hired by January 2022 surveyor positions in FY2 disabilities unit will received. The estimated performance of the staffing plan to adequate a surveyor positions in FY2 disabilities unit will received.	vas approved, providing 10 new positions to e years. We are in the 4th year of the 7-year ly staff OHCQ. The additional staff will e of the mandated survey activities. The 7-ith FY24. A completion date of June 30, t for the hiring and training of new staff ear. On July 1, 2021, the assisted living unit veyors. We anticipate hiring these positions velopmental disabilities unit received 4 new 's (surveyors). The surveyors were hired in redinator who supervises a survey team will 2. The assisted living unit will receive 2 new 23 and in FY24. The developmental ve 3 new surveyor positions in FY23 and in centage of completion for assisted living and s for FY22 and FY23 is included with our

Finding 3

Controls over collections directly received at and the deposits made by the majority of the HPBCs were not adequate, and duties related to cash receipts and licensing were not properly segregated.

Recommendation 3

We recommend that the applicable HPBCs

a. perform documented verifications that credit card collections were deposited and properly recorded in the State's accounting records (repeat);

b. continue investigative action to determine whether the aforementioned \$386,000 in unrecorded collections were deposited and properly recorded in the State's accounting records;

c. ensure that employees processing collections are denied the system capability to issue or renew licenses, certificates, or permits, (repeat) or to update the related billing records;

d. in conjunction with MDH, perform a documented consideration of the feasibility of using a bank lockbox account to receive collections (repeat); and

e. periodically reconcile licensing activity with the related collections (repeat).

	Agency Re	sponse	-
Background / Analysis	Agree		
Please explain any concerns with factual accuracy.			
Recommendation a	Agree	Estimated Completion Date:	See Below
of corrective action or explain disagreement.	Maryland Board of Occupational Therapy Practice — COMPLETED — 1/30/2021 — The Board performs documented verifications to ensure credit card collections are deposited and properly recorded in the State's accounting records. In addition, the Maryland Board of OT will continue to download transaction reports from vendors, and the payment gateway. The Board will keep these reports in a binder in the office and will reconcile them against the deposit fax and the Revenue Report. Boards and Commissions — COMPLETED — 08/24/2020 — Each Board has established adequate control procedures to ensure that all		

credit card transactions are deposited into the State Treasury and credited to the respective Board.

Established Control Procedures

Credit Cards are processed for license, registration renewal by Boards that have online applications.

<u>Board of Pharmacy</u> – COMPLETED – 2/28/21 – The Board of Pharmacy has performed documented verifications that credit card collections were deposited and properly recorded in the State's accounting records since February 2021.

Physical Therapy Board – COMPLETED – 7/1/20 – The State Treasurer's Office Daily Deposit Report, MDH Monthly Detail Revenue Report, credit/debit card vendor monthly statement & bank monthly statement are utilized to perform monthly reconciliation of revenue transactions and deposits. The Board office maintains a fiscal year paper binder with the completed monthly reconciliations. The Request for Revenue Transfer worksheet is provided to the Fiscal Officer on an as needed basis to ensure deposits have the correct object code for the State's accounting records. Written standard operating procedures are in place.

Board of Nursing – COMPLETED – 12/31/20 – MBON hired a new Manager of Administrative Services on November 8, 2021. The Manager of Administrative Services serves as the Agency Fiscal Officer for MBON. In December 2021, the Manager of Administrative Services initiated the credit card payment verification process via the use of Daily Deposit Reports from the State Treasurer's Office, monthly deposit detail reports from the Credit Card vendor and transaction summary transaction inquiries from the State's Financial Management Information System (FMIS). Verifications are completed monthly and documents are stored in a binder for each Fiscal Year. The Director of Operations will conduct quarterly audits to ensure that documented verifications of credit card payments are being conducted.

Board of Dental Examiners – COMPLETED – 12/31/20 – The Dental Board agrees and has made sure that adequate controls are in place for depositing and that all receipts are properly accounted for. The Dental board now uses a state approved vendor as the credit card merchant and routinely reconciles all deposit activities.

Recommendation b A	Agree	Estimated Com	pletion Date:	4/1/22
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	Status Update as of January 18, 2022		
	Board of Nursing – The current MBON Director of Operations		
of corrective action or	(DoP) was hired on May 5, 2021. The DoP was misinformed and		
explain disagreement.	under the impression that this issue had been completed by the		
	previous Agency Fiscal Officer. However, the DoP discovered in		
	January 2022 that this task is outstanding and requires further		
	follow up to see where the previous MBON Fiscal Manager had l	eft	
	off. The DoP will need to review files and documents from the		
	previous Fiscal Manager to familiarize herself with the issue		
	surrounding this finding and gain clearer understanding of what	is	
	left to be done. Prior to this task, the completion of orientation fo		
	the new Fiscal Manager and Fiscal Assistant will need to be		
	completed before the DoP can start looking into this. Once their		
	orientations are completed, following-up on this finding will be a		
	priority. Furthermore, a security incident that occurred on		
	December 4, 2021 has left the board without access to any of our		
	current systems, which may hold the information required to		
	compete this finding.		
Recommendation c	Agree Estimated Completion Date: See Belo	DW	
Please provide details			
of corrective action or	Maryland Board of Occupational Therapy Practice – COMPLE	ΓED	
explain disagreement.			
	accessibility and duties to make sure that those will issue licenses	are	
	not processing payments.		
	Board and Commissions – COMPLETED – 08/24/2020 – The		
	Boards regularly monitor staff access accessibility to ensure that		
	only authorized staff has access to information that is pertinent to		
	their duties.		
	Established Procedures		
	To ensure only authorized staff have access to information that is		
	pertinent to their duties.		
	1. On the effective date that an employee's job duties change	<u>.</u>	
	new duties are reviewed to determine what system access is neede		
	and the IT staff is instructed to make any needed changes.		
	2. Quarterly in-house audits of staff assignments and access		
	privileges are conducted and verified with IT staff.		
	Physical Therapy Board – COMPLETED – 8/24/20 – Monthly access testing of the online licensing and cash log system is performed to ensure staff processing collections are denied the ability to issue or renew licenses and staff issuing or renewing licenses are denied the ability to process collections. The office		
	maintains a fiscal year spreadsheet documenting the monthly acc testing results. Written standard operating procedures are in pla		

Action Taken: Restrict access to licensing software for any employee who receives, or processes checks. Executive Director approval and signature required for each license. Quarterly audits of user access were initiated in Q2 2020. Board of Nursing - COMPLETED - 6/23/2021 - MBON Fiscal employees do not have the ability to renew or issue licenses, certificates, permits or to update billing records. An audit was conducted on 6/23/21 and MBON's MyLicense Office (MLO) database security was reviewed and adjusted to enforce this. Board of Dental Examiners - COMPLETED - 10/30/2020 - MSBDE agrees with the findings and has put best practices in place to assure that no staff members who accept/process mail, including checks, do not have access to the licensing software and vice versa. Staff who may print licenses, which require a physical signature by the Board President, do not accept/process mail, including checks. Recommendation d Agree		Status Update as of January 18, 2022		
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No additional action plan needed.		No additional action plan needed.		

Physical Therapy Board – COMPLETED – 6/14/21 – The Board in conjunction with the MDH Fiscal Officer performed a documented feasibility evaluation (provided June 2021) in reference to using a bank lockbox account. Due to the extremely low volume of checks (less than 25 per month on average and declining) the cost benefit analysis did not support a bank lockbox account as a cost effective fiduciary responsible approach.

Maryland Medical Cannabis Commission – COMPLETED – 7/15/20 – Action Taken: The MMCC, in conjunction with MDH, evaluated the feasibility of a bank lockbox account. Due to the extremely low volume of checks per month – less than 15 per month on average – a bank lockbox account would be prohibitively expensive. The MMCC, in consultation with MDH, purchased a check scanner, which eliminates the need for MMCC staff to physically deliver and deposit checks, but is not accompanied by high monthly and per–transaction fees.

Board of Nursing – ESTIMATED COMPLETION DATE – 04/01/22 – Estimated Completion Date: 100 days after MDH/DoIT network is back on–line. MBON hired a new Manager of Administrative Services on November 8, 2021. The Manager of Administrative Services serves as the Agency Fiscal Officer for MBON. Given the date of hire and the MDH/DoIT network security incident, the Manager of Administrative Services has not had an adequate amount of time to complete her orientation to her new role and to perform a documented consideration of the feasibility of using a bank lockbox account to receive collections. Once the network is back online, the completion of this task will be a priority.

Board of Dental Examiners – COMPLETED –10/30/2020 – MSBDE is currently utilizing the lock box.

Recommendation e Agree Estimated Completion Date: See Below

Please provide details
of corrective action or
explain disagreement.

<u>Board of Morticians and Funeral</u> – COMPLETED – 07/01/2020 – Routine reconciliations are performed between licensing activities and payment collected.

<u>Maryland Board of Occupational Therapy Practice</u> – COMPLETED – 8/24/2020 – The Board regularly reconciles the vendor credit cards statements against the licensee applications.

<u>Board of Pharmacy</u> – COMPLETED – 2/28/2021 – The Board of Pharmacy will periodically reconcile licensing activity with the related collections.

<u>Boards and Commissions</u> – COMPLETED – 08/24/2020 – Routine reconciliations are performed between licensing activities and payment collected.

Established Control Procedures: – Reconciliations Monthly, an independent person compares the amount of revenue received for new applications to the number of paper/electronic applications received.

<u>Physical Therapy Board:</u> – COMPLETED – 8/24/20 – Weekly reconciliations are performed between licensing activities and payment collection. The office maintains a fiscal year paper binder with the completed weekly reconciliations. Written standard operating procedures are in place

Board of Nursing – ESTIMATED COMPLETION DATE – 04/01/22 – 120 days after MDH/DoIT network is back on–line.

Reconciliations at the Maryland Board of Nursing were previously conducted by the Board of Nursing's Fiscal Assistant until May, 18, 2021, when the Fiscal Assistant resigned without notice. As a result of her immediate resignation, there was no available opportunity to transfer the knowledge of this task to another employee. MBON hired a new Manager of Administrative Services on November 8, 2021. The Manager of Administrative Services serves as the Agency Fiscal Officer and directly supervises the Fiscal Assistant. On December 8, 2021, a new Fiscal Assistant was hired. The Director of Operations was in the process of learning how to complete the license activity reconciliation process to train both the new Manager of Administrative Services and Fiscal Assistant on how to complete it. However, the MDH/DoIT network security incident occurred and stalled the process. Once fully trained, the Manager of Administrative Services will be responsible for ensuring that a written procedure for this task is created and readily accessible and for ensuring that the periodic reconciliations are completed. Once

the network is back online, learning the process and training both the Manager of Administrative Services and the Fiscal Assistant will be a priority. Also, once the network is back online and the Manager of Administrative Services is fully trained on this process, she will work with one of our licensing vendors to automate this process through the MyOffice License (MLO) application.
Board of Dental Examiners – COMPLETED – 10/30/2020 – MSBDE concurs with recommendation therefore has implemented a process to ensure periodically licensing activity is reconciled to related collections. The licensing manager reconciles and ensures all fees collected are accounted for before authorizing the printing of a license.

Finding 4

Twenty—one HPBCs did not perform documented system access reviews of their licensing system to ensure that user access capabilities were adequately restricted. As a result, numerous users could unilaterally issue or renew licenses, and current or former employees had unnecessary system access.

Recommendation 4

We recommend that the HPBCs

- a. perform documented periodic access reviews of the licensing systems;
- b. establish online or manual controls to prevent users from unilaterally issuing or renewing licenses, including those noted above; and
- c. ensure that users are assigned only those capabilities needed to perform job duties and to eliminate unnecessary access, including those noted above.

Agency Response			
Background / Analysis	Agree		
Please explain any			
concerns with factual accuracy.			
lactual acculacy.			
Recommendation a	Agree	Estimated Completion Date:	See Below

Please provide
details of corrective
action or explain
disagreement.

Maryland Board of Occupational Therapy – COMPLETED – 12/31/2020 – The Board continues to restrict issuance and renewal of licensees and conducts periodic review of the system access as recommended. The Board of OT has created policy and procedures.

Boards and Commissions – COMPLETED – 08/24/2020 – The Boards conducts access reviews with the information technology staff to ensure that access and restrictions are applied to the appropriate person. Policy and procedures have been established to ensure compliance at all times.

Established Policy and Procedures

- 1. On the effective date that an employee's job duties change, new duties are reviewed to determine what system access is needed and the IT staff is instructed to make appropriate changes.
- 2. Quarterly in-house audits of staff assignments and access privileges are conducted and verified with IT staff.

<u>Physical Therapy Board</u> – COMPLETED – 8/24/20 – Monthly access testing of the online licensing and cash log system is performed to ensure staff processing collections are denied the ability to issue or renew licenses and staff issuing or renewing licenses are denied the ability to process collections. The office maintains a fiscal year spreadsheet documenting the monthly access testing results. Written standard operating procedures are in place.

<u>Maryland Medical Cannabis Commission</u> – COMPLETED – 7/1/20 – Action Taken: Quarterly audit of user access to licensing system. Generate report of user access/credentials to the licensing system.

<u>Board of Nursing</u> – COMPLETED – 07/31/2021 – This audit was conducted on 6/23/2021 while addressing concerns outlined in item 4B. Members of the 'Administrators' security role are responsible for creating user accounts, resetting logins, and troubleshooting issues with staff using the licensing system. Members of this group have been vetted.

Board of Dental Examiners – COMPLETED – 12/31/2020 – MSBDE has acquired a new licensing system and prior to it coming online, licensing staff revisited the protocols of accessibility and who performed what function. The new licensing system came online in the fall, and we performed the first periodic review at the end of CY2020. Policy and procedures will be established to ensure this process is performed routinely going forward.

	Board of Physicians – See OLA Audit Report response for status, no new updates as of 02/11/2021 per Board COMPLETED – 2019 – The Board of Physicians performs documented access reviews of its licensing system.
Recommendation b	Agree Estimated Completion Date: See Below
Please provide	Maryland Board of Occupational Therapy – COMPLETED –
details of corrective	12/31/2020 – Each staff member's online duties are restricted through
action or explain	the software system so that there is no overlap between licensing and
disagreement.	payment processing.
	Boards and Commissions - COMPLETED - 08/24/2020 - Boards and
	Commissions have established controls to prevent users from
	unilaterally issuing or renewing licenses, including those noted
	above. Policy and procedures have been established to ensure compliance.
	Established Policy and Procedures:
	1. Quarterly internal audits are conducted to ensure separation
	of duties by creating a manual access log when an online access log does not exist.
	2. Random audits of paper and system documents are performed to check for duplication of service.
	Physical Therapy Board – COMPLETED – 8/24/20 – Restrictions to the online licensing and cash log system based on staff job duties are in place and verified through monthly access testing. Written standard operating procedures are in place.
	Board of Nursing – COMPLETED – 07/31/2021 – Effective from the last audit conducted on 6/23/2021, access to the 'renew license' and 'issue license' functions were revoked from non–managerial staff. This action forced directors & supervisors to individually certify staff who require access to the functions as part of their job duties. IT will re–certify the list with directors & supervisors in quarterly intervals with the next audit to occur in September 2021.
Dogommondotion	Board of Dental Examiners – COMPLETED – 12/31/2020 – MSBDE ensures that users are assigned only those capabilities needed to perform job duties and has eliminated all unnecessary access. The SOP was finalized CY20 identifying who has what accesses and capabilities in the licensing process.
Recommendation c	Agree Estimated Completion Date: See Below

Please provide details of corrective action or explain disagreement.

Maryland Board of Occupational Therapy – COMPLETED – 12/31/2020 – Each staff member's online duties are restricted through the software system so that there is no overlap between licensing and payment processing.

<u>Boards and Commissions</u> – COMPLETED – 8/24/2020 – Boards and Commissions ensure that users are assigned only those capabilities needed to perform job duties and have eliminated all unnecessary access. Written procedures have been developed delineating requirements that must be met to be granted access. Established Policy and Procedures

- 1. On the effective date that an employee's job duties change, new duties are reviewed to determine what system access is needed and the IT staff is instructed to make appropriate changes.
- 2. Quarterly in-house audits of staff assignments and access privileges are conducted and verified with IT staff.

<u>Physical Therapy Board</u> – COMPLETED – 8/24/20 – Restrictions to the online licensing and cash log system based on staff job duties are verified through monthly access testing. Quarterly audits by IT are conducted and the results are provided to the Board. The office maintains a fiscal year spreadsheet documenting the monthly and quarterly access testing results. Written standard operating procedures are in place.

<u>Board of Nursing</u> – COMPLETED – 07/31/2021 – An audit was conducted on 6/23/2021 which identified several individuals with access to functions beyond their job scope. Application security was reorganized to remove the individuals' access to these critical functions. Reviews are conducted semi–annually to ensure individual system capabilities are in sync with business functions.

<u>Board of Dental Examiners</u> – COMPLETED – 12/31/2020 – MSBDE ensures that users are assigned only those capabilities needed to perform job duties and has eliminated all unnecessary access. The SOP was finalized CY20 identifying who has what accesses and capabilities in the licensing process.

Finding 5

Password and account controls for the Board of Nursing and the Board of Pharmacy were not sufficient to properly protect critical data.

Recommendation 5

We recommend that

- a. the two Boards implement strong controls over passwords and accounts for critical applications in accordance with the settings prescribed by the *Information Technology Security Manual* (repeat), and
- b. MDH determine the extent to which additional application password and account controls are needed to protect licensee data for the remaining boards and commissions (repeat).

	Agency Response
Background / Analysis	Agree
Please explain any concerns with factual accuracy.	
Recommendation a	Agree Estimated Completion Date: 12/31/2020
Please provide details of corrective action or	The Board of Pharmacy – COMPLETED – 12/31/20 – Passwords must be a minimum of twelve (12) characters; This is met, we have a parameter set that passwords must be a minimum of 12 characters.
	The Board of Nursing – ESTIMATED COMPLETION DATE – 04/1/22 – 100 days after MDH/DoIT network is back on–line. – MBON is actively pursuing an upgrade of the licensing application software while investigating the use of single sign–on technology integration with MDH Active Directory to leverage password complexity & lifetime enforcement requirements per the DoIT Information Technology Security Manual (ITSM). We were, along with the vendor, actively working to upgrade the Licensing product to provide strong passwords prior to the network outage due to a cybersecurity attack.
Recommendation b	Agree Estimated Completion Date: See Below
	The Board of Pharmacy – COMPLETED – 12/31/20 – passwords must
	contain characters from three of the four categories:
explain disagreement.	Upper–case charactersLower case characters
	Lower case characters Numbers
	Non-Alphanumeric/special characters

Status opulie as of surface y 10, 2022		
This is met, we have the parameter set to require mixed case, a numeral, and a special character to ensure password complexity.		
Boards and Commissions – COMPLETED – 07/1/2020 – The IT		
staff for the Boards and Commissions have implemented password		
requirements outlined in the Maryland Information Technology Manual.		
Established Policy and Procedures		
IT staff stays abreast of any updates to the manual.		
The Board of Nursing – ESTIMATED COMPLETION DATE – 04/01/22 – 100 days after MDH/DoIT network is back on–line.		
Mixed case letters and numerals are already supported in the current application. The upgrade will add support for requiring non– alphanumeric characters in addition to the previous		
requirements. Also, MyLicense Office (MLO) software will no longer set the password security parameters, it will be native active		
directory.		

Finding 7 (Policy Issue)

Consolidation of licensing, procurement, and other fiscal operations to enhance internal controls and maximize efficiencies had not been pursued by the HPBCs.

Recommendation 7

We recommend that the HPBCs collectively identify opportunities for consolidating certain operations to enhance internal controls and maximize efficiencies and, if deemed practical, develop a formal plan to accomplish such enhancements.

Agency Response				
Background / Analysis	Agree			
Please explain any concerns with factual accuracy.				
Recommendation a	Agree	Estimated Completion Date:	See Below	

Maryland Board of Occupational Therapy – ESTIMATED COMPLETION DATE – 1/31/2023 – The Board of OT has met with representatives from DoIT to discuss the pros and cons of working with other Boards on a joint online licensing system and are currently waiting to hear back about next steps.

Boards and Commissions – ESTIMATED COMPLETION DATE – 01/31/2023 – As a result of several factors, the Board will not be able to meet its 1/31/2022 completion date of increasing the number of Boards that use the automated licensing system. The slowdown is a result of the following.

- COVID 19 Work Priorities changed in order to assist workers to work remotely.
- Security safeguards were needed.
- Changes to the existing system were needed as a result of new legislation.
- Staff shortage

However, additional staff has been hired to expedite the implementation of the licensing system for the small boards that do not have the system. The small Boards are also in the process of hiring a new IT manager. The expected completion date to automate the licensing process for the remaining small boards is 01/31 2023.

Physical Therapy Board - ESTIMATED COMPLETION DATE -1/31/22 – Regularly scheduled meetings take place with HPBCs to discuss and compile information about the practicality and costeffectiveness of centralizing certain fiscal and operational functions. The Physical Therapy Board along with 17 Boards use the same customized licensing management system (LMS) modules. In October 2021 there was a communication about collaborating in the development of an LMS RFP. Due to the pending 12/01/2021 DoIT report (HB 224) further discussions have been placed on hold. The Physical Therapy Board and 5 HPBCs are collaborating in the writing of a HPBCs Executive Director's Planning Resource Guide. Its purpose is to support all HPBC executive directors in carrying out their roles, responsibilities, and commitments through identified common internal operational and financial functions to maximize efficiencies. Valuable resources will also be included.

Maryland Medical Cannabis Commission – COMPLETED – 2/16/21 – Action taken: The MMCC consolidated its operations by migrating its patient, provider, and medical cannabis business licensing and registration operations to Maryland OneStop, which

Status Update as of January 18, 2022		
	houses licensing services for more than one dozen state agencies and commissions.	
	Physical Therapy Board – COMPLETED – 7/7/21 – The PT Board meets at least monthly with HPBCs to discuss and compile information about the practicality and cost-effectiveness of centralizing certain fiscal and operational functions. Eight Boards use the same customized LMS. The Boards follow the state's policies relating to procurement procedures and continue to do so. The Boards current collaborations include the Onsite IT team, MDH Fiscal Officer, Legislative & Regulations Coordinator, Board Counsels, Investigators, website platform, credit/debit card vendor, banking vendor, printing vendor and other State approved vendors for procurement purposes.	
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