

COMMITTEE ON FINANCE WASHINGTON, DC 20510-6200

July 2, 2024

Andrew Witty Chief Executive Officer UnitedHealth Group Inc. 9900 Bren Road East Minnetonka, Minnesota 55343

Dear Mr. Witty:

I write to express my highest concern and profound disappointment that health care providers in my state and around the country still cannot send claims or receive payments for health care services delivered to their patients because your company, Change Healthcare, failed cybersecurity 101. This is absolutely unacceptable. The problem is especially acute for laboratory providers. Not only does reimbursement remain stopped, many providers have exclusive claims processing with Change Healthcare and remain in legal limbo as your representatives have not clearly released those providers to work with another clearinghouse in the aftermath of the cyberattack.

I strongly urge your company to leverage all necessary resources to enable billing systems to be brought back up as soon as possible, compensate these companies for the additional costs and stress your failures have created, and compensate companies for any claims that may be denied because they will be submitted after payers' filing deadlines. The view on the ground is that UnitedHealth Group (UHG) has deprioritized restoration of provider billing functions and left too many providers in financial straits.

On May 1, you testified before the Senate Committee on Finance about the cyberattack on Change Healthcare and the improving recovery. I have heard firsthand as recently as June 27, however, that reimbursement for a pathology practice in Bend, Oregon, is still blocked, rendering your testimony as wishful thinking and disconnected from the real-world experience of many provider practices.

In addition, you told this Committee that providers would be released from exclusive contracts allowing them to pursue other clearinghouse solutions. In response to Senator Hassan's question on exclusivity terms in your contracts you said: "we are releasing those so that people can indeed adopt redundant pathways." However, your company's communication to my constituents has

confused them and so they still feel held hostage to these onerous terms that threaten their practice's business and financial security.

Further, you claimed the breach notifications necessary for providers to inform their patients about whether the personal information had been stolen would be coming "as quickly as possible." However, my constituents report to me that they still do not know whether their patients' data has been exposed and have received contradictory communications from your company as to whether their patients' data has been compromised.

It is my concern that UHG is telling Congress one story, while letting physician practices languish in the dark.

Health care providers and insurance companies rely on clearinghouses to connect otherwise disparate providers and payer technology systems to exchange information to support insurance eligibility, prior authorization submissions, sharing medical records, claim submissions, and receipt of payment. These are essential administrative functions to health care and having any provider billing capability down for months at a time affects not only those practices, but the patients and other providers who rely on their services. To understand how you are addressing the remaining gaps in Change Healthcare's services, please provide answers to the questions below by July 15th.

- 1. How many practices are still not able to submit claims to payers or receive payments and remittances because of the cyberattack on UHG?
- 2. When will these customers be able to submit claims, process remittances, denials and post payments (i.e, be fully functional)?
- 3. How is UHG planning to make those customers whole for claims which have not yet been submitted and are passed payers' timely filing deadlines?
- 4. Provide a full list of Change Healthcare services that have not yet been completely restored and the primary functions of those services.
- 5. Is Change Healthcare still enforcing the exclusivity terms of its contracts?
 - a. If not, how are you letting clients know that they have been released?
 - b. Do clients need to request to be released? If so, is there a particular form or letter template they should use?
 - c. Will you commit to proactively telling all clients who are still without services and affected by these contract terms by July 8th?

- 6. How many full-time, part-time, and contract workers were restoring Change Healthcare services in March 2024? How many full-time, part-time, and contract are working on restoring Change Healthcare services in June 2024?
 - a. If the number of individuals working to restore services has changed, why?
 - b. Has this change slowed your ability to restore all services that impact health care providers' ability to send claims or receive payments?

I urge you to give this critical matter and inquiry your prompt attention. If you have any questions, please contact Eva DuGoff at eva_dugoff@finance.senate.gov.

Sincerely,

1200 Ron Wyden

United States Senator Chairman, Committee on Finance