COURT OF APPEALS
STATE OF NEW YORK
LAKE CHAMPLAIN OB-GYN,
Appellant,
-against- NO. 37
SCHOCH,
Respondent.
20 Eagle Street
Albany, New York April 20, 2022
Before:
CHIEF JUDGE JANET DIFIORE ASSOCIATE JUDGE JENNY RIVERA
ASSOCIATE JUDGE MICHAEL J. GARCIA ASSOCIATE JUDGE ROWAN D. WILSON
ASSOCIATE JUDGE MADELINE SINGAS ASSOCIATE JUDGE ANTHONY CANNATARO
ASSOCIATE JUDGE SHIRLEY TROUTMAN
Appearances:
JAMES PELUSO, ESQ. DREYER BOYAJIAN LLP
Attorney for Appellant Lake Champlain OB-GYN 75 Columbia Street
Albany, NY 12210
JUSTIN A. HELLER, ESQ.
NOLAN HELLER KAUFMANN, LLP Attorney for Respondent Schoch
80 State Street 11th Floor
Albany, NY 12207
Colin Richiland Official Court Transcriber



1	CHIEF JUDGE DIFIORE: Number 37, Schoch v. Lake
2	Champlain OB-GYN.
3	Counsel, if you would just hold on one moment, I
4	I hear gentlemen, you're welcome to stay. If
5	you're going to clear out, do it quickly. Thank you.
6	Counsel?
7	MR. PELUSO: If it please the court. James
8	Peluso with the law firm of Dreyer Boyajian on behalf of
9	the appellant, Lake Champlain OB-GYN.
10	JUDGE GARCIA: Counsel, could we could we
11	
12	MR. PELUSO: If I may reserve two minutes.
13	CHIEF JUDGE DIFIORE: You may have your two
14	minutes, sir, for rebuttal.
15	JUDGE GARCIA: Could could could we
16	pick up right where we left off here. And I'm trying to
17	understand let's stick with the statute first. I
18	understand the respondent's view that the rules should be
19	policyholder means the person who named the policies and
20	the insured. What would your just purely based on
21	the statute, what would your rule be?
22	MR. PELUSO: Your Honor, the statute and the
23	legislature, when they enacted section 7307, very
24	were very specific in the terminology they used. They used
25	the word policyholder. They did not use the word insured.

1	They did not use the word beneficiary.
2	JUDGE GARCIA: So under your rule, who is the
3	policyholder?
4	MR. PELUSO: Lake Champlain is the policyholder.
5	JUDGE GARCIA: Why?
6	MR. PELUSO: Lake Champlain contracted for the
7	policy and Lake Champlain was issued the policy. The word
8	policyholder is not defined in section 7307.
9	JUDGE GARCIA: So what if in another case the
10	doctor picked the policy. Same facts, but the doctor says
11	hey, I like Mutual Omaha, you know, let's use them and you
12	say yes. So then you're not the policyholder?
13	MR. PELUSO: If the doctor contracted for the
14	policy
15	JUDGE GARCIA: No. The doctor just says, you
16	know, I like this insurance company. Why don't you use
17	them. And you say, okay, you can pick the policyholder -
18	- you can pick the company?
19	MR. PELUSO: Well, Judge, under that that
20	factual scenario, I would still argue that the party who
21	actually bargains for the the policy, the coverage,
22	the terms
23	JUDGE GARCIA: So it isn't who picks it. It's
24	who what?
25	MR. PELUSO: Who who bargains for the

for the policy. And we submit - - - can we preface this by saying under the Insurance Law governing mutual insurance companies, policyholder is not defined. Insured is not defined.

2.2

JUDGE GARCIA: That's why I'm trying to def - - -

JUDGE GARCIA: That's why I'm trying to come up with a definition. I understand their definition.

MR. PELUSO: And member is not defined.

MR. PELUSO: So we submit that the court - - - as it has in prior cases - - - follow, you know, rules of statutory construction. One, look at the plain meaning of the statute to see what the legislature intended.

JUDGE GARCIA: So I understand the rules, but what is your application of the rules? What is the test you would have us apply?

MR. PELUSO: I would look at who - - - who was the party who bargained for, in this case, the MLMIC policy insurance. This is very important because the practices had options. They could have went with MLMIC. They could have went with a different insurance company. They choose - - they chose the mutual insurance company because it had very specific benefits, primarily dividends that would be received. Okay.

JUDGE GARCIA: And did you have a written agreement with the doctor as to who would get the



dividends?

MR. PELUSO: No. In fact, in our case, Schoch's complaint specifically pleas that she did not bargain for any interest in MLMIC or any interest in the demutualization proceeds. And she did that to avoid the arbitration provision in the contract.

And to - - - and to - - - to follow up on my prior point, Judge, if we can't discern who the policyholder is from the stip - - - from the plain language - - - plain language of the statute, we can look to other parts of the Insurance Law because the second rule of statutory construction is make sure that the entire statute is harmonized.

And conveniently here, we do have a definition.

If we turn to Insurance Law 501 subsection (g), it defines who is a policyholder for property casualty policies, and it's very specific. And it states that the policyholder is the person - - - "policyholder means a person who is contracted with an insurer for property casualty insurance coverage". It can't be any more plain than it is written by the legislature in the - - - in the statute. Now, they - - the respondent has argued, well, you can't - - - you can't bootstrap section 501 into section 7307. But under well-settled principles of statutory construction this court can determine - -

1	JUDGE WILSON: Well, who are who are
2	sorry. Who are the parties to the contract of insurance?
3	
	MR. PELUSO: In this in this case, Your
4	Honor
5	JUDGE WILSON: I mean, there's a con
6	written contract
7	MR. PELUSO: Yeah.
8	JUDGE WILSON: and presumably it has
9	parties. Who are the parties who can enforce it?
10	MR. PELUSO: In this case, it's Lake Champlain
11	and MLMIC. And if you look at if you look in the
12	record
13	JUDGE WILSON: Um-hum.
14	MR. PELUSO: at the policy declarations an
15	the endorsements at 230 to 247, the policy was issued to
16	Lake Champlain, all the endorsements are issued to Lake
17	Champlain. Lake Champlain at all times had the ability to
18	select the insurer, here MLMIC, select the coverage,
19	terminate the policy, receive the dividends, and receive
20	the cancellation refund it when the policy was over.
21	The only the only thing that it had to provide the
22	respondent was coverage. And she acknowledged
23	JUDGE GARCIA: And and does and does
24	the I'm on the screen, Counsel, sorry. And does
25	- and does the policy state that Lake Champlain is the

## policyholder?

2.2

MR. PELUSO: The policy I believe identifies Lake Champlain as the policy administrator and it identifies Ms. Schoch as the insured. I don't think the word policyholder is used in the entire --

JUDGE RIVERA: Is insurer defined in the policy?

MR. PELUSO: We do not have a definition in the record of insured, Your Honor.

JUDGE RIVERA: Okay. Thank you. It does sound like a policyholder, though. The insured, right?

MR. PELUSO: Well, that's what the Third

Department did. It looked to the MLMIC plan conversion to

- - to define policyholder. And in the - - in the plan

conversion, the definition is a policyholder is the named

insured. But if it was that simple - - -

JUDGE RIVERA: Did Lake Champlain sign off on the demutualization?

MR. PELUSO: The - - - there's nothing in the record, Your Honor, that either party here voted on the plan. And that's a - - - that's a good question the court presents because, you know, who were the policyholders entitled to vote here?

And the -- and the DFS, they -- they grappled with this issue because during the hearings, this was raised. Who should have had the right to vote on this



plan and who are the policyholders? And they kind of - you know, the superintendent in his decision said well, it really doesn't matter because nobody objects to the conversion of MLMIC to a stock company. We can - - - we can figure out who the policyholder is and who's entitled to the cash consideration either through this objection protocol, which was - - - which it was very limited and - -- and - - - and specific to certain types of objections. It did not foreclose an objection by, for example - - - and this is - - - this is important. If a policy administrator has not been specifically designated to receive the cash consideration allocated, but nevertheless believes it has a legal right, it can file an objection and the money will be put in escrow and it will not be released until there is a nonappealable decision from a court or arbitration panel.

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

So even the DFS recognized that although the - 
- the conversion was in the - - - in the best interests of

everybody, nobody - - - nobody objected to that. They

wanted the conversion to go through and they wanted to

procure a way to get the money, right. So Berkshire

Hathaway was going to, you know, convey those two billion

dollars. They needed to park it somewhere to allow the

conversion to go through and in the meantime, these

disputes have arisen between certain policyholders, or I

should say parties such as Lake Champlain, and their

insureds.

2.1

2.2

You know, the DFS, they also said the - - - "the objection procedure provides a reasonable framework for the resolution of these disputes between certain policyholders and entities that claim to be policy administrators.

Importantly, the objection procedure does not in any way impact any person's rights to" -- receive - - - "to resolve their dispute in any form of their choosing or as required by contract or law. Rather, the purpose is to create a category of disputed claims".

And this dispute resolution process that the DFS set up was completely voluntary. You were not required to participate in it. You could very easily have declined to participate in this procedure and brought your claim to the arbitration before court.

CHIEF JUDGE DIFIORE: Thank you, Counsel.
Counsel?

MR. HELLER: Thank you. May it please the court. Justin Heller with Nolan Heller Kaufmann in Albany on behalf of the respondent.

As a threshold matter, the appellant's main argument, as I understand it, is that the Third Department failed to properly interpret 7307(e)(3) in deciding which party was entitled to the consideration and instead improperly relied on the terms of the plan in awarding the



money to the respondent. But the Insurance Law expressly delegates jurisdiction to the DFS to ensure that a plan of demutualization is consistent with applicable law, fair and reasonable and in the best interests of policyholders and the public. And that's what the DFS did here in its written decision and specifically considered and rejected the same statutory construction arguments that the appellant here, and all the appellants on these appeals, are making.

2.1

2.2

And so as a result, the only way in which a party could challenge the terms of the plan or the DFS decision was through a timely article 78 proceeding. And in fact, such a proceeding was brought in Westchester Supreme Court and it was dismissed as moot because the transaction had closed and 2.3 billion dollars had already been distributed out. And the court also found that the DFS decision had a rational basis and was not arbitrary or capricious.

So as a result, the plan governs who gets the money and I think the Third Department in this case, as well as the Second and Fourth Departments, were completely correct to apply or to look to the plan's terms in reaching their result. And I believe that these statutory interpretation arguments are really barred at this point under the doctrine of collateral attack because the DFS decided that the plan - - - the - - - approved the plan.



The appellant also argues that 7307 does not provide a definition of policyholder. But I think that's wrong. I think 7307(e)(3) is completely clear that the party who is the policyholder and entitled to - - - entitled to the consideration is in - - - in - - - in the words of the statute, "each person who had a policy of insurance in effect during the relevant period".

2.1

2.2

JUDGE GARCIA: Counsel, what about the argument - sorry - - - what about the argument we heard that - - that language that has been interpreted, at least by the
Third Department related to payments of the premiums, that
if you read that literally, the doctor or nurse would not
be entitled to anything because they didn't pay any
premiums?

MR. HELLER: Well, I think it's the Third and the Second Departments recognized the - - - you know, that language comes from a section of (e)(3) that describes the formula for allocating consideration between a particular policyholder and the rest of the policyholders, and that is the amount of premiums paid during a three-year period.

JUDGE GARCIA: But I think their point, then, would be if that's what that means, the actual policyholder paid nothing, so you would get nothing.

MR. HELLER: Well, I think - - - I think that's incorrect because what's I think important to bear in mind



here is that while the employer paid those premiums, they paid them on behalf of the policyholder, both as a part of the bargained for consideration between the parties as a part of their employment agreement and in its capacity as policy administrator, which is the agent for the policyholder. And as policy administrator, the employer is specifically and expressly the agent for certain acts. And those are the payment of premiums, making changes to the policy, and receiving dividends and returned premiums.

So yes, the employer may have mechanically made those payments, but to the extent that they're made on behalf of the employee, I think it's really the employee policyholder who is - - - is deemed to have made those payments.

And I guess I would add that - - - and again, as the second and Third Departments noted, it's that - - - you know, that formula language that has the reference to premiums paid relates to the allocation of premiums between policyholders, but it's the other language in 7307(e)(3) that tells you who gets - - - who is entitled to the consideration. And again, that is each person who had a policy of insurance in effect. That could only be the respondent here.

Only the respondent had an insurance policy.

Only the respondent had any kind of privity of contract



with MLMIC. And to the extent that the appellant bases its arguments on things like its interaction with MLMIC with respect to the policy or certain claimed indicia of ownership of the policy, all of that flows from the appellant's role as policy administrator. I mean, a good example is dividends.

The - - - the only reason the - - - the employer receives dividends is because the policyholder has designated the right to receive those dividends to the employer, pursuant to the policyholder - - - or policy administrator designation form. But the policyholder did not part with any of her other rights, such as the right to vote, the membership interest, even the right to terminate that policy administrator designation if she so chose.

And that also - - - you know, the appellant refers to - - - you know, describes itself as having contracted with MLMIC for the - - - for insurance. But again, it's the - - - it's the policyholder, it's the respondent who is the insured, who is the owner and holder of the policy. And to the extent that the employer did anything with respect to the policy, it was as her agent as policy administrator.

CHIEF JUDGE DIFIORE: Thank you, Counsel.

MR. HELLER: Thank you.

CHIEF JUDGE DIFIORE: Counsel, your rebuttal?



MR. PELUSO: With respect to the - - - the policy designation form - - - and we don't have a completed copy of that in the record here, but assuming that it was - - - and we believe it was filled out by - - - by respondent, that is an indica - - - indicative of the fact that the insured here, Ms. Schoch, recognized that Lake Champlain was the owner of the policy. All the trappings of ownership were vested with Lake Champlain. She agreed to that. She agreed to allow them to administer the policy, collect the dividends, collect the refunds, cancel the policy if they wanted to.

2.1

2.2

And you know, earlier today we were - - 
JUDGE WILSON: Doesn't that - - -

MR. PELUSO: The court was asking - - -

JUDGE WILSON: Doesn't that seem in the other direction from what you're saying? That is, that agreement is her giving those things to your client?

MR. PELUSO: Well, it - - - it goes to the question that was raised earlier. You know, do you have to have legal title as - - - to have ownership or an equitable ownership interest. And this court has recognized before in the insurance contracts, you don't - - - insurance context, you don't have to be the named insured or beneficiary to receive the equitable interest in the policy.

In the Simmons case, the court proposed a constructive trust on life insurance proceeds where a spouse had agreed to name his first wife as the beneficiary. He didn't. He named his second wife. The second wife had a legal contract. She was named as the insured. The court came in and said, well, we're going to impose a trust, essentially, and do what's equitable and allow the first wife, who - - - who has no contractual privity in this contract, to participate in the life insurance proceeds.

2.1

2.2

So if we're - - - if we're going to go down that road of - - - on - - - on who is the policyholder, who is the owner of the policy, if it's not clear from the statute in the plain - - - plain meaning and words used by the legislature, then our argument is that as a matter of equity, Lake Champlain is de facto owner. And we submit that the unjust enrichment claim survives for that very reason.

And a majority of courts throughout the country who have looked at demutualization of insurance companies have come to exactly the same result. They - - - they've looked at who paid the premiums and what proportion were the premiums paid by the employer versus the employee. And we cited over a half a dozen cases, most of them federal, many circuit courts of appeals, where if the employer paid

the premiums, the employer participated in the equitable interest that was distributed. If the employee paid the premiums, then the employee received the equitable interest. Didn't matter who was the policyholder, who was the insured, who was the beneficiary, who bargained because nobody bargained for that exchange.

2.1

2.2

If anyone here bargained for the MLMIC policy, it was Lake Champlain. Certainly not Ms. Schoch. Lake
Champlain, if anyone, has an equitable interest in these proceeds, since they bargained for the policy, they had an expectation of dividends being paid while MLMIC was a mutual insurance company. And once that conversion occurred, that right was extinguished. And how do you compensate a party who has had a right in dividends that's been extinguished? It's through the equitable interest and here, the cash consideration.

And you know, that was recognized by Chicago

Truck Drivers, which was a federal court case. And the

court noticed that, you know, in a mutual - - -

JUDGE RIVERA: Counsel, I'm on the screen. But if the money is in exchange for the membership interest and the employer's not the member, I'm - - - I'm not sure I can follow your argument.

MR. PELUSO: No, Your Honor, we're - - - we're not - - I'm not suggesting that it's a purchase of the



stock in the new company.

2.2

JUDGE RIVERA: Okay.

MR. PELUSO: But the premiums that were paid were -- were part of the bargained-for exchange when they contracted for the mutual insurance benefits of MLMIC, which included the dividends, so.

JUDGE WILSON: Yeah, it included, expressly include - - - over here. It expressly included the dividends, but didn't say anything about the mutualization proceeds.

MR. PELUSO: Well, that's - - - that's correct,

Your Honor. And what we're suggesting is it's a matter of
equity. When you're weighing the equitable interests of
the parties here, if you can't come to a clear
understanding of who the policyholder is under the statute,
okay, then you look at examples of, you know, who bargained
for the policy. Who - - - who exhibited, you know,
ownership responsibilities and - - - and you know, who was
the person who was - - - had a vested interest in the
continuing, ongoing concern of MLMIC. Here it was the
practice. That's - - - that's why this Lake Champlain went
to MLMIC.

They could have went to a different insurance company. They didn't. They specifically liked the fact that dividends would be paid and they could lower their



1	premiums for all of their physicians in their practice
2	group.
3	So in in weighing the the equities o
4	this in you know, we've we've submitted that
5	JUDGE RIVERA: So then Lake Champlain got what
6	they bargained for and the employee's the member and now
7	they get whatever a member would get?
8	MR. PELUSO: Well, Judge, I would submit that
9	once the company converted to a stock company, Lake
10	Champlain lost what it had bargained for, which was a righ
11	to receive dividends.
12	CHIEF JUDGE DIFIORE: Thank you, Counsel.
13	(Court is adjourned)
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	



## CERTIFICATION I, Colin Richilano, certify that the foregoing transcript of proceedings in the Court of Appeals of Columbia Memorial Hospital v. Hinds, No. 36, Schoch v. Lake Champlain OB-GYN, No. 37, and Maple Medical v. Scott, et al., Nos. 38-43, and was prepared using the required transcription equipment and is a true and accurate record of the proceedings. Coin Richty Signature: Agency Name: eScribers Address of Agency: 7227 North 16th Street Suite 207 Phoenix, AZ 85020 Date: May 02, 2022

