

From: [Shegoia Orr](#)
To: [ATR-Public-Comments-Tunney-Act-MB](#)
Subject: [EXTERNAL] Tunney Act Public Comment Submission – UnitedHealth Group / Optum–Amedisys Merger
Date: Monday, October 13, 2025 2:54:27 PM
Attachments: [Employee Testimonials TunneyAct Submission.pdf](#)

Dear Judge McGuire and the Department of Justice Antitrust Division,

I am submitting the attached materials for consideration under the Tunney Act public interest review regarding the proposed UnitedHealth Group / Optum acquisition of Amedisys, Inc.

This document compiles anonymous employee and patient testimonials collected through The Truth Inbox an independent repository created to document the firsthand experiences of healthcare workers and patients affected by UnitedHealth Group, Optum, and Amedisys operations.

These accounts describe systemic patterns of fraud, Medicare and Medicaid billing manipulation, retaliation, upcoding, falsified documentation, and denial of medically necessary care. They include reports from nurses, intake coordinators, case managers, billing staff, and patients across multiple regions of the United States and internationally.

Summary of Themes:

- Pressure on employees to falsify documentation to increase Medicare reimbursement.
- Manipulation of internal “medical necessity” criteria to deny legitimate claims and reduce costs.
- Retaliation against staff who refused to engage in unethical practices or who raised compliance concerns.
- Alteration of patient records, intimidation of whistleblowers, and systemic disregard for patient safety.

These testimonials collectively raise serious concerns about whether this merger serves the public interest, as required under 15 U.S.C. §16(e). Allowing further consolidation of entities already exhibiting these patterns may endanger both the integrity of federal healthcare programs and the safety of millions of patients.

I respectfully ask that this submission be added to the official Tunney Act record and reviewed

as part of the Court's determination of public interest.

Thank you for your time and consideration.

Sincerely,

Sheqoia Orr

Anonymous Employee & Patient Testimonials

UnitedHealth Group / Optum / Amedisys

Tunney Act Public Comment Submission

This compilation provides anonymous employee and patient/family testimonials concerning conduct by UnitedHealth Group (UHG), Optum (including OptumRx and Optum Global Solutions), and Amedisys. The accounts describe patterns relevant to the Court's public-interest determination under the Tunney Act, including: fraud/upcoding, Medicare/Medicaid billing manipulation, denial/deferral of medically necessary care, retaliation against employees and whistleblowers, patient safety failures, and harassment/intimidation. All identifying details have been removed to protect contributors from retaliation.

Prepared by: The Truth Inbox (anonymous compilation)

Date: October 13, 2025

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EMPLOYEE TESTIMONIALS

Clinical Manager – Amedisys (2023–2025)

Worked as a RN Clinical Manager at a large-census care center. Repeated pressure to admit new patients despite no staff coverage. Visits reduced or delayed to create capacity for Starts of Care, compromising existing patients. Was trained to document that a physician approved a delayed Start of Care even when no contact occurred. Refused to falsify documentation and was placed on a PIP. Reports retaliation and normalization of falsification.

Back Office Supervisor – Amedisys Hospice (Maryland, 2024–2025)

Faced write-ups and a PIP after speaking up about office practices. Reports retaliation, extreme stress, and health impacts (weight loss, breakouts). Ultimately resigned due to hostile environment.

Call Center Employee – UnitedHealth Group (Medicare line)

Training cut dramatically; new hires leave within 30 days. Must use 5+ systems per call amidst frequent outages. Employees of color report disproportionate micromanagement. Reports daily HIPAA/privacy risks with third-party outsourcing. Severe burnout; company response limited to PTO/“meditation” tips.

Former Employee – Optum (culture concern)

Left Optum and immediately felt relief in new role. Reports pervasive cultural issues and supports whistleblowers.

Employee – Optum (work injury/leave)

After a work injury and leave of absence, reports discrimination, denial of compensation, and retaliation for leave.

Optum HouseCalls – Frontline Employee

Required to hit an unattainable ~17-minute call metric with elderly Medicare/Medicaid patients. Requests for patient resources labeled “out of scope.” Retaliation after raising concerns; FMLA process made punitive. Health deteriorated; resigned. Reports that metrics override patient well-being.

Customer Service Advocate – UHG Medicare & Retirement (Texas, 2022–2024)

Worked remotely in Medicare & Retirement. After speaking up in a team setting, reports targeted scrutiny, accusations of call avoidance, and termination while on medical leave related to stress/pregnancy. Describes constant monitoring and retaliation tied to metrics.

OptumRx Employee (2023–2025)

Reports phone harassment by suspected internal “fake members” to sabotage metrics/payouts. Describes surveillance intimidation (distinct SUV tailing), a co-worker sent to probe personal life, and HR inaction after a falsified caller incident. Felt bullied out of job; depression and trauma persisted after separation.

Optum Global Solutions – Cebu, Philippines (2025)

During an earthquake and strong aftershocks, evacuation guidance was delayed and unclear. Some staff were told to resume taking calls within ~1 hour. Subsequent days were marked “no work, no pay” and attendance deductions for those prioritizing family safety. Requests for temporary work from home were denied while citing confidentiality, despite other business units using WFH. Employees fear building safety amid continuing aftershocks.

Anonymous Coder – Optum (Current)

Reports a culture where bullying is encouraged and gaslighting is routine. Management errors are shifted onto non-managers. After episodes of mistreatment, staff receive tone-deaf morale emails (e.g., recipes). Mentions worsening depression and fear of retaliation; requires strict anonymity to protect employment.

Employee – Optum (Workload & Holidays)

Reports workload increases, vacation time reduced by four days, and federal holidays not recognized in practice, contributing to severe burnout and exhaustion across staff.

UnitedHealthcare / Health Plan of Nevada – Employee (approx. 7 years prior)

Top performer assigned to high-priority claims (“check status”). Reports racial microaggressions, hostile audits, and being held to higher standards than peers. Placed on PIP despite trainer confirming correct processing. Witnessed office-wide bullying and stigma; a colleague died by suicide at the parking garage, intensifying trauma. Tried counseling but experienced stigma; mental health deteriorated. Transferred to clinic; during early COVID, a conflict over safety led to resignation. Depression and isolation followed.

PATIENT & FAMILY TESTIMONIALS

Veteran Patient (Medicaid) – Multi■injury, denial & record manipulation

Former U.S. service member injured during overseas deployment. Initially misdiagnosed and denied care for >5 weeks. Subsequent imaging confirmed fractures and soft■tissue injuries (frozen shoulder, MCL tear, etc.). Upon return to U.S., terminated the same day despite Defense Base Act protections. With Medicaid administered by UnitedHealthcare and clinic acquired by Optum, reports falsified records, misdiagnoses contradicting imaging, and coordinated refusals of care. Received surprise billing tied to misinformation. After raising concerns, was effectively blacklisted from competent care. Ongoing inability to obtain proper treatment for ~5 years.

Family Advocate – Los Angeles Hospital (Traditional Medicare)

Parent with Traditional Medicare was assigned to an Optum hospitalist without consent. Despite weight loss, constipation, vomiting, pain, and spikes in BP and blood sugar, the MD refused updated CT imaging, relying on a 12■day■old scan, and offered only an enema. Advocate escalated to Director of Nursing; updated CT showed an intestinal blockage. Parent remained hospitalized ~4 months with complications (cardiac arrest, pneumonia, possible stroke). No explanation provided. Supporting video exists.

Post■Surgical Patient – UHC

After an 8.5■hour spinal/neuro surgery with complications, patient was placed in ER triage post■op without IV or meds. Experienced anaphylaxis; help took hours. Reports UHC involvement and requests strict anonymity.

Personal Injury Survivor – Healthcare Fraud Survivor

Non■fault auto accident followed by alleged alteration of medical records, hidden insurer payments, and denial of care at clinics linked to major insurers. Reports long■term financial and health harm; offers documents as proof.