

**Committee on Energy and Commerce  
U.S. House of Representatives**

Witness Disclosure Requirement - "Truth in Testimony"  
Required by House Rule XI, Clause 2(g)

<b>1. Your Name:</b> Alanna M. Lavelle		
<b>2. Are you testifying on behalf of the Federal, or a State or local government entity?</b>	Yes	No X
<b>3. Are you testifying on behalf of an entity that is not a government entity?</b>	Yes X	No
<b>4. Other than yourself, please list which entity or entities you are representing:</b> WellPoint, Inc.		
<b>5. Please list any Federal grants or contracts (including subgrants or subcontracts) that you or the entity you represent have received on or after October 1, 2009:</b> NGS Contracts - Attachment; Medicare Contracts - Attachment; HealthCore - 2 contracts for research projects for the Center for Biologics Evaluation and Research (CBER) and one with the Center for Drug Evaluation and Research (CDER).		
<b>6. If your answer to the question in item 3 in this form is "yes," please describe your position or representational capacity with the entity or entities you are representing:</b> Director of SIU for WellPoint, Inc.		
<b>7. If your answer to the question in item 3 is "yes," do any of the entities disclosed in item 4 have parent organizations, subsidiaries, or partnerships that you are not representing in your testimony?</b>	Yes	No X
<b>8. If the answer to the question in item 3 is "yes," please list any Federal grants or contracts (including subgrants or subcontracts) that were received by the entities listed under the question in item 4 on or after October 1, 2009, that exceed 10 percent of the revenue of the entities in the year received, including the source and amount of each grant or contract to be listed:</b>		
<b>9. Please attach your curriculum vitae to your completed disclosure form.</b> Attached.		

**Signature:**

**Date:** November 26, 2012

**Alanna M. Lavelle**

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**PROFILE: SUMMARY OF QUALIFICATIONS:**

- A creative problem solver with a proficient aptitude to blend common sense controls coupled with a developed acumen in conducting efficient and productive processes. Successful transition from government to private sector after a 24 year career with the FBI.
- An Executive with decades of expertise in managing complex health care fraud investigations and a tested ability to anticipate, investigate, influence, and assist an organization in successfully accomplishing adjustments to changing business environments
- Over eight years as Director of Investigations Unit for WellPoint, Inc., with a proven track record as a proficient manager who routinely created a teamwork environment through communication, discussion and negotiations among individuals and groups to produce collaboration and establish partnerships
- A decision maker with a demonstrated ability to conduct or direct predictive analysis to ensure that appropriate programs, policies and/or plans are established to provide continuing business operations as a result of catastrophic events.

**EXPERIENCE: WELLPOINT, INC. 2004 - PRESENT  
DIRECTOR OF SPECIAL INVESTIGATIONS UNIT, (SIU), ATLANTA, GEORGIA**

Manage Special Investigation Units for Commercial, Senior and Medicaid business in 7 WellPoint states: Georgia, Indiana, Ohio, Virginia, Missouri, Wisconsin, Kentucky (15 million covered lives), manage staff of 25 Investigators, Medical Directors and Analysts. Oversee investigations for Specialty products and government business, and have successfully served as the SIU representative for all government audits.

- Championed and developed intuitive, analytical data mining initiatives in a fast-paced multi-tasking environment. Demonstrated expertise in working on national “virtual team” in productive, metrics oriented Corporate Risk Management arena.
- Program / Project Management – Created multiple successful programs and anti-fraud campaigns with negotiations of complex vendor agreements including predictive modeling tool. Daily direct interface with marketing, medical management and Network representatives creating a cross functional team to assist in putting the customer first. Created two “Flagged Provider Units” for pre-pay review of claims resulting in \$18 M average savings per year.
- Active stakeholder in cost of care issues, network contracting, benefit design, medical policy support, and as a liaison with medical directors for complex issues. Provide support and testimony in a variety of complex legal issues including class actions as a 30 (b) 6 witness representing WellPoint.
- WellPoint host for semi-annual Health Care Fraud Task Force meetings in all assigned WellPoint states which include the U.S. Attorney’s office, FBI, HHS-OIG, OPM-OIG, Medicaid Fraud Control Units, and other private payer SIU Investigators for information sharing.
- Create annual on line Fraud and Abuse training for 42,000 associates in WellPoint on an annual basis. Provide quarterly instruction and training to health care professionals on a national level for the National Health Care Anti Fraud Association (NHCAA) to include Risk Assessment in Negotiations.
- Recipient of 3 national awards from Blue Cross Blue Shield Association for “Investigation of the Year” and Investigative “Excellence Award” from the National Healthcare Anti-Fraud Association.

- Member of the newly formed “Fraud Prevention Partnership” under the direction of Secretary Sebelius and Attorney General Eric Holder.
- Nationally respected speaker on Health Care Fraud issues within private and public sectors to wide variety of stakeholders including U.S. Congress, law enforcement and public and private venues.

**FEDERAL BUREAU OF INVESTIGATION (FBI) 1979-2004  
SUPERVISORY SPECIAL AGENT (LOS ANGELES - QUANTICO-SAN ANTONIO-ATLANTA)**

- 24 year career with broad-based, progressive and diversified experience in all of the FBI’s program areas. Specialty experience in investigation and prosecution of health care fraud, government fraud, and Counter-Terrorism programs.
- Supervisory Special Agent, Health Care Fraud Task Force, San Antonio; Commendation from FBI Director for investigation and prosecution of Columbia/HCA hospital investigation. Established first Health Care Fraud Task Force in Texas, with emphasis on DME, nursing home and facility fraud for Stark violations.
- Supervisory FBI Liaison Agent to Centers for Disease Control and Prevention (CDC) Atlanta, for joint partnership in Bioterrorism arena, providing written targeted risk assessments to Director of CDC in highly charged post 9/11 environment.
- Supervisory Special Agent, Critical Incident Response Team, (CIRG), Quantico. Member of elite Critical Incident Negotiations Team (CINT), 22 years as Hostage Negotiator, cross trained by Scotland Yard.
- Supervisory Special Agent Instructor at FBI Academy for Undercover Operations, Hostage Negotiations and Crisis Management.
- Commendation from FBI Director for managing extremely sensitive counterterrorism investigations in Central America during Iran-Contra affair within parameters of limited and competing resource needs, extensive media coverage, and political volatility.
- U.S. Attorney General’s commendation for major international Government Fraud investigation into counterfeit aircraft parts and Foreign Corrupt Practices Act.

**EDUCATION**

M.S. Conflict Management, Kennesaw State University (Certified in Alternative Dispute Resolution)  
 B.A. International Relations, University of Minnesota  
 Undergraduate studies at New York University at University of Madrid (Spain).  
 Undergraduate studies at the University of Wisconsin  
 Post graduate studies at Trinity College, Dublin

**BOARD MEMBERSHIPS/CERTIFICATIONS,**

- Chair of the Board - National Health Care Anti-Fraud Association (NHCAA), Washington DC
- Board Member - Blue Cross Blue Shield Association Anti Fraud Board. (NAAB), Chicago
- Chair, AHIP Fraud and Abuse Working Group, Washington, DC
- Associate Certified Fraud Investigator (ACFE)
- Accredited Healthcare Fraud Investigator (AHFI)
- Certified Professional Coder, (CPC) AAPC
- Registered Mediator
- Fluent in Spanish, French and Portuguese