

# UnitedHealthcare's latest contract dispute, this time with Trinity Health, leaves thousands out-of-network

Some members have not had in-network access to Trinity's hospitals or physicians since July 1

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Aug. 15, 2024

STAT News - Hospitals and Insurance Reporter

A widespread, monthslong contract dispute between UnitedHealthcare and Trinity Health has created a confusing patchwork of disrupted access across multiple states.

UnitedHealthcare is the country's largest health insurer, so its contract disagreements with large health systems affect members across the country from one another, threatening access to dozens of hospitals and their affiliated physicians. That's what has unfolded with Trinity, a nonprofit system headquartered in Michigan with 101 hospitals in 27 states. It's also true for the ongoing battle with HCA Healthcare, a chain of almost 190 hospitals. In the case of the former, thousands of patients have already lost in-network access.

UnitedHealth's battle with Trinity started in the spring, with the two giants duking it out in nine markets covering roughly 200,000 patients. They failed to reach a contract in three of those — California, Indiana, and Georgia — so UnitedHealth members there lost in-network access to Trinity for most of July before they finally agreed on terms. Contracts also lapsed on July 1 in another two markets covering Connecticut, Massachusetts, and New York, where roughly 60,000 UnitedHealth members are also Trinity patients.

"It's been challenging with UnitedHealthcare," said Stuart Kilpinen, Trinity's senior vice president of revenue strategies and operations.

"We've gotten most of [the contracts] done. We're going to get them all done, but it hasn't been easy and it hasn't been easy on our patients. A lot of that has to do with the confusion it created."

The markets that are currently out-of-network with UnitedHealth are Trinity Health of New England, a system of four acute-care hospitals in Connecticut and Massachusetts, and St. Peter's Health Partners, a four-hospital system in New York, as well as their affiliated doctors and surgery centers.

A combination of state mandates and company agreements are currently protecting in-network access to those hospitals and, in rarer cases, physician care for some patients until Sept. 1, although whether specific members are protected depends on their plan, location, and type of care. The grace periods cover certain commercial members, but only for hospital care, not physician services. In New York, Medicaid members have in-network access to both Trinity's hospitals and physicians until Sept. 1.

In both regions, UnitedHealth's Medicare Advantage members have not had in-network access to Trinity's hospitals or physicians since July 1. As is typically the case with disputes like this, it's hard to know from the outside who's to blame. The companies themselves offer conflicting statements.

Trinity's Kilpinen said the parties have made progress toward reaching a contract for Trinity Health of New England, but not for St. Peter's in New York.

"In New York, unfortunately, it just doesn't seem like United has the same sense of urgency as we do," Kilpinen said.



But Cole Manbeck, a spokesperson for UnitedHealth, said the disruption in New York could have been avoided altogether. He said UnitedHealth proposed an extension of the existing contract prior to its expiration on July 1, but Trinity refused. "We are committed to continued discussions

with St. Peter's and hope they work with us to reach an agreement that's affordable for consumers and employers," Manbeck said.

Kilpinen said keeping systems locked into an unfair agreement is a "regular stalling tactic of United's."

The biggest sticking point is money — Trinity wants higher reimbursement for its services, Kilpinen said. He said Trinity is asking for "fair payments," while Manbeck said Trinity is demanding commercial rate hikes in New York that "aren't affordable or sustainable for New Yorkers and employers."

Kilpinen said the dispute was prompted in part by Trinity's ability to see that UnitedHealth pays Trinity's competitors more. Health plans and hospitals are now required to publicly post their negotiated rates. Trinity isn't the only health system to cite the price transparency data when asking for more money. New York's Mount Sinai Health System did the same earlier this year.

Another sticking point is Trinity's demand that an independent third party have the final say after UnitedHealth denies coverage for services, Kilpinen said. Currently, appeals go back to UnitedHealth.

In May, the disagreement between UnitedHealth and Trinity was much broader. Not counting the two Northeast markets currently in dispute, it threatened access in seven other markets across the country. For the three markets that lost access in July, UnitedHealth offers continued coverage for some patients who need care for ongoing issues, like pregnancies, but Kilpinen said the application process is "cumbersome and confusing" and UnitedHealth is slow to respond to requests.

UnitedHealth is also embroiled in a major contract dispute with the country's biggest hospital chain, HCA, that threatens members' in-network access to 38 hospitals and their affiliated physician groups and surgery centers in four states: Texas, Colorado, South Carolina, and New Hampshire. Those contracts expire on Sept. 1.