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UNITED STATES DISTRICT COURT EASTERN DISTRICT OF CALIFORNIA

Trial Date:

Plaintiff, Case No.:

Action Filed:

METROPOLITAN LIFE INSURANCE COMPANY; and DOES 1 through 10, inclusive,

Defendants.

COMPLAINT FOR BREACH OF FIDUCIARY DUTY UNDER ERISA, FOR EQUITABLE RELIEF, INCLUDING DECLARATORY RELIEF AND INJUNCTIVE RELIEF; ATTORNEYS' FEES AND COSTS

[Filed Concurrently With:Civil Case Cover Sheet]



JURISDICTION AND VENUE

- 1. Plaintiff Roxanne Hazel ("Plaintiff") brings this action to enjoin unlawful conduct by a plan fiduciary pursuant to Sections 502(a)(3)(A) and 502(a)(3)(B) of the Employee Retirement Income Security Act of 1974 ("ERISA"), 29 U.S.C. Sections 1132(a)(3)(A) and (a)(3)(B). This Court has subject-matter jurisdiction over Plaintiff's claim pursuant to ERISA Section 502(e) and (f), 29 U.S.C. Section 1132(e) and (f), and 28 U.S.C. Section 1331.
- 2. Venue lies in the Eastern District of California, pursuant to 28 U.S.C. Section 1391, because Plaintiff resides in the Eastern District, and because Defendant, Metropolitan Life Insurance Company, a New York Corporation ("MetLife"), does business in this District as a licensed insurance company.

THE PARTIES

- 3. Plaintiff is an individual who, at all times relevant to this action, was a participant, as defined by ERISA Section 3(7), 29 U.S.C. Section 1002(7), in the employee welfare benefit plan (the "Plan" or "Policy") established by her employer, Crawford & Company ("Crawford"). Plaintiff's rights under the Plan are at issue in this action.
- 4. MetLife is a life insurance company that insures and administers the short-term disability Plan, including claims decisions and payment of disability benefits to Plan participants such as Plaintiff. MetLife insures the Plan under a group disability policy issued to Crawford ("Group Disability Policy").
- 5. The true names and capacities, whether individual, corporate, associate or otherwise, of the defendants named herein as DOES 1 through 10, inclusive, are unknown to Plaintiff at this time, who therefore sues DOES 1 through 10 by fictitious names and will ask leave of the Court to amend this Complaint to show the true names and capacities of DOES 1 through 10 when



the same are ascertained; DOES 1 through 10 are sued as principals and/or agents, servants, attorneys, or employees of said principals, and all of the acts performed by them were within the course and scope of their authority and employment. Plaintiff is informed and believes and thereupon alleges that each of DOES 1 through 10 is legally responsible in some manner for the events referred to herein, and directly and proximately caused the damages and injuries to Plaintiff as alleged below.

FACTUAL BACKGROUND

MetLife's Unlawful Claim for Reimbursement and Collection Threat

- 6. Plaintiff became disabled and was approved for short-term disability ("STD") benefits under the Plan in 2022. MetLife paid her STD benefits each month from May 2022 through October 2022. As a result of MetLife's termination of her STD benefits, Plaintiff will not be receiving any additional STD benefits in the future.
- 7. From May 6, 2022 through October 20, 2022, Plaintiff was paid California State Disability ("State Disability") benefits in the amount of \$1,263.00 per week. MetLife contends that these State Disability payments resulted in overpayment of STD benefits from May 6, 2022 through July 10, 2022, totaling \$8,849.76. MetLife contends that it has a legal right to seek reimbursement of such alleged overpayments from Plaintiff under "the Plan or applicable law." While MetLife fails to cite the specific provision allegedly allowing it to pursue collection remedies against Plaintiff, it appears that the relevant provision in the Group Disability Policy is entitled "How We Recover Overpayments," which provides as follows:

We may recover the overpayment from You by:



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•	stopping or reducing any future Disability benefits, including the
	Minimum Benefit, payable to You or any other payee under the
	Disability sections of this certificate;

- demanding an immediate refund of the overpayment from You; and
- taking legal action.
- 8. MetLife never invoked this provision of the Group Disability Policy and has therefore waived enforcement of it. Months after the termination of Plaintiff's STD benefits, MetLife sent two letters to Plaintiff informing her of the alleged \$8,849.76 overpayment and representing that she allegedly owes a duty to repay that amount to MetLife.
- 9. MetLife's first letter to Plaintiff demanding reimbursement of alleged overpayments was dated January 9, 2023. In that letter, MetLife stated: Benefits paid to you from May 6, 2022 through July 10, 2022, were not reduced by the amount of other income listed above [State Disability]. This has resulted in an overpayment on your claim in the gross amount of \$9,582.86. The current net balance due to MetLife is \$8,849.76.

The January 9, 2023 letter informed Plaintiff that she was required to reimburse MetLife for the alleged overpayments and enclosed a request for a check or money order to enable MetLife to take payment of the overpayment out of Plaintiff's personal bank account. MetLife was seeking reimbursement for the alleged overpayments from Plaintiff's general funds in her personal bank account.

- MetLife immediately engaged a collection agency, Brown & 10. Joseph LLC, to collect the alleged overpayments from Plaintiff.
- 11. On January 13, 2023, just four days after MetLife mailed the first letter demanding reimbursement, Brown & Joseph LLC sent Plaintiff a threatening collection notice on behalf of MetLife, warning her that she only



had until February 24, 2023 to dispute the debt, or she would face further collection action. The January 13, 2023 letter requested that Plaintiff make a "check payable to METLIFE DISABILITY OFFSET," and was clearly seeking reimbursement from Plaintiff's general funds in her personal bank account.

- 12. As a result of MetLife's threats and collection action against Plaintiff regarding the alleged overpayment, Plaintiff was reasonably forced to retain McKennon Law Group PC ("McKennon Law Group") as his attorneys to respond to this alleged debt.
- 13. As of the time of filing of this action, MetLife still had not disavowed its claimed right of reimbursement, and still had not agreed to stop its collection threats and efforts against Plaintiff.
- 14. Plaintiff disputes that any overpayments of STD benefits were made to her. In any event, Plaintiff no longer has control or possession of any of those STD benefit payments, or any of the State Disability payments, as they have all been spent. And when Plaintiff still had the STD benefits and State Disability payments, they were co-mingled with her other funds in her bank account.
- 15. For the reasons discussed below, ERISA bars MetLife from seeking or obtaining reimbursement of \$8,849.76, or any other amount by Plaintiff. Nonetheless, Plaintiff alleges on information and belief that in the absence of injunctive relief or other appropriate equitable relief from this court, MetLife will continue to seek to collect reimbursement of this amount from Plaintiff, including subjecting her to unlawful and threatening communications from MetLife's collection agency.

FIRST CLAIM FOR RELIEF

For Equitable Relief to Enjoin Acts Contrary to Law, for Declaratory

Relief, for Breach of Fiduciary Duty, and for Attorneys' Fees

29 U.S.C. Sections 1132(a)(3)(A), (a)(3)(B), (g)(1)



(Plaintiff against MetLife and Does 1 through 10)

- 16. Plaintiff incorporates the previous paragraphs as though fully set forth herein.
- 17. ERISA Sections 502(a)(3)(A) and 502(a)(3)(B), 29 U.S.C. Sections 1132(a)(3)(A) and 1132(a)(3)(B), permit a plan participant like Plaintiff to bring a civil action to obtain "other appropriate equitable relief," including to enjoin any act or practice which violates any provision of this subchapter, to enforce the terms of the plan, for declaratory relief or to obtain other appropriate equitable relief to redress such violations. *Bilyeu v. Morgan Stanley Long Term Disability Plan*, 683 F.3d 1083 (9th Cir. 2012); *Wong v. Aetna Life Ins. Co.*, 51 F.Supp.3d 951 (S.D. Cal. 2014) (relying upon *Bilyeu*).
- 18. The Plan under which Plaintiff received benefits was an employee welfare plan governed by ERISA. Among the subjects governed by ERISA is the extent of an insurer's right to seek reimbursement for overpayment of benefits from an employee participant. *Bilyeu, supra*; *Wong v. Aetna Life Ins. Co., supra*.
- 19. Pursuant to 29 USC Section 1132(a)(3), a civil action may be brought by a participant, beneficiary, or fiduciary (A) to enjoin any act or practice which violates any provision of this subchapter or the terms of the plan, or (B) to obtain other appropriate equitable relief (i) to redress such violations or (ii) to enforce any provisions of this subchapter or the terms of the plan. *Id*.
- 20. In *Bilyeu*, the Ninth Circuit explained that, under ERISA, an insurer can only obtain reimbursement of an overpayment of plan benefits if the insurer proves three elements: "First, there must be a promise by the beneficiary to reimburse the fiduciary for benefits paid under the plan in the event of a recovery from a third party. Second, the reimbursement agreement



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must 'specifically identify a particular fund, distinct from the [beneficiary's] general assets,' from which the fiduciary will be reimbursed. [Citation omitted.] Third, the funds specifically identified by the fiduciary must be "within the possession and control of the [beneficiary]." Bilyeu, supra, 683 F.3d at 1092-1093; Wong, supra, 51 F.Supp.3d at 968-969. In Bilyeu, as here, the insurer sought reimbursement of overpaid long-term disability benefits resulting from SSDI benefits received by the insured. The Court held that the insurer failed the first part of the test, because the Social Security Act prohibits an insured from assigning SSDI benefits and prohibits an insurer from attaching social security benefits. See 42 U.S.C. § 407(a). *Id.* In *Bilyeu*, the insurer also failed the third part of the test, as it failed to prove that the SSDI benefits that caused the overpayments were still in the insured's possession and control and had not been commingled with the insured's general funds. *Id*.

- Even if an insurer has an alleged contractual reimbursement provision like MetLife is asserting, an equitable lien is the only claim for relief an ERISA insurer may assert to recoup such an overpayment of disability benefits to its insured. The equitable lien may only be placed on the specific fund agreed upon in the insurer's reimbursement agreement with its insured. *Id.* In this action, MetLife cannot even meet the first and second prongs of the test in *Bilyeu* and *Wong*, since MetLife did not require Plaintiff to sign a reimbursement agreement as contemplated by the policy, thus waiving any contractual promise by Plaintiff to reimburse alleged overpayments (first prong), and a contractual right for MetLife to seek reimbursement (second prong).
- Even assuming, arguendo, that MetLife can prove that the Group Disability Policy provides a basis for MetLife to satisfy the first and second prongs – for instance, by producing a reimbursement agreement signed by Plaintiff – MetLife will still be unable to satisfy the third prong of the test.



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STD benefits previously paid to Plaintiff are the only possible fund identified in the alleged MetLife reimbursement clause, because it is undisputed that Plaintiff will not be receiving any STD benefits in the future. But the past STD benefits paid to Plaintiff by MetLife do not satisfy the third prong of the test, because all of those benefit payments have already been spent by Plaintiff or commingled with her other funds. Since MetLife cannot meet the third prong of the test, it is not entitled to seek recovery of the alleged overpayments based on an equitable lien (even if it can prove the first and second prongs, which is also questionable).

- 23. Under ERISA, illegally pursuing efforts to collect this overpayment debt is a breach of MetLife's fiduciary duties, pursuant to ERISA Section 1132(a)(3)(B). *Bilyeu*, *supra*, 683 F.3d at 1091.
- 24. MetLife's past and expected future efforts to coerce Plaintiff into paying the \$8,849.76 allegedly overpaid violate MetLife's fiduciary duties owed under ERISA in two ways. MetLife is seeking to coerce Plaintiff into paying reimbursement from her general funds, in violation of ERISA. In this regard, MetLife has represented to Plaintiff that its Group Disability Policy purportedly gives MetLife a legal right to recover such overpayments from Plaintiff. Such a provision in MetLife's Group Disability Policy is unlawful and unenforceable under ERISA, since it would grant MetLife a right to seek reimbursement from Plaintiff's funds other than the STD benefit payments to Plaintiff that allegedly contained overpayments.
- ERISA preempts any state law claims MetLife could otherwise pursue, including a breach of contract or similar claim against Plaintiff. Bui v. American Telephone & Telegraph Co. Inc. (9th Cir. 2002) 310 F.3d 1143, 1152 ("ERISA preempts Bui's contract claims. These claims do not merely reference the ERISA plan, they require its construction because the contract allegedly



breached is the ERISA plan itself. Accordingly, ERISA preempts the contract claims.")

- 26. ERISA also bars MetLife from using any state law collection remedy to enforce its alleged reimbursement right, and the absence of any other legal remedy is insufficient to overcome ERISA preemption. *See Bast v. Prudential Ins. Co. of America* (9th Cir. 1998) 150 F.3d 1003, 1010, as amended (Aug. 3, 1998) ("ERISA preempts state law claims, even if the result is that a claimant, relegated to asserting a claim only under ERISA, is left without a remedy. The focus is on ERISA. If it does not provide a remedy, none exists.")
- 27. A controversy now exists between the parties regarding whether MetLife has a right to pursue any legal action or collection effort to recover the alleged overpayment of past disability benefits from Plaintiff. MetLife alleges that it has the right to seek reimbursement under the Group Disability Policy. Plaintiff alleges that ERISA forbids MetLife from enforcing this alleged Policy right and also forbids MetLife from taking any action to seek reimbursement of any amount of the alleged overpayments from Plaintiff, including but not limited to sending collection demand letters, utilizing an outside collection agency, or threatening, filing, or prosecuting a lawsuit.
- 28. Plaintiff will suffer irreparable harm unless this Court exercises its equitable power to resolve this controversy in his favor, and to enjoin MetLife from any further effort to collect any amount of the \$8,849.76, or any other amount from Plaintiff.
- 29. As a direct and proximate result of MetLife's unlawful efforts to collect the \$8,849.76 from Plaintiff, in breach of its duties as an ERISA fiduciary, Plaintiff has been forced to incur attorneys' fees and costs to pursue this action and is entitled to reimbursement of these fees pursuant to 29 U.S.C. Section 1132(g)(1).



PRAYER FOR RELIEF

WHEREFORE, Plaintiff prays for the following relief against all Defendants:

- 1. That this Court issue a declaratory judgment holding that the provision which MetLife relies for its alleged right to seek reimbursement from Plaintiff, the provision in the Group Disability Policy entitled "How We Recover Overpayments", and any other provision, term, or condition in the Group Disability Policy that purports to grant such a right of reimbursement, are unlawful and unenforceable under ERISA to the extent MetLife seeks to obtain reimbursement of alleged overpayment of past disability benefits resulting from State Disability benefits paid to Plaintiff from any funds or source other than the past disability benefits that included an overpayment, and to the extent the funds from those past disability benefits are still in Plaintiff's possession and are not commingled with other funds;
- 2. That this Court issue a permanent injunction enjoining MetLife and any person, agent, employee, or outside collection agency or other person or entity working on behalf of MetLife from taking any action to collect or seek reimbursement of any amount from Plaintiff, including, by way of example, but without limitation, sending any written communication or correspondence by any media, making any telephone calls to Plaintiff (or to anyone else in relation to trying to collect from Plaintiff), making any in-person demand, placing any lien on any personal or real property of Plaintiff, filing any lawsuit against Plaintiff seeking collection or reimbursement, and reporting Plaintiff's alleged reimbursement obligation to any credit reporting agency;
- 3. For an award of costs and reasonable attorneys' fees pursuant to 29 U.S.C. Section 1132(g); and



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proper.

4.

Dated: February 23, 2023

MCKENNON LAW GROUP PC

By:

For such other and further relief as this Court deems just and

ERIK C. FRITZ

Attorneys for Plaintiff, Roxanne Hazel



Case No .: