SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2007-01-04** | Period of Report: **2007-01-03**
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ISSUER

UNITEDHEALTH GROUP INC CIK:**731766**| IRS No.: **411321939**	State of Incorp.:**MN**	Fiscal Year End: **1231** SIC: **6324** Hospital & medical service plans	Mailing Address *9900 BREN ROAD EAST* *MINNETONKA MN 55343*	Business Address *UNITEDHEALTH GROUP* *CENTER* *9900 BREN ROAD EAST* *MINNEAPOLIS MN 55343* *9529361300*

REPORTING OWNER

KEAN THOMAS H CIK:**1176475** Type: **4**	Act: **34**	File No.: **001-10864**	Film No.: **07511706**	Business Address *C/O CIT GROUP INC* *1 CIT DRIVE, #3251-9* *LIVINGSTON NJ 07039*

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * **KEAN THOMAS H** (Last) (First) (Middle) C/O UNITEDHEALTH GROUP INCORPORATED, 9900 BREN ROAD EAST (Street) MINNETONKA, MN 55343 (City) (State) (Zip)	2. Issuer Name **and** Ticker or Trading Symbol **UNITEDHEALTH GROUP INC** [UNH] 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2007 4. If Amendment, Date Original Filed(Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) __X__ Director _____ 10% Owner _____ Officer (give title below) _____ Other (specify below) 6. Individual or Joint/Group Filing (Check applicable line) __X__ Form Filed by One Reporting Person _____ Form Filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)	2A. Deemed Execution Date, if any (Month/ Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(*e.g.*, puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/ Day/Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/ Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non-Qualified Stock Option (right to buy)	$52.57	01/03/2007		A		5,000		01/03/2007	01/03/2017	Common Stock	5,000	$ 0	5,000	D	

Signatures

By: Dannette L.Smith For: Thomas Kean   01/04/2007

** Signature of Reporting Person   Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, *see* Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.