1	COURT OF APPEALS
2	STATE OF NEW YORK
3	
4	MAPLE MEDICAL,
5	Appellant,
6	-against-
7	Nos. 38-43 SCOTT, ET AL.,
8	Respondents.
9	
10	20 Eagle Street Albany, New York April 20, 2022
11	Before:
12	CHIEF JUDGE JANET DIFIORE
13	ASSOCIATE JUDGE JENNY RIVERA ASSOCIATE JUDGE MICHAEL J. GARCIA
14	ASSOCIATE JUDGE ROWAN D. WILSON ASSOCIATE JUDGE MADELINE SINGAS
15	ASSOCIATE JUDGE ANTHONY CANNATARO ASSOCIATE JUDGE SHIRLEY TROUTMAN
16	
17	Appearances:
18	CARL L. FINGER, ESQ. THE LAW OFFICES OF FINGER & FINGER, A PROFESSIONAL ORGANIZATION
19	Attorney for Appellant Maple Medical
20	158 Grand Street White Plains, NY 10601
21	JUSTIN A. HELLER, ESQ.
22	NOLAN HELLER KAUFMANN, LLP Attorney for Respondents Scott, et al.
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25	Colin Richilano Official Court Transcriber
25	Official Court Transcripe



CHIEF JUDGE DIFIORE: The next appeal on this afternoon's calendar includes appeals 38 through 43, Maple Medical v. Scott, Goldenberg, Arevalo, Sundaram, Mutic, and Youkeles.

Counsel?

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MR. FINGER: Good afternoon, Your Honor. Carl Finger for Maple Medical. May it please the court, Chief Judge DiFiore and justices of the Court of Appeals. I would like to reserve a minute-and-a-half for rebuttal, if the court would permit that.

CHIEF JUDGE DIFIORE: Yeah, you have a minute-and-a-half, sir.

MR. FINGER: Thank you. If there is one - - - yes, I struggled between one and two, so I settled in on a minute-and-a-half.

If there is one thing that I hear that I must correct today, it is the idea that nobody considered, thought of, or anticipated demutual - - - demutualization or the demutualization proceeds; that nobody bargained for them or expected them. That is unequivocally untrue. Dr. Richard B. Frimer as far back as 2008 was advocating with MLMIC for demutualization. He is the managing partner of Maple Medical. It is in the record when he appeared before DFS. And he absolutely anticipated, wanted, and fought for the demutualization.

1	JUDGE GARCIA: But then, if that's true, I don't
2	see that necessarily favoring you. Because if that's true
3	and you're negotiating these insurance contracts or picking
4	the company, why isn't it your obligation, then, to clear
5	with the policyholder, the insured, that if it's
6	demutualized you get the payments, instead of having us all
7	here?
8	MR. FINGER: Well, that assumes that question
9	that we believed that there was some uncertainty about it.
10	Not only does the statute refer to
11	JUDGE GARCIA: Well, I think what you're arguing
12	here, if at least from what I've heard today from
13	others, is that there's an ambiguity here.
14	MR. FINGER: Well, I
15	JUDGE GARCIA: Because it's not
16	MR. FINGER: I would say the following. I
17	I I haven't said that. I do think there is at least
18	some vagueness, but the statute says that the party
19	the policyholder the funds go to the policyholder who
20	paid the premium. In my
21	JUDGE GARCIA: No. That's not what the statute
22	says.
23	MR. FINGER: Well, that's part of what it says.
24	I think that you know, that to your initial
25	question, in negotiating these contracts, if you believed

that you were going to receive the proceeds of a demutualization and in fact, for two years after - - -

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JUDGE GARCIA: But you're the sophisticated party that wants them and you're controlling which company is picked. Why isn't it your obligation, then, to make that clear if, at best, this statute's vague?

MR. FINGER: The - - - the two years leading up to July or - - I think July of 2018, two months before the hearing, this was publicized. The demutualization was publicized and advertised by MLMIC and all involved parties that the party who paid the premium would receive the demutualization proceeds.

So it's not as simple as saying, well, there was an ambiguity. Now, we say there was - - - that you're - - you're suggesting and people have suggested there is an ambiguity. We didn't think there was an ambiguity. And -- and to be clear, neither did the employees. All they wanted was insurance. And it gives the amounts of insurance and that's what they got.

So the idea that somehow it should have been - -

JUDGE GARCIA: Would there be a different rule, then, for a hospital that didn't expect it? So it has to be that the hospital is in the position you're saying you were in; that we actually thought about this, we wanted

this, we have records that show we picked this because we thought we might eventually get this payout. But if you don't have that, then the policyholder would be the doctor who's ensured.

MR. FINGER: I'm not sure I would - - - I'm not sure I'm in a position to address - - - $\!\!\!$

JUDGE GARCIA: See, my problem with these rules that we're hearing today is I understand the rule on this side: Policyholder is insured. And I'm trying to understand what the rule would be on this side.

MR. FINGER: Right.

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JUDGE GARCIA: And I'm having trouble identifying it because it doesn't sound like a rule that this court would want to apply in an insurance contract situation. It sounds more like a rule you might want to propose with respect to who owns a lottery ticket.

MR. FINGER: I don't think it's the same as a lottery ticket. I mean, for one thing, it would be as if we paid 1,000 every month for twelve months and then we got back that 12,000 dollars, so. And we fought to get back that 12,000 dollars for the entire year.

JUDGE GARCIA: I - - - no. We all paid for the lottery ticket. In the last lottery ticket, we each got 2 - - - \$2.50. When we won \$10 we should get, you know, an equal share this time. I put my money out for the lottery



ticket, so I really own the lottery ticket; that's what 1 2 this sounds like. It doesn't sound like an insurance rule. 3 MR. FINGER: Well, the - - - there's - - -4 there's three different, I quess, possibilities here that 5 we're sort of combining. You know, one is the - - - the 6 statute 7307, which in my estimation speaks to the party 7 that paid the premium and if it doesn't speak to that, I -8 - - I think it - - - you know, as Mr. Zwerling said, 9 doesn't make sense and results in the employee getting zero 10 anyway. The second issue is - - -JUDGE WILSON: Well, DFS is - - - DFS - - - I'm 11 12 just going to stop you for a second. DFS has pretty 13 clearly rejected that, right. It doesn't say, the statute, 14 always says if you paid the premium, then you - - - right? 15 MR. FINGER: Agreed. 16 JUDGE WILSON: Okay. So it can't - - -17 I mean, they - - - they wouldn't MR. FINGER: 18 have - -19 JUDGE WILSON: So it can't be that. 20 MR. FINGER: Right. They wouldn't have had the -21 -- well, they've rejected it. I don't know if they're 22 right to reject it, but they did. 23 JUDGE WILSON: Well, okay. But if they were - -24 - then that goes back to the Article 78 point, right. 25 they rejected it and there isn't a timely Article 78

challenging that, you're stuck with it. So let's - - - MR. FINGER: Well - - -

JUDGE WILSON: I think let's move to your point two.

MR. FINGER: Okay. The second part of this, obvi

- - I think it's clear is there is contractual issues

that are - - that were sort of alluded to because you've

got certain hospitals where a nonhospital employer,

different contracts, et cetera, which were raised in the

courts below, but at least with Maple Medical were never

determined one way or the other because the judge made a

decision on the unjust enrichment and that got appealed and

obviously now we're here.

And then the third leg, really, is the unjust enrichment claim. It - - - what I'm suggesting, really, is that the only consistent approach you can have that resolves all of those in the same way is to afford the employers the proceeds. Number one, it's consistent with the statute, as far as both the Insurance Law definition that Mr. Peluso was referring to. It's consistent with my point and everybody knows the language associated with 7307(e) saying the party that paid the proceeds. It's consistent with the federal court cases, the Chicago case, the Ruocco case that Mr. Peluso referred to, and it's consistent with the unjust enrichment idea that if I paid



the money, then I should be the one getting that benefit.

And that that wasn't something one way or the other that
was negotiated for by the employees, arguably by the
employer. So they had - - - the employees certainly had no
expectation of any of that, at least in our case.

JUDGE CANNATARO: Counsel?

MR. FINGER: And I think in most cases.

JUDGE CANNATARO: Counsel, I'm sorry. Another great indicator, I - - - I would think would be how the party votes with respect to the demutualization. Because if you're the hospital and you're receiving dividends, you know, there's a good reason to -- to keep that policy unless you're going to collect the cash compensation at the end of the demutualization process. So we've asked I think everybody so far how their people voted and it doesn't seem anyone has an answer. So can you tell me, how did Dr. Frimer vote with respect to the demutualization?

MR. FINGER: I - - - you know what, I should know that and I don't. I apologize; I don't have an answer to that.

I will say, however, that I do think that part of the MLMIC's change in July that I referred to, that certainly accelerated the ability of the demutualization to pass the vote because suddenly, you had people voting on it who had no interest in it one way or another and were happy

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1	to get the money. And I think that was a big in my
2	mind a big problem. And I understand what you said about
3	the other
4	JUDGE CANNATARO: But it cuts both ways.
5	MR. FINGER: Yeah.
6	JUDGE CANNATARO: Because if you're not getting
7	the cash compensation that the most you can hope for
8	is the dividends
9	MR. FINGER: Right. And cannot get the
10	JUDGE CANNATARO: which would enti
11	which would in incentivize you to vote against the
12	demutualization if you believe you're the policyholder.
13	MR. FINGER: Of course. And and not
14	and $-$ - $-$ and $-$ - $-$ and by $-$ - $-$ by doing that, it
15	misaligned the demutualization versus the people that got
16	the benefit when you weren't demutualized in its current
17	state. And as you pointed out, without the Article 78
18	prior to the vote, it it became, I guess, a nullity
19	to to argue about.
20	But I think that you have a chance here to reall
21	bring the just result that fits, as I said, each element.
22	I don't know that even today, sitting here, whether
23	or standing here, as I am
24	JUDGE RIVERA: Well, Counsel, I'm still le
25	me I'm sorry; I'm on the screen. I'm not really

me - - - I'm sorry; I'm on the screen. I'm not really

understanding when you say the just result. What is the - I'm still not clear on the injustice. It sounds to me
like you're saying the injustice is your client paid all
the premiums, so they should get this cash; that that's
what it all boils down to.

MR. FINGER: Paid the premiums - - - you know, I
don't want to repeat everything Mr. Peluso said, but I - -

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don't want to repeat everything Mr. Peluso said, but I - - I agreed with what he said. I would add to that, I guess, in my case, specifically understood and anticipated that a demutualization would occur and expected to reap the benefits of that, and that was one of the reasons they continued to get insurance through MLMIC; that this - - - this result - - - my client's view was that this result was inevitable.

CHIEF JUDGE DIFIORE: Thank you, Counsel.

MR. FINGER: Thank you, Judge.

CHIEF JUDGE DIFIORE: Counsel?

MR. HELLER: Thank you. May it please the court. Justin Heller, Nolan Heller Kaufmann on behalf of the respondents.

Initially, I - - - I don't believe that I responded to the question of whether my various respondents voted to approve the plan. And I also don't specifically know whether they did or not, but I would point out that under the policy administrator designation form, voting



rights was not among the rights or duties assigned to the policy administrator, so that was retained by the policyholders. And the DFS decision said that the - - - the policyholders, as defined in the plan, would be the parties entitled to vote. Whether my clients voted or not, I - - - I - - - I don't know.

All of the appellant's claims stem from its payment of premiums. But again, those payments of premiums were paid as a part of the bargained-for exchange of consideration under the employment agreements where the employees agreed to provide their professional services and in exchange, the employer agreed to pay premiums. And as the Second Department said, this was not a gratuitous act. The employer got exactly what it bargained for in the form of services. And in exchange, those employees received policies.

While it may be the employer that selected MLMIC as the insurance company, when it made that selection, the policy that - - - the policy that the employees received was a MLMIC policy. And that MLMIC policy carried with it the membership interests for which the - - - that were exchanged for the demutualization proceeds. And there's no basis on which the employer can sustain a claim for unjust enrichment by virtue of its payment of premiums when it was compensated for those premium payments by virtue of the

services that the employee provided.

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Similarly - - - and again, you know, this is an argument that all of the appellants make, is that they carried the indicia of ownership and they are the ones that contracted with or dealt with MLMIC. But again, that was all done in its capacity as policy administrator, which is the agent for the - - - agent for the policyholder.

I heard the appellant argue that there's ambiguity, but I - - - I see no ambiguity. Again, the formula language that references the payment of premiums just describes how the consideration is to be allocated between policyholders and it - - - to the extent that it's the employer who paid those premiums, it was done on behalf of the em - - - the employee. But I think in terms of an ambiguity or a lack of ambiguity, again, it's the provision of 7307(e)(3) that - - - that describes who is entitled to receive the consideration and I think that that's very clear. It's each person who had a policy of insurance in effect. I don't see how that could be anybody but the respondents in these cases. And that's really all I have.

CHIEF JUDGE DIFIORE: Thank you.

MR. HELLER: Thank you.

CHIEF JUDGE DIFIORE: Counsel?

MR. FINGER: Thank you, Judge. Thank you for all the time today.



The - - - the - - - I want to just respond,
actually, to that last comment by Mr. Heller: Each person
who had a policy in effect. He - - - he assumes that that
means the insured; that that means the employee. I would
say to you that the party that had the policy in effect was
the employer. I've paid for a policy. I've contracted for
a policy. I have a policy in effect, it's just insuring a
third-party employee of mine.

The only way to read that consistently with the weight of provision on the payment of the proceeds to the party who's paid the premiums is to find that both of those refer to the employer. Otherwise, if you interpret it the way Mr. Heller is suggesting and the employees are suggesting, you are interpreting it one way to say each person who had a policy in effect, that's a policyholder that's an employee. But for payment, determining the premium, the policyholder's the employer. So the only consistent - - -

JUDGE RIVERA: Well, no, no. Counsel, it is -
- it is certainly possible, of course, to read this

language as simply saying "such policyholder who has

properly and timely paid". And given the arrangement with

the employee, the employee has arranged for the employer to

pay. It is the acquiescence of the policyholder and

someone else cutting the check and mailing it.



1 MR. FINGER: It doesn't say any of that, though. 2 What it says - - -3 JUDGE RIVERA: It doesn't need to. Your - -4 your - - - you read it one particular way. All I'm saying 5 is that there's nothing here that says that the 6 policyholder themselves must pay. It says "such 7 policyholder who has properly and timely paid", made 8 arrangements for payment. 9 MR. FINGER: No. It doesn't say made 10 arrangements. It says policyholder timely paid. If it 11 wanted to say - - -12 JUDGE WILSON: Can you - - - can you pay through 13 an agent? 14 MR. FINGER: If it's an agent, I wouldn't say 15 that that is the same as a policyholder. Agent stands in 16 the shoes of a principal. 17 JUDGE WILSON: Okay. 18 MR. FINGER: That is a different scenario. 19 think the - - - that is not what happened here. It's - - -20 A, it's not what happened here. And B, it's - - -21 JUDGE RIVERA: Okay. But it - - - can - - - is -22 - - is the arrangement you have the kind that would 23 foreclose viewing the employer-employee relationship for 24 purposes of payments of premiums one that is, as is being 25 suggested, that you're doing it on behalf, right. You're

1	the agent for that purpose, given that you're the policy
2	administrator?
3	MR. FINGER: Well, the policy
4	JUDGE RIVERA: Right. It's an administrative
5	task that you've taken on.
6	MR. FINGER: The policy administrator role is a
7	fiction, okay. They made it up at some point. It's not in
8	every policy. It wasn't available when every policy was
9	written. It came up at some time later, and it doesn't
10	have any legal meaning in the statute.
11	So when we started paying these when we
12	- when my client, Maple Medical, started paying many
13	paid many of these premiums, there wasn't even an existence
14	of a policy administrator as a term, much less it
15	wasn't even a thing. You know, so so I think that
16	that's
17	JUDGE RIVERA: Yes, but the policy well,
18	you'll correct me if I'm wrong. The policy doesn't say
19	that your client is the policyholder, correct?
20	MR. FINGER: No. I don't think the policy
21	no.
22	JUDGE RIVERA: All right.
23	MR. FINGER: I don't think it doesn't say
24	that.
25	JUDGE RIVERA: All right. Correct. Okay.

1	MR. FINGER: I'm I'm relying on the
2	I'm referring to the statute. I mean, if the policy
3	JUDGE RIVERA: That's
4	MR. FINGER: Yeah, I'm referring to the statute.
5	The policy doesn't say anything.
6	JUDGE RIVERA: Okay.
7	CHIEF JUDGE DIFIORE: Thank you, Counsel.
8	MR. FINGER: All right. Thank you very much,
9	Your Honors.
10	CHIEF JUDGE DIFIORE: You're welcome.
11	(Court is adjourned)
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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

