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8	UNITED STA	TES DISTRICT COURT
9	FOR THE CENTRAL DISTRICT OF CALIFORNIA	
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11	PATRICK A. ANDERSON,) CASE NO. SACV 07-0965 AG (MLGx)
		$) \qquad \qquad$
12	Plaintiff,) ORDER AFFIRMING
13	v.) ADMINISTRATOR'S DENIAL OF) LONG TERM DISABILITY
14	UNITED HEALTH GROUP; PACIFICARE HEALTH SYSTEMS,	BENEFITS
15	INC.; UNITED HEALTH GROUP)
16	BENEFITS REVIEW COMMITTEE, and Does 1-50, inclusive,	
17	Defendants.	
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INTRODUCTION

Plaintiff Patrick Anderson ("Plaintiff") was an employee of PacifiCare Health Systems, Inc. ("PacifiCare"), when PacifiCare was acquired by United Health Group in December 2005. Plaintiff claims that, after the merger, his job duties changed substantially, and he quit. He then claims that, after quitting, he should have received 52 weeks of severance benefits, but the United Health Group Benefits Review Committee ("Review Committee") denied his claim. He appealed that denial and lost. He then filed this action under the Employee Retirement Income Security Act of 1974 ("ERISA"), 29 U.S.C. section 1001, et seq., for his severance benefits. The 1

Court hereby AFFIRMS the Review Committee's decision to deny benefits to Plaintiff.

FINDINGS OF FACT

The Court makes these findings of fact, including any findings of fact found in the Conclusions of Law.

7 Plaintiff was an employee eligible for PacifiCare's Severance Plan ("the Plan"). The Plan entitled him to severance benefits if PacifiCare consummated a merger with another company 8 9 and if Plaintiff then voluntarily quit his position for "good cause." According to the Plan: 10 'Good cause' shall be deemed to exist if an Employee voluntarily terminates his employment with an Employer for any of the following reasons: 11 Without Employee's express prior written consent, Employee: 12 a. **(I)** is assigned duties materially inconsistent with 13 Employee's position, duties, responsibilities, or status 14 15 with an Employer which substantially varies from that which existed immediately prior to the Change of 16 Control. 17

(Plan, p.6.) 18

In December 2005, PacifiCare merged with United Health Group. On June 8, 2006, 19 20 Plaintiff quit. He submitted a claim for severance benefits to United Health Group's Benefit 21 Review Committee ("Review Committee"), arguing that his duties and responsibilities post-22 merger were materially inconsistent with his pre-merger duties and responsibilities.

23 The Review Committee was made up of five employees of United Health Group. They received and investigated plaintiff's claim, interviewed witnesses, solicited information from 24 25 Plaintiff, deliberated about the evidence before them, and determined that there was not "good cause" for Plaintiff's resignation under the Plan. Documents in the Administrative Record show 26 27 that there was reasonable basis for that determination. (See Administrative Record at Tab 5, D0062-0066, D0131-0132, Tab 7, D0426.) The Review Committee denied Plaintiff's claim. 28

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1 Plaintiff appealed the denial to the Review Committee, which denied the appeal.

CONCLUSIONS OF LAW

The Court makes these conclusions of law, including any conclusions of law found in the Findings of Fact.

1. THE REVIEW COMMITTEE'S DENIAL OF BENEFITS IS REVIEWED FOR ABUSE OF DISCRETION

This case requires examination of the standard of review to be applied to the Review 11 Committee's denial of Plaintiff's claim for benefits. The review of a plan administrator's denial 12 of benefits is *de novo* "unless the benefit plan gives the administrator or fiduciary discretionary 13 authority to determine eligibility for benefits." Saffon v. Wells Fargo & Co. Long Term 14 15 Disability Plan, No. 05-56824, 2008 U.S. App. LEXIS 334, 2008 WL 80704, at *2 (9th Cir. 2008) (quoting Firestone Tire & Rubber Co. v. Bruch, 489 U.S. 101 (1989)). Where the plan 16 17 grants such discretionary authority, the administrator's decision is reviewed for abuse of discretion, unless the administrator so "utterly fails to follow applicable procedures" that "the 18 19 administrator is not, in fact, exercising discretionary powers." See id.; Abatie v. Alta Health & 20 Life Ins. Co., 458 F.3d 955, 962 (9th Cir. 2006). If the administrator utterly fails to follow the procedures applicable to the discretionary analysis, the standard of review reverts to *de novo*. *Id*. 21

The parties agree that the Plan in this case gave the Review Committee discretionary authority, which would generally merit an abuse of discretion standard of review. But Plaintiff argues that the Review Committee so utterly failed to follow applicable review procedures that the Court should review its decision *de novo*. The Court disagrees. "[A]n administrator's failure to comply with . . . procedural requirements ordinarily does not alter the standard of review." *Abatie*, 458 F.3d at 971. Only when "an administrator engages in wholesale and flagrant violations of the procedural requirements of ERISA" should a court review a discretionary decision *de novo. Id.* Plaintiff's allegations of procedural irregularities do not amount to
 "wholesale and flagrant violations." Accordingly, the Court reviews the Review Committee's
 denial of benefits for abuse of discretion.

4 An ERISA plan administrator's decision to deny benefits is an abuse of discretion "only if 5 it (1) renders a decision without explanation, (2) construes provisions of the plan in a way that conflicts with the plain language of the plan, or (3) relies on clearly erroneous findings of fact." 6 7 Boyd v. Bell, 410 F.3d 1173, 1178 (9th Cir. 2005); see also Taft v. Equitable Life Assurance, 9 F.3d 1469, 1473 (9th Cir. 1994). Under the abuse of discretion standard, "even decisions 8 contrary to evidence in the record do not necessarily amount to an abuse of discretion," so long 9 as there is some reasonable basis for the decision. See Taft, 9 F.3d at 1473; see also Horan v. 10 Kaiser Steel Retirement Plan, 947 F.2d 1412, 1417 (9th Cir. 1991). 11

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2. THE ABUSE OF DISCRETION STANDARD IS NOT TEMPERED BY THE EXISTENCE OF A CONFLICT OF INTEREST

The abuse of discretion standard does not end the Court's inquiry regarding the appropriate standard of review. In ERISA benefits cases, the precise nature of the abuse of discretion standard varies depending on the existence and extent of a conflict of interest. *See Abatie*, 458 F.3d 955, 963 (9th Cir. 2006) (en banc) (holding that a court's abuse of discretion review should be "informed by the nature, extent, and effect on the decision-making process of any conflict of interest that may appear in the record.")

The most common conflict of interest situation in an ERISA case is where "an insurer acts as both the plan administrator and the funding source for benefits." *Id.* at 965. This is known as a "structural conflict of interest." *Id.* at 965-66 (noting that in such a situation the administrator's responsibility to see that those deserving benefits receive them is in inherent conflict with the desire to maximize profits by paying as little in benefits as possible). A structural conflict of interest, "even if merely formal and unaccompanied by indicia of bad faith or self-dealing, ought to have some effect on judicial review." *Id.* at 966. A structural conflict

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of interest should have even more effect on judicial review when accompanied by evidence of
the plan administrator's bad faith. As explained by *Abatie*:

The level of skepticism with which a court views a conflicted administrator's 3 decision may be low if a structural conflict of interest is unaccompanied, for 4 5 example, by any evidence of malice, of self-dealing, or of a parsimonious claims-granting history. A court may weigh a conflict more heavily if, for 6 7 example, the administrator provides inconsistent reasons for denial, fails adequately to investigate a claim or ask the plaintiff for necessary evidence, 8 9 fails to credit a claimant's reliable evidence, or has repeatedly denied benefits to deserving participants by interpreting plan terms incorrectly or by making 10 decisions against the weight of evidence in the record. 11

12 *Id.* at 968-69 (citations omitted).

The parties agree that a structural conflict of interest existed in this case, because
"the members of the Committee were employed by the company that would necessarily
fund any benefit award." (Defendant's Proposed Findings of Fact and Conclusions of
Law ¶ 23.) The parties disagree, however, over whether there was any additional
evidence of the Benefit Committee's bad faith.

Plaintiff argues that the Review Committee's bad faith is evidenced by (1) an
interviewer's failure to record and submit allegedly pro-Plaintiff statements made by Fritz
Wilhelm; (2) the Review Committee's failure to conduct an additional investigation when
it "was informed that three witnesses stated that the record was incomplete and
contradictory as to its facts," (Plaintiff's Trial Brief 9:15-18); and (3) the fact that large
portions of the record were redacted. The Court will address these arguments in turn.

Plaintiff has submitted a declaration by Fritz Wilhelm, which states that he was
interviewed regarding his work relationship with Plaintiff, and that the interviewer's notes
have been provided to him in connection with this litigation. (Wilhelm Declaration ¶¶ 23.) Mr. Wilhelm states that the notes "do not include a great deal of what was discussed
during that interview." (*Id.* ¶ 3.) The topics he mentions that were discussed but not

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recorded in the interviewer's notes were topics that would have been helpful to Plaintiff's
claim. (*See id.* ¶¶ 4-6.) Mr. Wilhelm further states that the interviewer seemed interested
only in topics that would have been detrimental to Plaintiff's claim. (*See id.* ¶ 6 ("Mr.
Sanchez, however, seemed to be more interested in reaffirming his point that work still
existed, but not necessarily the specific context of the work.").) Lastly, Mr. Wilhelm
states that the interviewer concluded the interview by saying, "Thank you I've got what I
needed." (*Id.* ¶ 7.)

8 Included in the Administrative Record is a document that Defendant identifies as 9 the notes Danny Sanchez took when he interviewed Mr. Wilhelm. The document is handwritten, and not lengthy. But the notes on the document indicate that Mr. Sanchez 10 asked Mr. Wilhelm about Plaintiff's duties, recorded quotes attributable to Mr. Wilhelm, 11 12 and, significantly, wrote down a quote from Mr. Wilhelm that would be supportive of 13 Plaintiff's case. This shows that Mr. Sanchez's interview was not unbalanced. Further, Defendant argues that Mr. Wilhelm was Plaintiff's employee, and had only started work 14 15 with the company a few months before the merger occurred. The Court finds it more 16 likely that Mr. Wilhelm's lack of knowledge, not Mr. Sanchez's bias, accounted for the 17 brevity of Mr. Sanchez's notes. The Court finds that Mr. Wilhelm's declaration is not evidence of the Review Committee's bad faith. 18

19 Second, Plaintiff argues that, in his notice of appeal, he notified the Review Board 20 of three witnesses who stated that the record was incomplete, but that the Review Board 21 did not conduct any additional investigation. (Plaintiff's Opening Brief 9:15018.) Plaintiff does not describe who the "three witnesses" are and the Court sees only two such 22 witnesses referenced in the notice of appeal. Those witnesses are Mr. Wilhelm and Jake 23 24 Oner. But Mr. Wilhelm's statements, as discussed above, do not show bad faith or that 25 additional investigation needed to be taken. And the section in the notice of appeal 26 discussing Mr. Oner does not say that he thought the record was incomplete. Instead, it 27 appears to merely repeat his earlier statements. Thus, this argument does not show the Review Committee's bad faith. 28

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Finally, Plaintiff argues that large portions of the Administrative Record have been
 redacted, and that proves the Review Committee's sinister motives. Defendant responds
 that those portions were redacted because they related to other claimants. The Court finds
 this credible. Accordingly, the redactions are not evidence of the Review Committee's
 bad faith.

Because Plaintiff has not presented evidence that the Review Committee's conflict
of interest went beyond the "structural" conflict, the Court brings a low level of
skepticism to its application of the abuse of discretion standard. *See Abatie*, 458 F.3d at
968.

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THE REVIEW COMMITTEE DID NOT ABUSE ITS DISCRETION IN DENYING SEVERANCE BENEFITS

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After reviewing the evidence in the Administrative Record, the Court finds that the
Review Committee did not abuse its discretion in denying Plaintiff severance benefits.
The evidence shows that the Review Committee provided a detailed explanation in
writing for its decision, did not construe provisions of the plan in a way that conflicted
with the plain language of the plan, and based its decision on substantial evidence in the
Administrative Record.

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Accordingly, the Review Committee's denial of severance benefits is AFFIRMED.

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22 **DISPOSITION**

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Defense counsel is directed to prepare the judgment and serve it on Plaintiff by October 17, 2008. Plaintiff shall have 14 days from the date of service of the proposed judgment to object to the proposed judgment. If no objection is received within 14 days, the judgment will be entered immediately, and Federal Rule of Civil Procedure 52(b) will
 apply on entry of the judgment.

4 IT IS SO ORDERED.

5 DATED: September 30, 2008

Cendus (

Andrew J. Guilford United States District Judge