

Attachment M.1.a
WellCare Corporate Emergency Preparedness Plan



Corporate

**WellCare Corporate
Emergency Preparedness Plan**

2011

V2.0

PREPARED BY

EMERGENCY PREPAREDNESS COMMITTEE

COMPREHENSIVE HEALTH MANAGEMENT, INC.

Revision History

Revision	Release Date	Author	Changes in progress
0.01	11/25/2008	W. Greg Brooks	Working Copy – created from individual functional area business continuity documents
0.02	11/25/2008	W. Greg Brooks	Complete Draft Document Framework prior to functional area review
0.03	1/13/2009	W. Greg Brooks	Added Regulatory Reference Table
0.04	3/30/2009	Denise Malecki	Combined revised Corporate BCP with sections written for a proposed Corporate DRP
0.05	10/5/2009	W. Greg Brooks	Refreshed document for 2009
1.0	5/26/2010	William McKinney	Reworked entire document.
1.1	6/21/2010	William McKinney	Updated EPC membership in Appendix C and placed in approved EPC charter (voted at 6/1 meeting) in Appendix A. Refreshed TOC.
1.2	7/28/2010	William McKinney	Updated EPC membership in Appendix C to reflect changes in sales and marketing and pharmacy EPC membership.
1.3	9/30/2010	William McKinney	Updated EPC membership in Appendix C. Added additional beneficiary and pandemic content. Updated training requirements. Removed Mike Cotton from steering team list. Added new approvals.
1.4	10/22/2010	Steven Tate	Updated EPC membership in Appendix C. Updated Steering Team in App D (removed Rex Adams, added Larry Anderson, and changed Walt Cooper title and role).
2.0	4/28/11	Steven Tate	Updated for 2011, including: addition of EPC Charter ratified 1/21/11; allowance of EPP approval by functional VP or Area Leader; embedded PDFs of approved Corp EPP and EPC charter.

Approvals

The management team members identified below have reviewed this emergency preparedness plan and agree that the boundaries and activities identified in this document are accurate to the best of their knowledge.

Name	Title	Signature	Date
Steven Tate	EPC Chairperson	see embedded .pdf	4/28/11
William McKinney	VP & EPC Executive Sponsor	see embedded .pdf	4/28/11



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Table of Contents

1	INTRODUCTION.....	1
1.1	Purpose	1
1.2	Associated Plans and Subordination	1
1.3	EPP Scope and Assumptions	2
1.4	Beneficiary Emergencies	3
1.5	Corporate Pandemic Disease Response	3
1.6	Emergency Preparedness Committee (EPC)	4
1.7	Approval and Distribution	4
1.8	Contractual and Regulatory Compliance	5
1.9	Associate Awareness and Training Activities.....	6
1.10	Plan Testing.....	6
2	EMERGENCY DECLARATION.....	7
2.1	Identification, Assessment, and Activation.....	7
2.2	Emergency Level Definitions	8
2.3	Associate Expectations.....	9
3	Appendix A – EPC CHARTER.....	11
3.1	Purpose	11
3.2	Duties and Responsibilities.....	11
3.3	EPC Oversight	12
3.4	EPC Membership and Meetings	12
3.5	Amendments.....	13
4	Appendix B – EPC STEERING TEAM MEMBERSHIP.....	14
5	Appendix C – EPC Membership.....	15
6	Appendix D – Emergency Preparedness Contractual Requirements	17
7	Appendix E – EPC Meeting Locations and Conference Bridge.....	23

1 INTRODUCTION

1.1 Purpose

This WellCare Corporate Emergency Preparedness Plan (EPP) provides the strategic Corporate Business Continuity Plan (BC plan or BCP) and Disaster Recovery Plan (DR plan or DRP) for WellCare Health Plans, Inc., herein referred to as WellCare.

The BCP facets of this plan identify WellCare's strategic capabilities for ensuring the continuity of member, provider, and vendor services in response to man-made or natural disasters and other emergency situations. The DRP portion of this plan is designed to provide immediate response and subsequent recovery from an unplanned business interruption within WellCare, such as loss of utility service, building evacuation, or a catastrophic event such as a major fire. The combination of a BCP and a DRP shall be herein referred to as an Emergency Preparedness Plan (EPP).

WellCare's priorities and primary objectives are:

- **People:** Ensure WellCare's associates have been trained on the proper response to emergency situations and are out of harm's way in the event of an emergency.
- **PHI (Protected Health Information):** Ensure WellCare has taken appropriate measures to protect PHI during emergency situations.
- **Production:** Ensure WellCare has steps in place to prioritize and continue production activities ensuring members have access to care.

WellCare believes that the priorities above are embodied within the Corporate EPP which is appropriate to provide safety and well-being of WellCare associates and delegated vendors while still providing a prompt and appropriate response to both anticipated and unanticipated emergency events.

1.2 Associated Plans and Subordination

This document governs WellCare's Corporate EPP and includes elements common across business functions. This document does not account for the entirety of WellCare's EPP. Instead, this document is a 'parent' document to several area EPPs. A business "area" generally consists of multiple departments and/or divisions reporting to a WellCare vice president or area leader. The area EPPs contain detailed functional disaster recovery and business continuity plans. As a whole, the Corporate EPP and all associated area plans shall be referred to as the Enterprise EPP.

While the Enterprise EPP makes every effort to be aligned with existing WellCare policies and procedures, contractual requirements, and federal, state, and local law, in the case of any conflict the Enterprise EPP shall be considered subordinate to these other documents, requirements, and/or regulations.

In addition, the Enterprise EPP is subordinate to Federal, state and/or local plans during a disaster declaration by those authorities. WellCare will cooperate with state, county and city emergency officials as well as other responders in the development of emergency response plans and participate in multi-jurisdictional emergency planning exercises as required.

1.3 EPP Scope and Assumptions

The scope of the Enterprise EPP includes WellCare's corporate campus in Tampa and the various divisional field offices within the contiguous 48 states and Hawaii. The Enterprise EPP shall be updated as new regions and plans are added to the scope of WellCare's operations

The scope of the Enterprise EPP does not include business continuity or disaster recovery of WellCare's medical and administrative vendors. Review of emergency planning for such vendors shall be managed through pre-implementation and annual delegation audits in addition to other, normal vendor management venues.

The scope of the Enterprise EPP does not include WellCare's response to emergency situations and disaster declarations impacting WellCare's membership where such emergencies do not also impact one or more of WellCare's field offices or corporate campus except as outlined in sections 1.4 and 1.5 below. Such emergency situations shall be handled as outlined in functional policies, procedures, and/or step actions.

The Enterprise EPP is designed to handle disruptions lasting greater than eight business hours up to a maximum of 360 consecutive hours. Should a disruption extend over 360 consecutive hours, WellCare will engage alternative options such as additional vendors and offsite facilities to ensure business continuity.

The Enterprise EPP is designed to create a state of readiness that will provide a structured response to both anticipated (e.g., storm closure) and unanticipated (e.g., immediate building evacuation) emergencies as well as other external incidents that potentially could cause business interruption (e.g., loss of electrical service).

The Corporate EPP is based upon the following assumptions. Additional assumptions present in area EPPs are outlined within those documents.

- Business recovery is performed in accordance with the procedures that have been set forth within this plan
- Plan review, maintenance and updates are performed on a regular basis to ensure accuracy and a viable state of readiness
- Sufficient alternate sites that are pre-designated as backup facilities are unaffected and prepared to support recovery of business function personnel
- Organizations external to WellCare, such as customers, vendors, government agencies, and others will be reasonably cooperative during the business recovery period
- Business recovery awareness and training programs have been implemented

- Qualified personnel in sufficient quantities are available to perform business recovery responsibilities
- Adequate communication channels and contact information are available for executive decision making and associate communication
- Required funding, equipment, and supply requirements will be reviewed and approved timely

1.4 Beneficiary Emergencies

WellCare's corporate policies and procedures allow WellCare to respond to the increased volume of claims and beneficiary interactions associated with emergency situations. WellCare policies also relax medical management requirements, such as prior authorization and prescription refill limitations, where appropriate.

In the event of a localized public health emergency, WellCare will work with its state and Federal clients to conduct outreach in an attempt to contact members and determine which members may meet criteria for additional assistance with special medical needs and/or transportation. Where necessary and appropriate, WellCare will also conduct claims review in an attempt to determine members with a possible special need during a public health emergency.

1.5 Corporate Pandemic Disease Response

WellCare considers a pandemic to be an anticipated event for which some planning and preparation likely is possible. As such, much of the response to a pandemic would be handled using the existing Enterprise EPP for anticipated emergencies. The Enterprise EPP contemplates an emergency mode of operation in the event the WellCare corporate campus is rendered non-accessible due to any man-made or natural disaster and employ strategies such as the shifting of additional work to existing outsourced vendors.

During a pandemic in addition to the normal responsibilities outlines in the Enterprise EPP, the Fleet and Facilities Department will provide physical security and emergency support to affected areas. The Fleet and Facilities Department will coordinate all services for sanitization and health quality restoration. This group will be responsible for the assessment of pandemic outbreak and will make a prognosis for occupancy of each company structure affected by an outbreak. Additionally, Fleet and Facilities will coordinate risk reduction and avoidance activities as well as emergency response with property management and local emergency response authorities. The Corporate Communications Department will act on the counsel of the Emergency Preparedness Committee (EPC, see Section 1.6) and EPC Steering Team to provide accurate and timely information on the pandemic to associates, senior management and the public.

In the case of a mass vaccination campaign initiated by a state or Federal agency, WellCare will make its facilities available as requested and appropriate. With few exceptions, however, there are no clinical personnel in WellCare's facilities outside of the corporate campus, and most of WellCare's non-corporate facilities are small business offices.

1.6 Emergency Preparedness Committee (EPC)

WellCare's EPC is the governing body responsible for maintaining WellCare's Enterprise EPP. The mission of WellCare's EPC is to provide the guidance and support that facilitates the development and implementation of all area EPPs. The EPC charter is included as Appendix A of this document.

The EPC chairperson shall preside over all meetings of the EPC at which he or she is present and shall be the chief liaison between the EPC and the EPC executive sponsor and the EPC Steering Team. The EPC chairperson shall be responsible for maintaining the Corporate EPP, facilitating the activities of the EPC and its representatives, and otherwise serving as a central point of contact for WellCare's emergency preparedness activities.

Escalation from the EPC shall be to the EPC executive sponsor. Further escalation, as in the cases of emergency declaration described in Section 2 of this document, shall be to the EPC Steering Team. The EPC Steering Team is comprised of WellCare executive leadership and the EPC Executive Sponsor serves as its Chairperson. The current EPC Steering Team membership is included as Appendix B

The EPC chairperson shall appoint a backup to preside over meetings the chairperson is unable to attend and otherwise act in the stead of the chairperson as needed. The EPC chairperson may appoint an EPC secretary who shall give notice of all EPC and EPC Steering Team meetings to the members of the EPC and EPC Steering Team; prepare agendas for all EPC and EPC Steering Team meetings; record and maintain minutes of all EPC and EPC Steering Team meetings; and promptly after the conclusion of each EPC and EPC Steering Team meeting, distribute to each EPC and EPC Steering Team member all minutes of such EPC and EPC Steering Team meetings.

The EPC shall convene at least monthly to review the status of WellCare's emergency planning activities, report updates by area, and/or assign tasks necessary to improve WellCare's Enterprise EPP. Additional EPC meetings shall be convened as necessary to review possible emergency situations and make the determination when/if to escalate situations to the EPC Steering Team for formal emergency declaration.

The current EPC membership is included as Appendix C of this document and is maintained on the EPC SharePoint site at:

<http://wellcarelink.wellcare.com/sites/EmergencyPreparedness/Lists/EPC%20Contacts/AllItems.aspx>

1.7 Approval and Distribution

The Corporate EPP is a confidential document maintained by the EPC chairperson and governed by WellCare's EPC. The area EPPs are confidential documents maintained by the associated departments under the guidance of the EPC. The Enterprise EPP and its component parts shall be distributed to all EPC members and is made available to WellCare associates on a "need to know" basis.

This plan and all associated plans shall be reviewed for necessary updates no less than once per calendar year. It is WellCare's expectation, however, that all EPPs shall be updated throughout the year to account for new and evolving regulatory requirements as well as to accommodate personnel and system changes.

The executive sponsor and chairperson of the EPC are the approvers of the Corporate EPP. All area EPPs shall be approved by the primary area EPC representative and the associated vice president or area leader. The EPP documents have been structured such that information subject to frequent change has been included as appendix material. In order to maintain an up-to-date EPP without undue administrative burden, the chairperson of the EPC may authorize updates to the Corporate EPP appendix documents as needed without gaining new approval of the Corporate EPP. Similarly, the various area EPC representatives may authorize updates to area EPP appendix documents as needed. Any changes to an EPP document, including appendix updates, should be noted in the associated document's revision history. Every time a material change is made to the body of an EPP, the document must be re-approved by the primary area EPC representative and the associated vice president or area leader.

The EPC Charter (Appendix A of this document) is the exception to the above rule. Changes to the EPC Charter require approval by the EPC executive sponsor and the EPC chairperson after ratification by the EPC representatives present at a regularly scheduled EPC meeting.

Members of the EPC may access and maintain the Corporate EPP, all area EPPs and all associated documents on the EPC SharePoint site at:

<http://wellcarelink.wellcare.com/sites/EmergencyPreparedness/default.aspx>

It shall be the responsibility of WellCare's various regulatory affairs personnel (state and CMS) to collect and submit appropriate, applicable portions of the Enterprise EPP and associated WellCare policies upon request by state and Federal agencies. It is also the responsibility of these regulatory affairs personnel to provide the EPC chairperson with timeline notification of document and information requests.

1.8 Contractual and Regulatory Compliance

WellCare is a nation-wide company servicing members in multiple states with health plans that must comply with the respective Federal and state regulatory requirements. Different governing agencies may have specific business continuity requirements which dictate the activities of WellCare. In all cases, WellCare's objective is to abide by all contractual and regulatory mandates and maintain service continuity and sustainability.

In addition to compliance with HIPAA contingency plan governing standards (Health Insurance Portability and Accountability Act of 1996 (HIPAA) Security Standards for the Protection of Electronic Protected Health Information; 45 CFR Part 160 and Part 164, subparts A and C), the primary universal requirement throughout WellCare's contracts is the prompt notification of CMS, state agencies, and other regulating bodies in the event of an emergency impacting WellCare's ability to perform services. Such notice shall be

the responsibility of the corporate Compliance Department (CMS and other Federal agencies), Legal Department, and regional regulatory affairs departments (state agencies).

WellCare's contractual disaster recovery and business continuity requirements are outlined in Appendix D of this document.

1.9 Associate Awareness and Training Activities

The EPC shall be responsible for associate awareness and training activities. The EPC maintains a SharePoint site with necessary associate information, resources, and updates. The associate SharePoint site can be found at:

<http://wellcarelink/sites/solutionsgroup/EmployeeEmergencyPreparedness/default.aspx>

In addition, the EPC shall provide general emergency planning awareness training to all associates at least once per calendar year. Sales personnel and senior management members are exempt from emergency planning awareness training requirements. Specific area EPP training shall be the responsibility of the area EPC representatives and provided to associates as needed.

1.10 Plan Testing

WellCare employs two strategies for exercise of its Enterprise EPP. First, semi-annual table-top exercises are used to evaluate plans and identify possible gaps for remediation. The first table-top exercise of each calendar year shall be prior to the start of the Atlantic hurricane season and shall focus on preparing the corporate campus for a hurricane or other tropical weather event. The second table-top exercise of each calendar year shall include one or more unanticipated emergency scenarios.

In addition to the table-top exercises, WellCare shall conduct annual systems recovery testing prior to the start of the Atlantic hurricane season. The result of the testing shall be documented and presented to WellCare's Internal Audit Department and EPC executive sponsor and chairperson.

Finally, the EPC shall review and update as needed an enterprise business impact assessment (BIA) once per calendar year. The Enterprise BIA shall focus on critical gaps and risks. It shall be presented to the EPC executive sponsor and chairperson and escalated to the EPC Steering Team as deemed appropriate by the EPC executive sponsor.

2 EMERGENCY DECLARATION

2.1 Identification, Assessment, and Activation

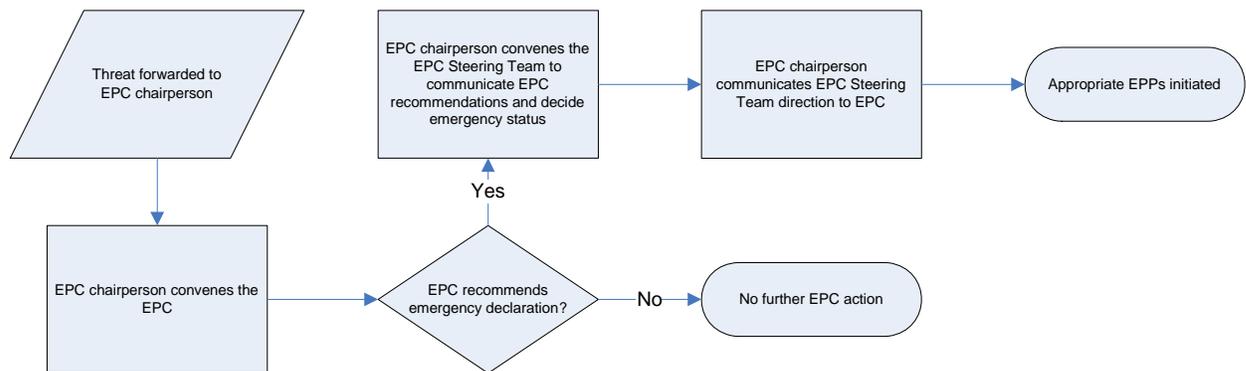
Upon discovery of a major incident that could potentially interrupt WellCare's business for more than eight business hours, the EPC chairperson alerts EPC Steering Team and convenes the EPC as needed. Within four hours the EPC assesses the incident's impact to business operations and develops recovery recommendation(s). The EPC chairperson or alternative EPC representative presents the assessment and recommendation to the EPC Steering Team for a decision regarding declaration of an emergency. The EPC Steering Team shall be responsible for the declaration of an emergency and for making any associated decisions necessary before EPPs can be initiated. The EPC Steering Team shall work in consultation with the CEO as its members deem necessary or appropriate.

For anticipated incidents, such as hurricanes and other tropical weather events, the EPC shall be convened as soon as a potential and viable threat to one or more WellCare facilities is identified. The remainder of the emergency declaration process mirrors the unanticipated event protocol.

EPC Steering Team decisions shall be put to a simple majority vote of members present. The EPC Steering Team chairperson shall serve as the tie-breaker for any votes. Once convened by the EPC chairperson, the EPC Steering Team members present shall be deemed sufficient for all decision making even if the members present do not represent a quorum of the EPC Steering Team membership.

Once approved by the EPC Steering Team, the decision to declare an emergency is communicated to the EPC by the EPC chairperson and then to the individual area personnel including key associates and vendors (as described in area EPPs) by the EPC representatives. Emergency response activities outlined in each area EPP go into effect immediately. Depending on the nature and scope of the emergency, the Corporate Communications team may also distribute one or more associate announcements and/or update the associate emergency hotline message.

Any such meetings of the EPC and / or EPC Steering Team may be conducted in person, via telephone, or via other electronic communication channels as necessary for timely communication and decision-making.



In the event of a service interruption only (e.g., telephone system, computer systems) in which a physical facility is not impacted, initial notification may come directly from Information Technology Department personnel. In this situation, the Information Technology leadership will perform an initial assessment of the incident and determine if further notification is required including notifying the EPC chairperson.

The EPC chairperson shall be responsible for communicating the location and time of EPC and EPC Steering Team meetings in the event of an emergency. Meeting locations and the conference bridge identified in Appendix E of this document.

2.2 Emergency Level Definitions

2.2.1 “Safe” and “Restricted” Commuting

“Restricted” commuting is when the Hillsborough County Emergency Operations Office declares one of the following via the Emergency Alert System (24-hour radio frequency 162.400 MHz) or other available medium (e.g., email alert, local news):

- Evacuation order for any area of the commute to an alternative facility
- Declaration of a state of local emergency
- Evacuation routes are pronounced for the interstate systems or state highways used for the commute
- Dusk to dawn curfews that would restrict commute or operations at an alternative facility

A “restricted” commute could also be created by one or more of the above declarations in another county such that the declaration impacts associate home residence, other WellCare facilities and/or alternative facilities, and/or commutes between those locations.

In addition to the situations above, any commute that would put an employee’s health or welfare at undue risk could be considered “restricted.” Otherwise, a commute is considered “safe.”

2.2.2 Level 1 Emergency (8-48 hours of business interruption)

If a disruption is expected to last over eight business hours but not longer than 48 hours, managers are instructed to transfer the maximum workload possible to their appropriate vendor partners for the duration of the disruption. Key associates designated as area business recovery personnel (also referenced as Level 1 associates) will work from home, if possible, to interface with vendors and maintain critical business functions during the first 48 hours post incident.

2.2.3 Level 2 Emergency Definition (48-120 hours of business interruption)

If the disruption is expected to last at least 48 hours but not longer than 120 consecutive hours, managers are instructed to transfer the maximum workload possible to their appropriate vendor partners for the duration of the disruption. In addition, managers will select Level 1 and Level 2 associates to travel to the designated offsite facilities where possible. In the event that the disruption permits only restricted commutes, associates will be redirected to alternate locations and/or expected to continue work from home. Hotel accommodations for relocated associates will be arranged within close proximity of offsite facilities. Level 1 and Level 2 staff should be sufficient to perform critical business functions at 80% of normal work load for up to 120 hours post incident.

2.2.4 Level 3 Emergency Definition (120-360 hours of business interruption)

If the disruption is expected to last at least 120 hours but not longer than 360 hours, managers are instructed to transfer the maximum workload possible to their appropriate vendor partners for the duration of the disruption and relocate Level 1, Level 2, and Level 3 associates as needed. In addition, managers will select Level 1, Level 2, and Level 3 associates to travel to the designated offsite facilities where possible. In the event that the disruption permits only restricted commutes, associates will be redirected to alternate locations or expected to continue work from home. Hotel accommodations for relocated associates will be arranged within close proximity of offsite facilities. Level 1, Level 2, and Level 3 staff should be sufficient to perform critical business functions at 80% of normal work load for up to 360 hours post incident.

2.3 Associate Expectations

All associates, regardless of level, are responsible for checking the WellCare Emergency Hotline at (866) 473-9135 and returning to work when requested or immediately at the conclusion of the emergency. All associates should check work voicemail twice daily during an emergency, call the WellCare Emergency Hotline twice daily during an emergency, and be available by phone in the event that supervisors or other WellCare personnel need to convey critical information. WellCare associates also are expected to monitor local TV and radio stations in the event of a regional emergency.

Level 1 associates shall have specific, pre-assigned tasks in the event of an emergency. For anticipated emergencies, Level 1 associates may be dismissed from work 24 hours before the expected emergency to perform personal preparations.



Level 2 and Level 3 associates are critical for the resumption of normal operations and shall report to the primary or alternative work location as directed by supervisors or other WellCare management via the WellCare Emergency Hotline or other individual contact (e.g., phone, email).

In addition to the inbound communication outlined above, WellCare shall use phone trees to communicate with associates. As a result, it is critical that all associates maintain up-to-date contact information in the Human Resources portal including personal addresses, home phone numbers, personal cell phone numbers, and alternative email addresses. All people managers are responsible for downloading a current organizational contact report from the Human Resources portal on a regular basis and immediately preceding an anticipated emergency.

3 APPENDIX A – EPC CHARTER

3.1 Purpose

WellCare Health Plans, Inc. and its subsidiaries (collectively “WellCare” or the “Company”) are committed to developing and implementing comprehensive, compliant business continuity and disaster recovery plans (collectively “emergency preparedness plans” or “EPPs”) that protect associates and ensure the survival of the Company. To that end, WellCare has established an Emergency Preparedness Committee (the “EPC”) to collaborate on, and coordinate, enterprise-wide emergency preparedness issues and matters. The primary duties and responsibilities of the EPC are set forth below.

The EPC shall provide planning and guidance to allow the Company to respond to business disruptions by:

- Safeguarding associates’ lives and Company property
- Making operational and financial assessments and decisions
- Quickly recovering and resuming operations
- Protecting all of the organization’s records and data
- Maintaining regulatory compliance
- Allowing members access to uninterrupted services

3.2 Duties and Responsibilities

The responsibility of the EPC is to ensure each critical functional area within the Company develops a contingency plan that achieves the following:

- Identifies necessary resources to enact the contingency plan
- Provides for the safety and well-being for the people on the impacted premise at the time of the disaster
- Continues critical business operations
- Outlines contingency and backup processes and procedures
- Minimizes immediate damage and losses
- Facilitates effective coordination of recovery tasks
- Calls for regular updating of the functional plans
- Aligns with the other functional area contingency plans
- Aligns with the Company information systems disaster recovery capabilities

The EPC shall be responsible for monitoring situations and incidents that could lead to the declaration of an emergency and keeping Company associates and senior management briefed on such situations as necessary. Additionally, the EPC shall be responsible for providing recommendations to the Company’s executive management

team via the EPC Steering Team (see 1.3) regarding the declaration of an emergency and any associated decision-making.

3.3 EPC Oversight

Oversight of the EPC shall be by the EPC executive sponsor and EPC Steering Team. The EPC executive sponsor shall be appointed by the CEO. The EPC executive sponsor shall be the chairperson of the EPC Steering Team. Members of the EPC Steering Team shall be appointed by the CEO. The EPC Steering Team may include, but is not limited to, the following associates: Chief Financial Officer, Chief Administrative Office, SVP Human Resources and the SVP HealthCare Delivery.

It shall be the responsibility of the EPC Steering Team, in consultation with the CEO as its members deem necessary and appropriate, to make emergency declarations and other critical decisions escalated to the EPC Steering Team by the EPC.

3.4 EPC Membership and Meetings

The EPC executive sponsor shall appoint an EPC chairperson who shall preside over all meetings of the EPC at which he or she is present and shall be the chief liaison between the EPC and the EPC executive sponsor and the EPC Steering Team. The EPC chairperson shall be responsible for facilitating the activities of the EPC and its representatives, maintaining the corporate EPP, and otherwise serving as a central point of contact for the Company's emergency preparedness activities.

The EPC chairperson shall appoint a backup to preside over meetings the chairperson is unable to attend and otherwise act in the stead of the chairperson as needed. The EPC chairperson shall also appoint an EPC secretary who shall give notice of all EPC and EPC Steering Team meetings to the members of the EPC and EPC Steering Team; prepare agendas for all EPC and EPC Steering Team meetings; record, maintain and distribute minutes of all EPC and EPC Steering Team meetings.

The EPC chairperson shall determine the functional areas requiring representation on the EPC and shall solicit the associated Area Leaders to appoint primary and backup representatives to the EPC. Each member of the EPC shall serve until such member's successor is duly appointed or until such member's earlier removal by the EPC executive sponsor or associated Area Leader. Members of the EPC may be removed at any time, with or without cause, by the EPC executive sponsor or his or her designee. Unless the EPC executive sponsor determines otherwise, a member of the EPC shall be removed from the EPC immediately upon termination of his or her employment with the Company.

If any matter requires a vote at an EPC meeting, the action of a majority of the EPC members present shall be the action of the EPC. In the event of a deadlock, the EPC chairperson shall have a tie-breaking vote.

If any matter requires a decision at an EPC Steering Team meeting, the action of a majority of the EPC Steering Team members present shall prevail. In the event of a deadlock, the EPC Steering Team chairperson shall have a tie-breaking vote.

Meetings of the EPC may be conducted in person, by telephone conference call, or by video conference. To the extent that meetings are conducted other than in person, the EPC may utilize web- or electronic-based technology to facilitate participation in such meetings.

The EPC, in its discretion, may invite to its meetings other WellCare associates and/or outside advisors.

Subject to approval by the EPC executive sponsor, the EPC may adopt further rules for its governance, provided that such rules are not inconsistent with this Charter, any other policy or procedure of the Company, or any applicable law, rule, or regulation.

3.5 Amendments

This Charter may be amended only after a two-thirds vote of the EPC membership followed by approval by the EPC chairperson and EPC executive sponsor.



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4 APPENDIX B – EPC STEERING TEAM MEMBERSHIP

Name	Title
William McKinney	VP Operations, EPC Executive Sponsor & Steering Team Chairperson
Walt Cooper	Chief Administrative Officer
Larry Anderson	SVP & Chief HR Officer
Ann Wehr	SVP & Chief Medical Officer
Blair Todt	SVP & Chief Compliance Officer
Scott Law	SVP, Health Care Delivery
Tim Susanin	SVP & General Counsel
Tom Tran	SVP & Chief Financial Officer
Steven Tate	EPC Chairperson

5 APPENDIX C – EPC MEMBERSHIP

As of April 15, 2011

EPC Area	EPC Primary
Corporate	William McKinney (EPC Executive Sponsor)
	Steven Tate (EPC Chairperson)
Compliance	Cheryl Wasserman (Compliance) - primary
	Craig Lewis (Compliance) - backup
	David Bork (Information Security) - primary
	Glenn Dix (Information Security) - backup
Corp Communication	Amy Knapp - primary
	Denise Malecki - backup
Facilities	Ken Van Stedum (remote) - primary
	Frank Garced (corporate) - primary
	Alex Valdes (corporate) - backup
Finance	Mike Levin (Finance) - primary
	Mike Lisman (Finance) - backup
	Bernie Matheson (Treasury) - primary
	George Thanasoulis (Treasury) - backup
Health Services	Denise Walthall - primary
	Ellen Gallagher - backup
Human Resources	Greg Cullison - primary
	Henry Toledo - backup
IT	Greg Brooks - primary
	Heleen Mullins - backup
Legal	Courtney Cox (Legal) - primary
	Desiree Demonbreun (Legal) - backup
	Geoff Petrie (Medicaid RA) - primary
	Lindsey Parks (Medicaid RA) - backup
Marketing and Sales	Jason Hamilton - primary
	Scott Dickler - backup
Ops - Member Services	Jeff Lehmann - primary
	Kenny Kelley - backup
Ops - Provider Services	Melissa Johnson - primary
	Patrick Hanlon - backup
Pharmacy	Phil Stalas - primary
	Lisa Long - backup
North Division	Justin Frazer - primary
	Ben Craig - backup
South Division	Annette Zerbe - primary
	Patrick Devlin - backup
FL / HI Division	Greg Quick (FL) - primary
	TBD (FL) - backup



WellCare Corporate Business Continuity and Disaster Recovery Plan

	Carolyn Saiki (HI) - primary
	Erhardt Preitauer (HI) - backup

6 APPENDIX D – EMERGENCY PREPAREDNESS CONTRACTUAL REQUIREMENTS

As of April 7, 2010

State	Contract	Section/Title	Requirement	Applicable LIONS ID#		
FL	Healthcare and Staywell Contract (last updated 4/7/10)	XI. Information Management & Systems D. Systems Availability, Performance and Problem Mgt Requirements 4. Problem Notification	a. Upon discovery of any problem within its span of control that may jeopardize or is jeopardizing the availability and performance of all systems functions and the availability of information in said systems, including any problems affecting scheduled exchanges of data between the Health Plan and the Agency and/or its agent(s), the Health Plan shall notify the applicable Agency staff via phone, fax and/or electronic mail within one (1) hour of such discovery. In its notification the Health Plan shall explain in detail the impact to critical path processes such as enrollment management and claims submission processes.	22577		
			b. The Health Plan shall provide to appropriate Agency staff information on system unavailability events, as well as status updates on problem resolution. At a minimum these updates shall be provided on an hourly basis and made available via electronic mail and/or telephone.	22578		
		XI. Information Management & Systems D. Systems Availability, Performance and Problem Management Requirements 8. Business Continuity- Disaster Recovery (BC-DR) Plan	a. Regardless of the architecture of its systems, the Health Plan shall develop, and be continually ready to invoke, a business continuity and disaster recovery (BC-DR) plan that is reviewed and prior-approved by BMHC.	22586	24723	22587 & 29226 (for all of b.)
			b. At a minimum the Health Plan's BC-DR plan shall address the following scenarios:	24724		
			(1) the central computer installation and resident software are destroyed or damaged;	27587	29226	
			(2) system interruption or failure resulting from network, operating hardware, software, or operational errors that compromise the integrity of transactions that are active in a live system at the time of the outage;			
			(3) system interruption or failure resulting from network, operating hardware, software or operational errors that compromise the integrity of data maintained in a live or archival system;			
			(4) system interruption or failure resulting from network, operating hardware, software or operational errors that do not compromise the integrity of transactions or data maintained in a live or archival system, but do prevent access to the system, i.e., cause unscheduled system unavailability.			

		<p>c. The Health Plan shall periodically, but no less than annually, by April 30 of each Contract year, perform comprehensive tests of its BC-DR plan through simulated disasters and lower level failures in order to demonstrate to the Agency that it can restore system functions per the standards outlined in the Contract.</p>	22588	24725	
		<p>d. In the event that the Health Plan fails to demonstrate in the tests of its BC-DR plan that it can restore system functions per the standards outlined in this Contract, the Health Plan shall be required to submit to the Agency a corrective action plan in accordance with Attachment II, Section XIV, Sanctions, that describes how the failure will be resolved. The corrective action plan shall be delivered within ten (10) business days of the conclusion of the test.</p>	22589	24726	
	<p>Section XII – Reporting Requirements Health Plan Reporting Requirements</p>	<p>Contract Section</p>	<p>Submission</p>	<p>Plan Type</p>	<p>Frequency</p>
	<p>Table 2 SUMMARY OF SUBMISSION REQUIREMENTS</p>	<p>Section XI, Item D.8.a. & Section XVI, Item BB.</p>	<p>Business Continuity- Disaster Recovery Plan</p>	<p>All</p>	<p>Before beginning operation and by May 31 annually thereafter</p>
	<p>Section XVI – Terms and Conditions BB. Emergency Management Plan</p>	<p>Annually by May 31 of each Contract year, the Health Plan shall submit to BMHC for approval an emergency management plan specifying what actions the Health Plan shall conduct to ensure the ongoing provision of health services in a disaster or man-made emergency including, but not limited to, localized acts of nature, accidents, and technological and/or attack-related emergencies. If the emergency management plan is unchanged from the previous year, the Health Plan shall submit a certification to BMHC that the prior year’s plan is still in place.</p>			
<p>FL Healthy Kids (confirmed 4/7/10)</p>	<p>FL_HK00533, 4-11</p>	<p>Neither party shall be responsible for delays of failure in performance of its obligations under this Contract resulting from acts beyond the control of the party. Such acts shall include, but are not limited to, blackouts, riots, acts of war, terrorism, epidemics, government regulations on statutory amendments adopted following the date of execution of this Contract, fire communication line failure, computer hardware failure, computer executive software failure, power failure or shortage, fuel shortages, hurricanes or other natural disasters.</p>	25265		
<p>There is no mention of disaster notification on the Florida government website</p>					

GA	GA Families 2009	4.17.6 Systems Availability and Performance Requirements	Regardless of the architecture of its Systems, the Contractor shall develop and be continually ready to invoke a business continuity and disaster recovery (BC-DR) plan that at a minimum addresses the following scenarios: (a) the central computer installation and resident software are destroyed or damaged, (b) System interruption or failure resulting from network, operating hardware, software, or operational errors that compromises the integrity of transactions that are active in a live system at the time of the outage, (c) System interruption or failure resulting from network, operating hardware, software or operational errors that compromises the integrity of data maintained in a live or archival system, (d) System interruption or failure resulting from network, operating hardware, software or operational errors that does not compromise the integrity of transactions or data maintained in a live or archival system but does prevent access to the System, i.e. causes unscheduled System Unavailability.	29226		
		4.17.6 Systems Availability and Performance Requirements 4.17.6.14	The Contractor shall periodically, but no less than annually, test its BC-DR plan through simulated disasters and lower level failures in order to demonstrate to the State that it can restore System functions per the standards outlined elsewhere in this Section of the Contract.	22588		
		4.17.6 Systems Availability and Performance Requirements	In the event that the Contractor fails to demonstrate in the tests of its BC-DR plan that it can restore system functions per the standards outlined in this Contract, the Contractor shall be required to submit to the State a Corrective Action Plan that describes how the failure will be resolved. The Corrective Action Plan will be delivered within five (5) Business Days of the conclusion of the test.	29228		
		4.17.6 Systems Availability and Performance Requirements 4.17.6.5	Upon discovery of any problem within its Span of Control that may jeopardize System availability and performance as defined in this Section of the Contract, the Contractor shall notify the applicable DCH staff in person, via phone, electronic mail and/or surface mail.	21218		
		4.17.6 Systems Availability and Performance Requirements 4.17.6.6	The Contractor shall deliver notification as soon as possible but no later than 7:00 pm if the problem occurs during the business day and no later than 9:00 am the following business day if the problem occurs after 7:00 pm.	21219		
		4.17.6 Systems Availability and Performance Requirements 4.17.6.7	Where the operational problem results in delays in report distribution or problems in on-line access during the business day, the Contractor shall notify the applicable DCH staff within fifteen (15) minutes of discovery of the problem, in order for the applicable work activities to be rescheduled or be handled based on System Unavailability protocols.	21220		
		4.17.6 Systems Availability and Performance Requirements 4.17.6.8	The Contractor shall provide to appropriate DCH staff information on System Unavailability events, as well as status updates on problem resolution. These up-dates shall be provided on an hourly basis and made available via electronic mail, telephone and the Contractor's Web Site/DCH Portal.	21221		

			There is no mention of disaster notification on the Georgia government website			
		GA2009_01427 31.0 MISCELLANEOUS 31.7 FORCE MAJEURE 31.7.1	Neither party to this Contract shall be responsible for delays or failures in performance resulting from acts beyond the control of such party. Such acts shall include, but not be limited to, acts of God, strikes, riots, lockouts, acts of war, epidemics, fire, earthquakes, or other disasters.	29673		
GA	GA Families 2009	23.0 LIQUIDATED DAMAGES 23.5 CATEGORY 4	23.5.1.1 Failure to implement the business continuity-disaster recovery (BC-DR) plan as follows: 23.5.1.1.1 Implementation of the (BC-DR) plan exceeds the proposed time by two (2) or less Calendar Days: five thousand dollars (\$5,000) per day up to day 2; 23.5.1.1.2 Implementation of the (BC-DR) plan exceeds the proposed time by more than (2) and up to five (5) Calendar Days: ten thousand dollars (\$10,000) per each day beginning with Day 3 and up to Day 5; 23.5.1.1.3 Implementation of the (BC-DR) plan exceeds the proposed time by more than five (5) and up to ten (10) Calendar Days, twenty-five thousand dollars (\$25,000) per day beginning with Day 6 and up to Day 10; and 23.5.1.1.4 Implementation of the (BC-DR) plan exceeds the proposed time by more than ten (10) Calendar Days: fifty thousand dollars (\$50,000) per each day beginning with Day 11.	29603, 29604, 29605, 29606		
HI	HI Medicaid - ABD	HI00562 Section 50 - Health Plan Administrative Requirements 50.900 Information Technology 50.970 Disaster Planning and Recovery Operations	The health plan shall have in place disaster planning and recovery operations appropriate for the health plan industry, and comply with all applicable federal and state laws relating to security and recovery of confidential information and electronic data.	12335		
			There is no mention of disaster notification in the Hawaii State Medicaid contract nor on Hawaii government website			

NY	NYC FHP	2.7 Termination c) Contractor Initiated Termination	<p>iii) The Contractor shall have the right to terminate this Agreement in its entirety, for either the Contractor's MMC or FHPlus product if applicable, or for either or both products in specified counties of the Contractor's service area as identified in Appendix M, if the Contractor is unable to provide services pursuant to this Agreement because of a natural disaster and/or an act of God to such a degree that Enrollees cannot obtain reasonable access to services within the Contractor's organization, and, after diligent efforts, the Contractor cannot make other provisions for the delivery of such services. The Contractor shall give SDON and DOHMH written notice of any such termination that specifies: A) the reason for the termination, with appropriate documentation of the circumstances arising from a natural disaster and/or an act of God that preclude reasonable access to services; B) the Contractor's attempts to make other provision for the delivery of services; and C) the effective date of the termination, which shall not be less time than will permit an orderly transition of Enrollees, but no more than ninety (90) days.</p>	15941, 15942		
			There is no mention of disaster notification in the New York City or State Medicaid contracts			
OH	OH CFC	OH00039 Baseline LIMITATION OF LIABILITY X, C	<p>In the event that, due to circumstances not reasonably within the control of MCP or ODJFS, a major disaster, epidemic, complete or substantial destruction of facilities, war, riot or civil insurrection occurs, neither ODJFS nor MCP will have any liability or obligation on account of reasonable delay in the provision or the arrangement of covered services; provided that so long as MCP's certificate of authority remains in full force and effect, MCP shall be liable for the covered services required to be provided or arranged for in accordance with this agreement.</p>	14226		
			There is no mention of disaster notification in the Ohio State Medicaid contract nor on the Ohio Government website			
IL	Exhibit D	Internet Site-to-Site VPN Requirements	There is no mention of disaster notification in the Illinois State Medicaid contract			

MO	Harmony Health Plan of MO	2.26.7 Information Systems Availability	The health plan shall ensure that critical member and provider Internet and/or telephone-based functions and information, including but not limited to ECM and self-service customer service functions are available to the applicable system users twenty-four (24) hours a day, seven (7) days a week, except during periods of scheduled system unavailability agreed upon by the state agency and the health plan. The health plan shall ensure that at a minimum all other system functions and information are available to the applicable system users between the hours of 7:00 a.m. and 7:00 p.m. Unavailability caused by events outside of a health plan's span of control is outside of the scope of this requirement. In the event of a declared major failure or disaster, the health plan's core eligibility/enrollment and claims processing systems shall be back online within seventy-two (72) hours of the failure's or disaster's occurrence.			
		3.5 Force Majeure	The contractor shall not be liable for any excess costs for delayed delivery of goods or services to the State of Missouri, if the failure to perform the contract arises out of causes beyond the control of, and without the fault or negligence of the contractor. Such causes may include, however are not restricted to: acts of God, fires, floods, epidemics, quarantine restrictions, strikes, and freight embargoes. In all cases, the failure to perform must be beyond the control of, and without the fault or negligence of, either the contractor or any subcontractor(s). The contractor shall take all possible steps to recover from any such occurrences.			
FEMA		FEMA	There are no notification requirements by State designated by FEMA. There is, however site information by region and State for national disasters	FEMA		
FEMA		Florida information	http://www.fema.gov/news/event.fema?id=11368	FEMA		
FEMA		FEMA	Pre-Disaster Emergency Declaration Requests (Disaster Assistance Policy - 1001) http://www.fema.gov/hazard/guidance.shtm	FEMA		
FEMA		FEMA	Emergency and Expedited Major Disaster Declaration Requests (Disaster Assistance Policy - 1004) http://www.fema.gov/pdf/hazard/major_disaster_reqs.pdf	FEMA		
FEMA		Regional Information	http://www.fema.gov/about/regions/index.shtm	FEMA		



BC Requirements per State 05 24 2010.xls

7 APPENDIX E – EPC MEETING LOCATIONS AND CONFERENCE BRIDGE

In the event of an unanticipated emergency during which the EPC chairperson is unable to communicate meeting times and locations, the EPC and EPC Steering Team shall immediately convene at the Tampa headquarters location in Renaissance 2, Room 301.

If the Tampa headquarters is not accessible, the EPC and EPC Steering Teams shall convene at the first accessible alternative location in the order identified below by using the following conference bridge:

Dial In: (866) 434-5269
Participant Code: 8613258
Host Code: 3465

Emergency Planning Location 1	Borders
	12500 N Dale Mabry
	Tampa, FL 33618
	813-265-8455
Emergency Planning Location 2	Holiday Inn Lakeland I-4 Hotel & Conf Ctr
	3260 US-98 N
	Lakeland, FL 33805
	(877) 786-9480
Emergency Planning Location 3	Hampton Inn & Suites
	2740 Cypress Ridge Blvd
	Wesley Chapel, FL 33544
	813 349-8165