E. Emergency Response and Disaster Recovery Plan

Describe the Vendor’s proposed emergency response and disaster recovery plan, including a summary of how the plan addresses the following areas:

As a long-standing national health care company, UnitedHealthcare has comprehensive and well-managed emergency response and disaster recovery plans as part of our business continuity strategy, which we will implement with our Kentucky Medicaid managed care program. Our plans and strategies address potential business interruption risks to key operations that could stem from the deployment and use of our people, processes, technology and financial assets in carrying out day-to-day business activities. The strategy focuses local areas of risk to critical business functions and planning for worst-case scenarios, which can include all forms of disasters, both natural and fabricated (e.g., hurricane, flood, fire, terrorism or pandemics).

UnitedHealth Group’s Enterprise Resiliency & Response (ER&R) Program is an added layer of protection for UnitedHealthcare MCOs’ business continuity plans (BCPs). It prevents and mitigates the impact of events that could disrupt our Kentucky operations and service delivery to enrollees and providers by quickly mobilizing our corporate-based and local teams to manage the event and confirm appropriate resources are made available to support the response. Our thorough business continuity planning establishes the basis from which business processes and operations resume, including service to customers. Our emergency response and disaster recovery team, the event management team (EMT), brings all components together for a consistent response to facilitating business continuity and maintaining public and employee safety during emergencies and disaster recovery.

To confirm continuity of operations and address preparedness and natural disaster recovery, we maintain P&P) based upon the following:

- Disaster Recovery Strategies and Objectives
- Scenario-based Planning for Disaster Recovery
- Employee Training on Preparedness, Natural Disaster and Recovery
- Essential Business Functions and Key Employees
- Continuity Plans to Cover Essential Business Functions
- Communication with Staff and Suppliers when Normal Systems are Unavailable
- Provider and Member Call Center Operations

Our EMT provides consistent and reliable methods and interactions among all parties necessary to manage a major event. For Kentucky, we have operations subject matter experts at the local Kentucky health plan and corporate locations who manage actions within their functional teams in collaboration with the EMT to quickly and reliably engage, communicate and make decisions to maintain business continuity, and enact safety measures for staff, enrollees and providers.

We will implement the Kentucky Medicaid managed care program on our shared strategic platform for UnitedHealthcare Community Plan, CSP. Our CSP platform supports Medicaid and D-SNP in 31 states and 6.7 million enrollees. The systems composing the platform are shared across UnitedHealthcare businesses, and some systems, like our portals, B2B EDI framework and UM platform, are shared across UnitedHealthcare segments, products and customers. We do this to manage costs, share common services and supports, and exercise best common practices gathered globally from the industry and across our businesses and products.
Our policies and standards are based upon industry best practices using the HITRUST framework, which is aligned to the U.S. government framework for the NIST cybersecurity framework in the health/public sector. HITRUST is also aligned to validate inclusion of additional industry controls such as ISO, NY Cyber Regulation, other state and federal regulations and international standards such as the European Union General Data Protection Regulation. Our frameworks and DMS’s will be well aligned. We welcome the opportunity to review our standards, policies and practices with DMS.

Since we will implement the Kentucky Medicaid managed care program on our shared strategic platforms for our Medicaid business, our underlying systems and data are shared across Medicaid lines of business, and through various systems, across our Commercial and Medicare businesses. Our approach to building disaster recovery, business continuity, various IT audit and compliance reports, and security plans is to produce these artifacts once for UnitedHealthcare, comprehensive of requirements for all of our customers, and submit to our State partners on a common schedule and format. This reduces overall cost burden, provides a best practice framework across all requirements, and optimizes the value we can deliver to DMS. Due to our shared environments and the number of customers supported, we will work closely with the commonwealth to manage any exceptions to individual state requirements. These exceptions can be items such as audit without notification, use of HITRUST instead of NIST 800, state partner participation in drills, user volume testing in Disaster Recovery exercises, and sharing of detail vulnerabilities and proprietary BCP and Disaster Recovery content.

1. Essential operational functions and responsible staff members;

Our EMT is responsible for making sure our essential operational functions in Kentucky are always working properly. The EMT is based mainly at UnitedHealthcare corporate headquarters. This team consists of hundreds of staff members who support our health plan operational functionalities across the nation. In Kentucky, staff members responsible for verifying business continuity of essential operational functions receive ongoing support from the EMT. The EMT consists of our corporate team and our Kentucky-based leadership team — including our health plan chief executive officer, chief medical officer, chief operating officer, pharmacy director and chief information officer — who have been trained and are responsible for event communication and response execution as has been outlined in the BCP and relevant P&Ps regarding emergency response and disaster preparedness or recovery.

In addition to our overall BCP and policies that apply in all states where UnitedHealthcare has operations, we develop applicable drills and tests to address and align with potential fabricated and natural disasters common in the region, such as weather patterns, cyber-security, public health threats and power outages. In Kentucky, when a potential or actual threat to essential operational functions has been identified, the dedicated EMT lead for our Kentucky health plan will:

- Engage required executive leaders necessary to initially respond to the event
- Execute on the decisions made by executive leadership
- Provide central coordination of communications, resources, personnel, issues and other information through the notification and response phases of event management
- Determine the next-steps strategy for effectively managing an event to resolution
- Facilitate the collaboration needed to make critical decisions that drive the remediation and coordination efforts with various internal and external stakeholders as determined by the nature of the event and the short- and long-term effect on the organization
The event management team comprises local, state, regional and national functional leaders within UnitedHealthcare and UnitedHealth Group.

The emergency response, disaster recovery and business continuity team for our Kentucky Medicaid MCO, including the Kentucky SKY program, will include:

- **Executive Sponsor**: Accountable for verifying the recovery strategy and associated tasks align with the operational recovery time objective. Responsible for making and authorizing critical decisions for determining how to effectively manage a disaster.
- **Business Continuity Lead**: Accountable for development, maintenance, testing and execution of the recovery strategies defined in this plan. Responsible for content management, including maintenance and support of the Kentucky-specific BCP.
- **Customer Communications Lead**: Responsible for communications with critical customers about impact and remediation efforts for the affected business functions. Coordinates and assists in the execution of the customer communications plan.
- **Subcontractor Communications Lead**: Responsible for developing communications for critical subcontractors regarding the impact and remediation efforts for the affected business functions. Coordinates and assists in the dissemination of subcontractor communications with office sites and essential operations located in Kentucky and across the United States.

Because events can vary in length and severity by region, UnitedHealthcare has geographically dispersed staff that supports and supplements the work of any compromised localities.

2. Plans to ensure critical functions and continuity of services to Providers and Enrollees will be met;

Our EMT team leaders have reviewed the requirements pertaining to emergency response, disaster recovery and business continuity in the draft Medicaid Managed Care Contract, including Appendix Q. UnitedHealthcare’s plans to ensure critical functions and continuity of services to providers and enrollees are thorough, organized and well executed. A detailed description of our Enterprise Resiliency and Response program is provided as Attachment E.2 Event Management Plan.

### Emergency Response in Action

Springtime is tornado season in many states we serve. This year has been especially busy for our emergency response and business continuity team. In late May, when tornadoes and flooding hit Ohio, our team helped our Ohio health plan members and providers through the storms by first sending out an “Escalated Public Health Emergency” notice to all our Ohio business lines (Medicaid, D-SNP, LTSS, Medicare and Commercial). Protocol activated in the five Ohio counties affected by the storms included:

For providers:
- Extended claims and grievance filing deadlines
- Relaxed rules regarding prior authorization and time frames for notices
- Allowed out-of-network services to be covered as though in-network

For enrollees:
- Allowed early refills of medications for enrollees living in the impacted counties
- Allowed early replacement of medical supplies (e.g., hearing aids, eyeglasses, dentures) and durable medical equipment (DME) for enrollees living in impacted counties

In collaboration with state and federal regulators:
For individuals with premium payment responsibilities: We complied with the Ohio Department of Insurance provision giving enrollees the option to delay payment without penalties or interest for up to 60 days from the original premium due date.

For Medicare beneficiaries: We complied with all CMS Chapter 4, Section 150 requirements.

Of note is that our Ohio business operations were not affected by the storms. Nevertheless, we proactively activated our emergency response protocol to mitigate any delays in accessing or receiving services for our enrollees and providers in Ohio.

If any of our Kentucky offices (located in Lexington and Louisville) are at risk, inaccessible or disabled, we first move affected staff to other Kentucky offices where they are connected to our internal network with full access to all systems or will be able to access our systems securely from home via our internal virtual private network (VPN). If using our other Kentucky offices is not a viable solution, we route operations and move staff to the closest regional site.

**Focusing on Disaster Prevention and Protection**

Prevention and protection form the basis of UnitedHealth Group’s approach to disaster recovery for all UnitedHealthcare health plans. Balancing the combination of disaster prevention and protection results in reducing both the probability and impact of a disaster. The table highlights our approach to ensuring continuity of services to providers and enrollees:

<table>
<thead>
<tr>
<th>Method to Maintain Continuity of Essential Services</th>
<th>Description of Prevention and Protection Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active-Active/Active-Passive Solutions</td>
<td>Disaster recovery active and standby solutions employ active-active and active-passive components located in two geographically separate data centers where either site can fully support the production application in the event of a disaster with little-to-no manual intervention.</td>
</tr>
<tr>
<td>Distributed Storage Area Network Replication</td>
<td>Recovery solution employs full asynchronous data replication of production storage pools and failover of production processing to geographically dispersed nonproduction processing.</td>
</tr>
<tr>
<td>Failover and Restoration</td>
<td>Some distributed systems employ a hot internal solution with production to geographically separate nonproduction failover and tape data restore.</td>
</tr>
<tr>
<td>“Lights Out” Mode</td>
<td>Data centers can operate in a lights-out mode for up to 3 days. If a data center continues to get fuel to run the generators, they run in this mode indefinitely.</td>
</tr>
<tr>
<td>Mainframe Storage Area Network Replication</td>
<td>Recovery solution employs full asynchronous data replication between the production host and the geographically dispersed hot standby disaster-recovery host.</td>
</tr>
<tr>
<td>Operational Backups</td>
<td>Operational backups use high performance disk-to-disk primary copy with physical off-site second copy tape.</td>
</tr>
<tr>
<td>Recovery Agreements</td>
<td>We purchase vendor site recovery agreements with tape restore for less critical and less integrated applications.</td>
</tr>
</tbody>
</table>

3. Staff training;

As should be expected, our key executive staff, including emergency response and disaster recovery team and event management team (EMT), receives thorough and routine training and practice in handling a variety of emergencies/disasters. Where we believe we excel is that all employees receive training upon hire and at least annually thereafter regarding our policies, processes and company resources specific to topics such as OSHA regulations, safety and security in the workplace. Training encompasses not only local but also global emergencies and disaster preparedness including what to do, when to act, whom to engage, and how to report.
safety concerns. All-employee training also includes regularly scheduled safety drills at UnitedHealthcare office sites to teach employees how to exit the building in the event of an actual emergency. Per company policy, exit maps are posted throughout UnitedHealthcare properties to safely guide employees and visitors out of the building.

All UnitedHealthcare executive leadership, senior managers and EMT team members receive additional initial and ongoing training regarding emergency response and disaster recovery protocol and P&Ps specific to the state and facility in which they work, along with annual BCP training. In turn, they educate other staff members, providing updated instruction and appropriate preparedness training. Our experienced staff is well trained and highly experienced in disaster recovery responses. BCP-focused training methods include:

- Computer-based training relative to Event Management, Business Continuity and IT Disaster Recovery
- Annual Business Continuity and IT Disaster Recovery exercises
- Business Continuity and IT Disaster Recovery plan walk-throughs

As part of the EMT process noted above, our operations and clinical teams, including our call centers, are trained on standard emergency response components. Based on experiences in several states, we have developed and created basic training on areas including:

- Extended filing deadlines
- Relaxed prior authorization and notification time frames
- Continuity of care through out-of-network services covered as though in-network
- Pharmacy refill too soon overrides
- Replacement of DME and supplies for displaced enrollees

Once the EMT process is put in place for a local situation, the specific, detailed response components are documented and trained through talking points, FAQs and team huddles. The event-specific materials include which of the standard components have been implemented, the geographic area/counties included in the response, timeframes and any custom requirements developed based on coordination with local regulators. Talking points and FAQs are updated through tight coordination with our internal EMT team, local plan leadership and state leaders as the response and recovery efforts evolve.

4. Contingency plans for covering essential operational functions in the event key staff are incapacitated or the primary workplace is unavailable;

Our BCPs include contingency plans as part of the overall program. We design and structure our contingency plans to respond to business disruptions by restoring critical business processes and resuming normal business operations in a prioritized manner. Our plans address natural and fabricated disasters and are used in conjunction with the Event Management and Disaster Recovery process described previously. Our BCP for Kentucky will include a variety of initial strategies and contingency plans to respond effectively to loss or interruption of the key staff or functions. The table highlights our key contingency planning strategies:

<table>
<thead>
<tr>
<th>Business Continuity Plan Elements</th>
<th>Loss Description and Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of Facility</td>
<td>Complete interruption of facilities without access to its equipment, local data and content. The interruption may affect a single site or multiple sites in a geographic region. We will recover from anything less than complete interruption by using appropriate portions of the plan.</td>
</tr>
<tr>
<td>Business Continuity Plan Elements</td>
<td>Loss Description and Action Plan</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Loss of Critical Resources; Staff Incapacitated or Required to Seek Shelter</td>
<td>Complete interruption with 100% loss of personnel within the first 24 hours and 50% loss of personnel long-term. The interruption may affect a single site or multiple sites in a geographic area.</td>
</tr>
<tr>
<td>Loss of Critical Systems</td>
<td>Complete interruption and access of critical systems and data located at the various UnitedHealth Group data centers for an extended period. We will achieve recovery from anything less than complete interruption by implementing appropriate portions of the plan.</td>
</tr>
<tr>
<td>Loss of Critical Vendors</td>
<td>Complete interruption in a service or supply provided by a third-party vendor. We will achieve recovery from anything less than complete interruption by implementing appropriate portions of the plan. There are various recovery strategies such as shifting to an alternate contracted provider, contracting a new vendor or temporarily taking the work back in-house.</td>
</tr>
</tbody>
</table>

All strategies focus on safety, maintaining resilience of operations and mitigating impact to our customers timely. High-level strategies include relocating staff to alternate facilities, temporarily off-loading critical work to alternate sites and enabling staff to work from home. We achieve recovery from anything less than complete interruption by implementing appropriate portions of the plan. For example, if our offices in Kentucky become inaccessible or disabled, affected staff can work remotely. In some cases, we relocate functions to neighboring states to maintain business continuity and safety for our staff.

5. Approach to maintaining data security during an event;

Maintaining data security starts with prevention. We mitigate risks to operational functions from disabling events and facilitate ongoing business continuity of our core data systems via our national network of data centers, which meet or exceed all American National Standards Institute and the Telecommunications Industry (ANSI/TIA) 942- Data Center Tier 1 – 3 standards. We have geographically dispersed computing, customer service facilities and health care networks that support and supplement the work of compromised localities. This nationwide network facilitates near immediate failover of our core services and business functions whereby we geographically disperse redundant operations to avoid or reduce operational down time due to the event at hand.

We maintain redundant backup systems that mirror our production systems and are located in physically separate data centers. We create and store weekly backup files at a third location, and use bar coding and archive systems to track recorded data stored off-site for the facility’s physical security. We maintain a current list of individuals authorized to access our backup files and systems.

**Maintaining Data Security during an Event and at All Times**

The Enterprise Information Security (EIS) organization addresses data security risks through standard incident management process and procedure, which is governed by UnitedHealth Group’s corporate security policies, control standards, security standards, guidelines and baselines. UnitedHealth Group’s strategy includes focusing on ways to prevent data security breaches altogether. Scenario-specific risk management is governed by the EIS and represents all security events in the incident management plan that the EMT deploys.

The systems and applications where we hold the Commonwealth’s Medicaid plan data entrusted to us have employee role-based access controls that prevent unauthorized users from accessing the data. Furthermore, any use of the state’s Medicaid data is strictly limited to proper
uses and disclosures permitted by applicable law, the Contract, our P&Ps and as applicable, at
the explicit direction of our state customers.

6. Communication methods with staff, Subcontractors, other key suppliers, and the Department when normal systems are unavailable; and

We articulate communication methods and timelines for notifying others internal and external to the organization when normal systems or services are unavailable in the written BCP, IT Disaster Recovery Plan and Event Management Plan, which we have provided as Attachment E.2 Event Management Plan.

For mass communications, UnitedHealthcare uses a critical event management tool to notify and communicate with staff, business interruption events. Similar to notification methods used by airlines and schools, the notification tool is scalable and allows our event management team to customize notification methods to event circumstances and target audience.

The corporate or health plan leader responsible for notifying others when our normal systems or services are unavailable will use pre-established communication methods to send notifications. For example, if the telephonic system is unavailable, the business lead will notify appropriate staff, the Commonwealth and suppliers via e-blast in addition to telephoning the appropriate individuals from a working telephone.


Per our P&Ps, our BCP and Disaster Recovery plans must be tested at least annually using a variety of formats and scenarios that vary annually. Program staff creates and facilitates exercises using scenarios tailored to the individual operations being exercised. Test exercises may include structured walk-throughs, call tree validation, tabletop event simulation, and large or full-scale simulations. We use an exercise roadmap to track what scenarios were exercised in the past to verify each exercise introduces a new situation that challenges the recovery team.

The ER&R team publishes a formal test exercise report, identifying any gaps, issues or an enhancement identified through testing, and monitors remediation of identified items. When the remediation plan is complete, the appropriate executive leadership certifies the plan. Our Program Steering Committee monitors this certification process.

Because we will implement the Kentucky Medicaid program on our shared strategic platforms for our Medicaid business, our underlying systems and data are shared across Medicaid markets, and through various systems, across our commercial and Medicare businesses. A summary plan and test report will be made available. Due to our shared environments and the number of customers supported, exceptions to individual state requirements are expected, such as sharing of proprietary BCP and Disaster Recovery content.