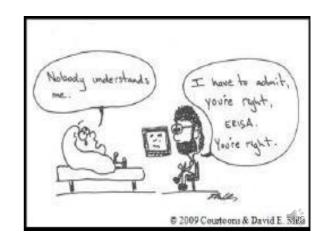
Health Law: Quality & Liability

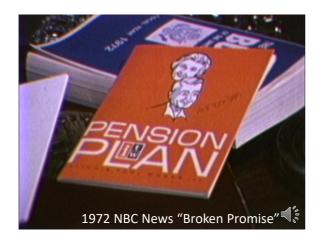
Prof. Thaddeus Pope

ERISA Preemption









Sept. 2, 1974









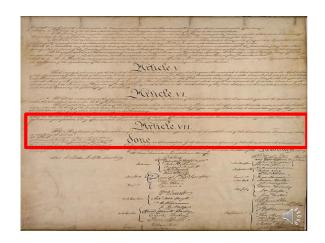
Combat fraud - guarantee beneficiaries benefits they were **promised** by employers

Uniform regulation - encourage national employers to provide employee benefits

Purpose 1 -- ensure that workers get promised benefits

Purpose 2 -- preemption, so interstate employers not have varying administration rules





This Constitution, and the Laws of the United States . . . shall be the supreme Law of the Land;

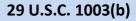
and the judges in every State shall be **bound** thereby,

anything in the Constitution or Laws of any State to the Contrary **notwithstanding**.

ERISA Preemption Who it affects

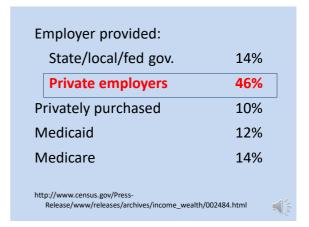
29 U.S.C. 1003(a)

[T]his subchapter shall apply to any employee benefit plan if it is established or maintained—(1) by any employer engaged in commerce . . .



[T]his subchapter shall **not** apply to any employee benefit plan if—

- (1) plan is a governmental plan [Medicare] . .
- (2) plan is a church plan . . .



Public insurance (Medicare, Medicaid, Tricare, VHA...)

Private insurance
Individual

Employer-provided

Not just health insurance

Any plan, fund, program that provides medical, disability, death, unemployment, vacation, and other benefits

ERISA Preemption Consequences

Deregulatory – bumps out the state law controls & remedies

Makes federal remedies in ERISA exclusive

"Virtually all state law remedies are preempted but very few federal substitutes are provided" (Ginsburg, J.)

In 1974, coverage denial affected only payment not treatment

1974

Treat first Pay later

2017

Pay first Treat later



No coverage

- = no treatment
- = injury
- = no PI damages

Only value of the insurance benefit denied, not tort damages

EXAMPLE

Wickline gets value of 4 hospital days

Not damages for a lost leg

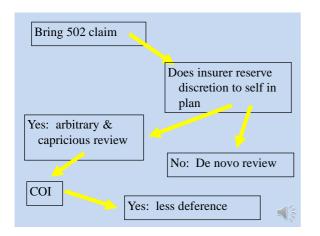


All I want for Christmas is compensation for my health plan's denial of benefits.



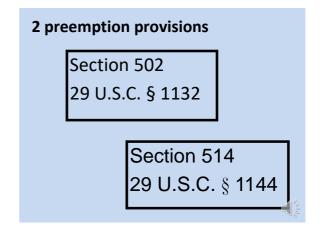
ERISA Claims (on the merits)





502 Standard	What it means	When applicable
De novo	Court interprets language itself	Default since contract interpretation is matter of law
Arbitrary and capricious	If rational basis, affirm plan interpretation Common - most will give discretion	If plan reserves discretion to itself
Arbitrary and Capricious (less deference)	Variable standard – not total deference	When claim adjudicator has COI





ERISA Preemption 502

ERISA civil enforcement mechanism

Employee remedies

"A civil action may be brought .
.. to recover benefits due to
him under the terms of his
plan, to enforce his rights
under the terms of the plan, or
to clarify his rights to future
benefits under the terms of
the plan"

Implied preemption

Statutory language says nothing about preemption (only about remedies)



Contractual: recover plan benefits owed

Injunctive: enforce plan benefits

Declaratory: clarify future rights

under plan



Remedy = value of insurance benefit denied



Compensatory damages (lost wages, medical expenses, pain & suffering)

Punitive damages

No jury trial

502 remedies are **exclusive**

If you can use 502, you may use only 502

If the gravamen of your Complaint concerns denial of benefits, then you must proceed under 502



Civil procedure illustrates the scope of preemption

28 U.S.C. 1441(a)

"[A]ny civil action brought in a State court of which the district courts of the United States have original jurisdiction, may be removed by the defendant . . . to the district court . . . where such action is pending.



Preempted

Negligent UR

Not preempted

Vicarious liability for negligent treatment

Negligent selection & retention

Preempted

Coverage

Quantity of benefits

Eligibility

Administrative

NOT Preempted

Treatment

Medical appropriateness

Quality of care

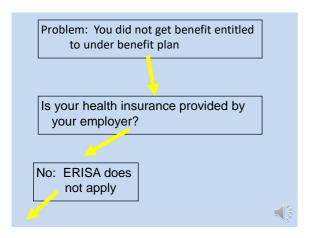
502 Flowchart

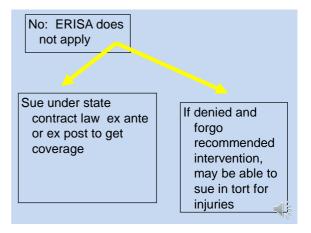
Who harmed you?

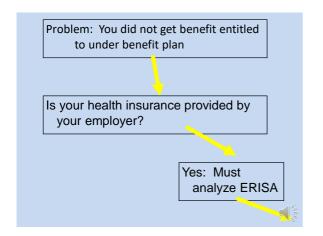
Your doctor (e.g. informed consent, malpractice) Not re 502

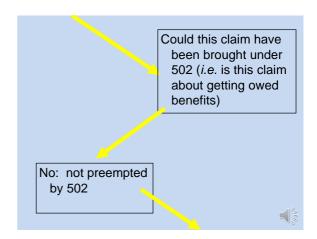
Claims administrator

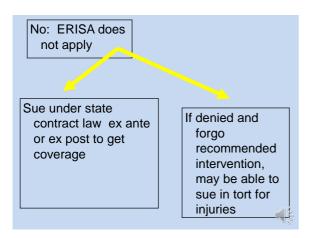
Re 502

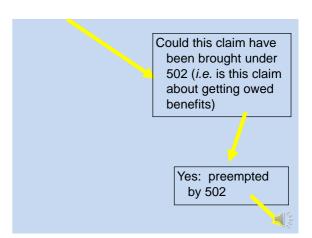


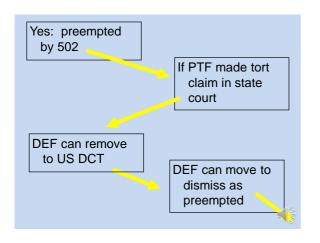


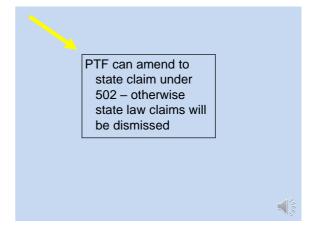


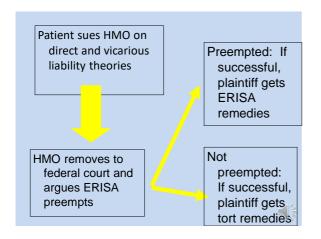












Could this claim have been brought under 502 (i.e. is this claim about getting owed benefits)

Aetna v. Davila

Davila

Aetna denies coverage for Vioxx D takes covered cheaper alternative Side effect intestinal bleeding

Calad

Cigna denies coverage for extended hospital stay

Post-surgery complications



Injured patients (e.g. Davila, Calad) do not want preemption

Contractual damages (benefits owed under plan)

No compensatory damages

No punitive damages

No jury trial

5th Cir. – not preempted

These are tort claims

They are not duplicative of 502
remedies

Why does SCOTUS reverse



	X Aetna [*]	CIGNA A Business of Cong.
MCO conduct		
Result MCO conduct		13

Sarkisyan v. CIGNA





ERISA Preemption 514

Section 514

Express / conflict preemption

Primarily affects regulatory measures (but tort too)



514(a) - Preemption

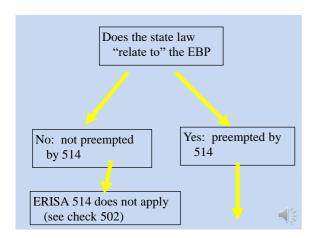
"Except as provided in subsection (b) of this section, the provisions of [ERISA] shall supersede any and all State laws insofar as they may now or hereafter **relate to** any employee benefit plan . . ."

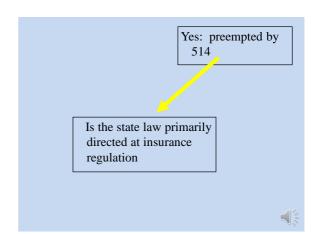
Section 502

- 29 U.S.C. § 1132
- Implied/complete preemption
- Federal jurisdiction
- Primarily affects tort & contract actions

Section 514

- 29 U.S.C. § 1144
- Express/conflict preemption
- Primarily affects regulatory measures





514(b)(2)(A) - Savings Clause

"Except as provided in subparagraph (B), nothing in this subchapter shall be construed to exempt or relieve any person from any law of any State which regulates insurance . . ."

