

## Setting the Record Straight: UnitedHealthcare Negotiations

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For nearly a year, we worked in good faith to reach an agreement with UnitedHealthcare (UHC) that would preserve in-network access for our patients. Throughout this process, we made every effort to engage constructively and move negotiations forward. However, our efforts were met with delays, limited responsiveness, and proposals that do not reflect the realities of providing care in our region.

**As of April 29, 2026, ECU Health is out of network with UHC. For Medicaid patients, this applies to all ECU Health providers (except legacy ECU Physicians), hospitals, clinics and facilities. For Medicare Advantage and Commercial patients, changes are occurring in phases, beginning with ECU Health Physician Group providers and expanding to additional services over time.** This is not the outcome we worked toward.

Our goal has always been clear: to preserve patients' access to high-quality care close to home, while ensuring ECU Health can continue delivering sustainable care across eastern North Carolina. However, UHC's proposals, including significant payment reductions following years of inadequate reimbursement, would have undermined our ability to sustain services, particularly in rural communities.

At the same time, UHC has not demonstrated a meaningful commitment to continuity of care protections to help our most vulnerable patients continue treatment during this out-of-network period.

As of April 29, UnitedHealthcare has not updated their online member directories and provider partner portals, creating even more confusion for their members.

**Therefore, UHC members may see certain ECU Health providers and entities listed as 'in-network' when, in fact, they are now out-of-network with UHC.**

**Patients with UHC coverage are encouraged to contact UHC about continuity of care, securing approval for out-of-network coverage and obtaining post-termination authorization letters.**

We believe it is important to clarify several key facts.

### Setting the Record Straight

#### 1. ECU Health's proposal addresses years of inadequate reimbursement.

ECU Health's latest proposal reflected an effort to move toward fair and sustainable reimbursement after more than a decade of stagnant payment levels. ECU Health hospitals went seven years without a facility rate increase from UHC, and in most other years, increases were well below health care inflation. Providers across our system went six to nine years without reimbursement increases.

UHC has publicly described ECU Health’s proposal as a “near 60% increase.” That figure reflects adjustments phased in over several years to address more than a decade of stagnant reimbursement. If payments had kept pace with the cost of care over time, reimbursement levels today would be much closer to what ECU Health is seeking, which highlights how far UHC’s reimbursement fell behind.

Instead of addressing that gap, **UHC proposed payment reductions that would have resulted in lower reimbursement than any other insurer in our market.**

**2. ECU Health simply could not accept payment reductions that threatened access to care.**

ECU Health provides care to more than 1.4 million people across eastern North Carolina, including communities where ECU Health hospitals are the only providers of hospital-based care. As a rural safety-net health system, ECU Health must ensure reimbursement levels are sustainable so we can continue serving our communities.

Instead of addressing years of stagnant reimbursement, UHC was demanding double-digit payment reductions. Payment reductions of that magnitude would place additional pressure on a health system that already operates in one of the most challenging health care environments in the country.

**3. UnitedHealthcare is not prioritizing patient access.**

UHC has not yet demonstrated a meaningful commitment to continuity of care protections for patients undergoing treatment for serious or ongoing conditions.

In addition, their processes have created confusion for patients, including unclear communication about network status and inconsistent guidance related to coverage and prior authorization requirements.

For patients managing cancer, high-risk pregnancies or complex chronic conditions, even short disruptions in care can have serious consequences.

**4. This is about protecting access to care in eastern North Carolina.**

ECU Health serves a region where nearly 70% of patients are covered by Medicare or Medicaid and where many communities face significant health disparities. In this environment, commercial reimbursement plays a critical role in sustaining access to essential health care services.

Across the country, rural health systems are increasingly being forced to reduce services or close facilities due to financial pressures. **We cannot allow that to happen in eastern North Carolina.**

**5. ECU Health has worked to keep care affordable for our communities.**

For many years, ECU Health made a deliberate decision to limit aggressive price increases because we understand the financial pressures faced by families and employers in eastern North Carolina.

Those decisions helped limit cost increases for our communities. At the same time, insurance premiums have continued to rise, and those increases are not always reflected in payments to the providers actually delivering care.

Hospitals that work to keep care affordable should not be penalized for doing so.

**6. ECU Health is committed to investing in the health and well-being of our communities.**

ECU Health is a not-for-profit, mission-driven health system, and every dollar we receive is reinvested into patient care, our workforce, our facilities and community health initiatives across eastern North Carolina. Our shareholders are our community members.

At the same time, UnitedHealthcare is the largest health insurer in the country and part of UnitedHealth Group, a company generating more than \$100 billion in quarterly revenue and billions in profit.

**7. Health care decisions should remain between patients and providers.**

We believe health care is personal, and decisions about where and when patients receive care should be made between patients and their providers, not dictated by insurance processes.

**8. ECU Health is focused on supporting patients.**

Our priority is protecting access to care for the people of eastern North Carolina. We are focused on supporting patients through this transition and helping them understand their options and available resources.