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6	IN THE UNITED STATES DISTRICT COURT			
7	FOR THE DISTRICT OF ARIZONA			
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9	United of Omaha Lif	e Insurance)	No. CV 09-0479	9-PHX-ECV
10	Company,)	ORDER	
11	Plaintiff,)		
12	VS.)		
13	Chloe Reavis, et al.,)		
14	Defendants.)		
15)		
16	Danding before the	agust is Dafand	ont Amylo Lomb	ov's ("Lomlo

Pending before the court is Defendant AmyJo Lemley's ("Lemley") Motion for Judgment on the Pleadings (Doc. #55). Also pending, and related to this motion, are Chloe Reavis' ("Reavis") Motion to Extend Time to Respond (Doc. #58), Lemley's Motion for Leave to File Supplemental Exhibits (Doc. #59), Lemley's Motion to Strike Reavis' Response (Doc. #60), and Reavis' Motion for Leave to File Sur-Reply (Doc. #62). The court has reviewed all the motions, the responses and the replies. Regarding the related motions, the court will grant the motion to extend time to respond, the motion for leave to file supplemental exhibits and the motion for leave to file sur-reply. With respect to the motion to strike Reavis' response, the court will deny the motion. The court agrees, however, that the response includes many extraneous factual assertions not alleged in the original responsive pleading. The court has not considered any of those unsupported allegations in

its decision. The court has limited its use of the response to the legal arguments presented therein.

A. Legal Standard for Rule 12(c) Motion

Rule 12(c) of the Federal Rules of Civil Procedure authorizes a motion for judgment on the pleadings after the pleadings are closed. "A judgment on the pleadings is properly granted when, taking all the allegations in the pleadings as true, the moving party is entitled to judgment as a matter of law." <u>Dunlap v. Credit Protection Ass'n, L.P.</u>, 419 F.3d 1011, 1012 n.1 (9th Cir. 2005) (<u>quoting Owens v. Kaiser Foundation Health Plan, Inc.</u>, 244 F.3d 708, 713 (9th Cir. 2001)). "All factual allegations in the complaint are accepted as true and the pleadings construed in the light most favorable to the non-moving party." <u>Abagninin v. AMVAC Chemical Corp.</u>, 545 F.3d 733 (9th Cir. 2008).

B. Benefit Plans under ERISA¹

ERISA governs the administration of employee benefit plans and protects the interests of the participants in such plans and their beneficiaries with uniform guidelines and rules. Metropolitan Life Ins. Co. v. Parker, 436 F.3d 1109, 1111 (9th Cir. 2006). Under ERISA, "[e]very employee benefit plan shall be established and maintained pursuant to a written instrument." 29 U.S.C. § 1102(a)(1). A benefit plan must "specify the basis on which payments are to be made to and from the plan." 29 U.S.C. § 1102(b)(4). The plan administrator must administer the plan "in accordance with the documents and instruments governing the plan insofar as such documents and instruments are consistent with [ERISA's provisions]." 29 U.S.C. § 1104(a)(1)(D). A "beneficiary" under a benefit plan is "a person designated by a participant, or by the terms of an employee benefit plan, who is or may become entitled to a benefit thereunder." 29 U.S.C. § 1002(8).

A key purpose of ERISA is to protect the integrity of the written plans along with the expectations of the participants and beneficiaries. <u>Duggan v. Hobbs</u>, 99 F.3d 307, 310 (9th Cir. 1996). "Thus, the plain language of an ERISA plan should be given its literal and

¹ Employee Retirement Income Security Act

natural meaning." <u>Health Cost Controls v. Isbell</u>, 139 F.3d 1070, 1072 (6th Cir. 1997); see also <u>Parker v. BankAmerica Corp.</u>, 50 F.3d 757, 769 (9th Cir. 1995) (party cannot maintain a claim for equitable estoppel under ERISA where recovery would contradict the plan's written terms).

C. Application

The life insurance benefit plans at issue here provide that to change a beneficiary, "written request should be sent to the office where the beneficiary records are kept." Doc. #59-1 (at 39 of 59 and 28 of 56). They further provide that "[w]hen recorded and acknowledged, the change will take effect as of the date the request is signed." <u>Id.</u>

Reavis contends that because ERISA does not expressly prescribe how an insured must change a beneficiary designation for an employer sponsored life insurance plan, federal common law has developed. Reavis claims that under such common law, the courts have permitted some deviation from the formal requirements set forth in the benefit plan. Citing two Ninth Circuit cases, Metropolitan Life, 436 F.3d 1109, 1115 (9th Cir. 2006) and BankAmerica Pension Plan v. McMath, 206 F.3d 821, 828 (9th Cir. 2000), Reavis argues that policyholders may change a beneficiary through more than a single means and that substantial compliance with the terms of the plan is sufficient.

As the Court explained, however, in McMath, "[c]ourts have discretion to employ the equitable doctrine of substantial compliance, which is intended to circumvent harsh results 'engendered by a formalistic, overly technical adherence to the exact words of the change of beneficiary provision in a given policy." McMath, 206 F.3d at 828. McMath involved an insured who, after submitting a proper beneficiary designation form in 1990, submitted an unsigned beneficiary form in 1996 modifying the designation from 1990. Id. at 823-24. The court exercised its discretion and, after determining that ERISA does not preempt the consideration of state law on this issue, applied the substantial compliance standard under California law. Id. at 830. Even under those circumstances where the insured actually submitted a change of beneficiary form, the Court found that he did not substantially comply with the plan's requirements. Id. at 831.

Nor does the Metropolitan Life case support Reavis' position. In Metropolitan Life, the insured, shortly after a divorce in 1991, executed a change of beneficiary form to distribute his ERISA life insurance benefits. Metropolitan Life, 436 F.3d at 1112. He remarried in 1999 and then died in July 2000, without again changing the beneficiary. Id. Relying on ERISA's general requirement that a fiduciary administer the plan in accordance with the plan documents, the Court explained that its task was to determine whether the insured made an unambiguous beneficiary designation, and if not, whether the plan documents provide a default beneficiary. <u>Id.</u> at 1114. The Court found that the 1991 beneficiary change form was ambiguous and remanded the case for the lower court to determine a default beneficiary based on the plan documents that governed at the time of the insured's death. Id. at 1116.

Here, the beneficiary designation is clear. There's no dispute that in 2003 Mr. Hoffman designated Amelia Lemley as the sole beneficiary of his life insurance policies. Mr. Hoffman submitted no change of beneficiary forms to his employer prior to his death in 2008. Strict compliance with the terms of the plan requires that the life insurance proceeds be paid to Amelia Lemley.

Moreover, the facts alleged by Reavis do not warrant the exercise of the court's discretion to apply a substantial compliance standard. Under these facts, the court finds that application of the equitable doctrine of substantial compliance would not act to circumvent harsh results from a formalistic adherence to the terms of the plan.

Finally, even if the court applied a substantial compliance standard, it would find that, as a matter of law, the facts alleged by Reavis fail to demonstrate such compliance. Unlike McMath, Mr. Hoffman submitted nothing to his employer, signed or not, to change the beneficiary of his policies. Nor did he execute a new will designating a new beneficiary. Merely requesting the change of beneficiary forms from the employer, even when combined with a request to family members to have a new will drafted, is insufficient. Reavis has provided no case law where similar facts have been found to show substantial compliance.

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1	The court has no difficulty concluding that a substantial compliance standard could not be				
2	met with these facts.				
3	For the foregoing reasons, the court finds that a standard of strict compliance with the				
4	benefit plan documents should be applied here. Under that standard, the court concludes that				
5	Amelia Lemley is the designated beneficiary for Mr. Hoffman's life insurance proceeds. The				
6	court will therefore grant the motion for judgment on the pleadings and direct the Clerk of				
7	Court to release the interpled funds to AmyJo Lemley, as guardian of Amelia Lemley.				
8	IT IS THEREFORE ORDERED:				
9	That Defendant AmyJo Lemley's ("Lemley") Motion for Judgment on the Pleadings				
10	(Doc. #55) is granted ;				
11	That the Clerk of Court is directed to release the remaining interpled funds in this				
12	action to AmyJo Lemley, as guardian of Amelia Lemley;				
13	That Chloe Reavis' Motion to Extend Time to Respond (Doc. #58), Lemley's Motion				
14	for Leave to File Supplemental Exhibits (Doc. #59), and Reavis' Motion for Leave to File				
15	Sur-Reply (Doc. #62) are granted ; and				
16	That Lemley's Motion to Strike Reavis' Response (Doc. #60) is denied .				
17	DATED this 19 th day of March, 2010.				
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22	Edward Closs				
23	Edward C. Voss United States Magistrate Judge				
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