

Congress of the United States
Washington, DC 20510

March 24, 2017

Mr. Stephen Hemsley
CEO
UnitedHealth Group
701 Pennsylvania Avenue Northwest # 650
Washington, D.C. 20004

Dear Mr. Hemsley,

We write out of concern for our constituents who have been notified by UnitedHealthcare that their physicians will be dropped from UnitedHealthcare networks beginning April 15, 2017, and that they will be required to switch providers or pay the full cost for the services you receive. We understand that you are currently in negotiation with Hartford Healthcare regarding your contract and that it is possible that these providers will not be in network in a few weeks if negotiations fail, but that is not the message that was communicated to our constituents. We urge you to take immediate steps to clarify the status of your negotiations to your beneficiaries, provide a call line that Connecticut residents can use to get further information about the status of their particular providers, and allow beneficiaries to continue seeing their provider of choice as an in-network provider until the end of the plan year if negotiations are not successful.

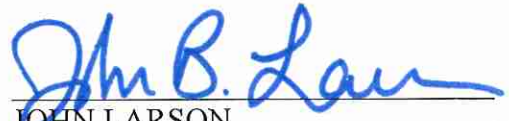
These are constituents who have chosen to utilize a Medicare Advantage Plan to provide the services that Medicare is required to cover and although we understand that Center for Medicare and Medicaid Services (CMS) has some notification requirements, we believe your priority must be in ensuring you provide accurate information, which would be consistent applicable regulations. When individuals choose to purchase a Medicare Advantage Plan through United Healthcare, they will likely have an idea that some plans come with more limited networks than others, but they do not expect to be told that those networks will be decimated in the middle of a plan year because of a failure for two companies to agree to contract terms. It is wholly unfair for seniors to be put in the middle of those negotiations. We ask that make sure that constituents are made aware of what the impact on them will be and limit that impact to the extent possible. If seniors cannot trust that their qualified doctors who are in-network when they sign up for their Medicare Advantage plans will be there throughout the plan year, it creates uncertainty as to whether they can rely on those plans.

Thank you in advance for your consideration of this request.

Sincerely,



RICHARD BLUMENTHAL
United States Senate



JOHN LARSON
Member of Congress



JOE COURTNEY
Member of Congress