



## Games Health Insurers Play: How Low Will They Go?

On April 13, 2021, five health insurance companies sent Governor Ned Lamont a letter, threatening to move “their” jobs from Connecticut to other states should the state enact a Public Option.

This report, by the Connecticut Citizen Action Group, is one in a series that looks at expenditures, tactics and reasons for these actions during the 2021 legislative session by those companies and other actors, which blocked the Public Option proposal. The public option proposal would allow the state comptroller to use their purchasing power to help lower costs for small businesses, no-profits, and Taft-Hartley plans.

In addition to the five insurance companies who signed the letter, this report discusses dark money organizations and trade groups who lobbied against the public option. Together, these groups reported spending \$1,339,487 in just the first six months of this year. The true amount of money spent is likely much higher.

We also found unaccounted for expenditures and activities that raise serious ethical and legal issues.

This report will look at:

1. Direct Lobbying Expenditures
2. Trade Groups Spending
3. Dirty Money Front Groups
4. Unaccounted for Expenditures

[CCAG's first report](#) explored CEO compensation at the five companies. Taken together, these tactics and expenditures show an industry willing and able to spend millions of dollars, to hide their expenditures and flout Connecticut laws and regulations to protect profits – all at the expense of Connecticut residents' health. We will continue to track this at the [Connecticut's Five Families Facebook page](#).

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### 1. Direct Lobbying Expenditures Reported

Lobbying expenses reported by each of the five companies that signed the letter are listed below, and are based on their filings with the Connecticut Office of State Ethics (OSE) for the six months ending June 30, 2021:

#### Insurance Companies Signing Letter

Lobbying Expenses Reported to OSE * for six months ending June 30, 2021	
Anthem	\$115,477
CIGNA	\$58,658
CVS Health (acquired Aetna in 2018)	\$86,193
Tufts/Harvard Pilgrim	\$10,500
UnitedHealth Group	\$67,478

The total reported spent by these five companies on direct lobbying was \$338,306 in the first six months of 2021. It should be noted that other health insurers spent in opposition to the proposed legislation, but we are focused on the five signatory companies. We also acknowledge they lobbied on some other issues, but the public option was their top priority by far.

### 2. Reported Trade Groups Spending

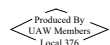
Lobbying Expenses Reported to OSE for six months ending June 30, 2021	
CT Association of Health Plans	\$301,161
American Health Insurance Plans	\$27,583
CT Business and Industry Association (CBIA) *	

\*CBIA worked against the Public Option, but it is not possible to determine the amount spent on this issue nor the amount of money insurers contributed or that CBIA dedicated from its sale of insurance from OSE filings. CBIA reported a total of \$642,071 lobbying for the six months ending June 30, 2021.

It is also important to note that more companies than just these five contribute to these groups and they lobby on other issues too. We are confident these companies are responsible for a disproportionate share of this and the public option was their top priority in Connecticut.

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### 3. Dark Money Front Groups that have been disclosed

According to Open Secrets “Dark money” refers to spending meant to influence political outcomes where the source of the money is not disclosed. The growth of spending in this area recently has been on issue advocacy and well-known examples include the Tea Party and the groups behind the January 6th effort to overturn the elections.

There were two groups that filed with the OSE that fit under this heading. While it is impossible to determine how much each of the companies spent unless they are forced to or voluntarily disclose, we are confident that these five companies represent a significant amount of the money behind this dirty money.

Lobbying Expenses Reported to OSE for six months ending June 30, 2021	
Partnership for America's Health Care Future Action (PAHCF Action) *	\$300,477
Affordable Health Care for Americans, aka “Stop the HIT” Coalition	\$274,500

\*Note: PACHF’s filing as of 8/29/21 showed \$300,477. Its initial filing for the first half of the year, on 7/13/21, showed \$398,621.

### 4. Unaccounted for expenditures: Misuse of Public Funds, Captive Audience Meetings and Secret Spending

CCAG has identified a number of unaccounted for expenditures that raise serious legal and ethics issues, while also pointing to the arrogance of the industry.

#### Senate Republicans used public resources to lobby against the Public Option.

In response to Freedom of Information Act requests by CCAG, Senate Republican Chief Legal Counsel, Jason Welch, produced documents showing several Senators used state resources to lobby against the Public Option, including sending unsolicited emails, containing lies about what was in the Public Option bill, and urging them to testify against it, to nearly 50,000 constituents, Those senators are Dan Champagne, Paul Formica, Tony Hwang, Rob Sampson, John Kissell, Eric Berthel, Kevin Kelly and Craig Miner.

The emails stated, incorrectly, that people would be forced into health care plans; that the bill contained a “one size fits all” program; and that taxpayers were being placed at risk. The emails also encouraged people to use a link to testify against a bill that didn’t exist under the guise of SB 842.

Welch’s response to the FOIA request also shows correspondence between Sen. Tony Hwang, the ranking member of the Insurance and Real Estate Committee, and CBIA, on working against the bill.

CCAG is not releasing the email addresses of individuals who received unsolicited emails. The Senate Republican emails can be found [here](#). CCAG’s FOIA request can be found [here](#).

## Coercing Employees to Lobby

CCAG found evidence of captive audience meetings where employees were coerced into engaging in grassroots lobbying that were not accounted for in any ethics filings.

According to a news report, UnitedHealth Group, the nation's largest insurer, held at least one webinar at which employees were pressured to mobilize against efforts to create a state-level public option. UnitedHealth Group held the webinar in February, during which executives claimed the public option would create an "unlevel playing field," [according to Jacobin](#). The webinar's slideshow included false claims about the public option.

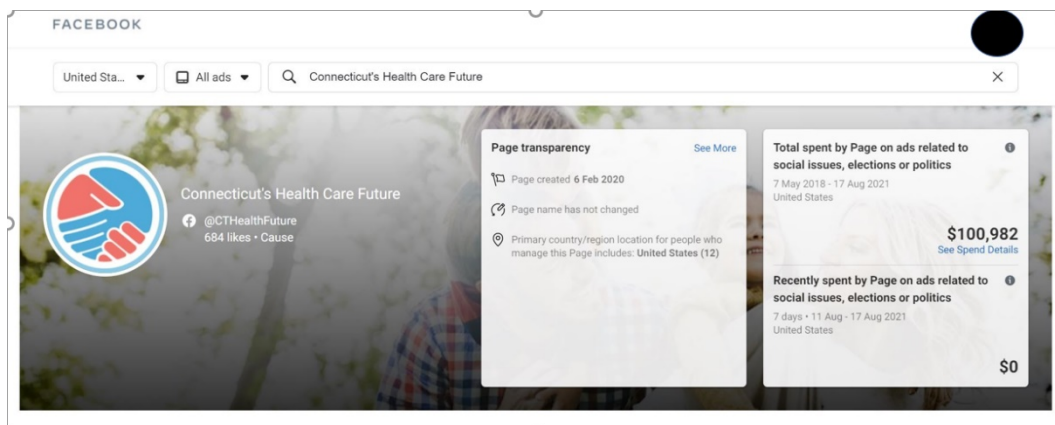
Additionally, among the emails produced in response to CCAG's, FOIA request were dozens of nearly identical messages opposing the public option from people identifying themselves as CIGNA employees or as UnitedHealth employees, giving rise to the likelihood that CIGNA and UnitedHealth Group also undertook similar activities that were not included as part of their lobbying report under the grassroots lobbying section of report. This should include staff time setting up these meetings, time people were paid to participate in captive audience meetings, and computer programming.

A small sampling of the "captive audience" emails sent by employees of CIGNA and UnitedHealth Group can be found [here](#).

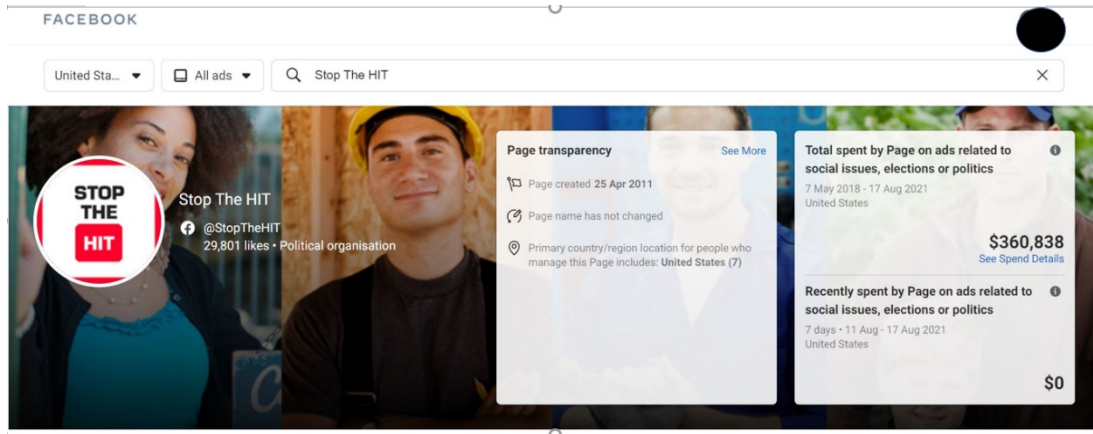
## Secret Spending: Unreported media buys

State Office of Ethics filings show no media expenditures for Partnership for America's Health Care Future action or from Affordable Health Care for Americans, aka "Stop the HIT" Coalition. Yet, opposition to the Public Option utilized a massive ad campaign with torrents of lies spread on social media and on news web sites. They are known to have taken out numerous social media ads.

- This Facebook ad report shows \$100,982 spent on Facebook alone by Connecticut's Health Care Future, a project of PAHCF. The group's twitter feed shows activity against the Public Option.



- This Facebook ad report shows \$360,838 on Facebook ads alone:



Additionally, there were many reports of advertising against the Public Option on YouTube and Connected TV, and on platforms and apps such as Hulu and Roku – that spending is not transparent and was not reported.

In addition, we continue to see ads by some of these groups attempting to justify proposed rate increases that are under review currently by the Connecticut Insurance Department, and misleading the public on proposed health care reforms in the Build Back Better proposals being considered at the national level.



In conclusion, CCAG is determined to follow up on this evidence of misconduct and to continue to shine light on the activities of these unscrupulous corporations.

Visit [www.ccag.net](http://www.ccag.net) and <https://www.facebook.com/CTsfivefamilies> for updates and more information on the role insurance companies' greed plays in limiting access to care and undermining public health.