#### Presented:

The University of Texas School of Law 10<sup>th</sup> Annual Changes and Trends Affecting Special Needs Trusts

February 6-7, 2014 Marriot North Austin, TX

# **Subrogation and Liens In Personal Injury Recoveries**

**Judy Kostura** 

Judy Kostura Judge, Kostura & Putman, P.C. 2901 Bee Cave Road, Suite L Austin, Texas 78746

jkostura@jkplaw.com 512.328.9099 (telephone) 512.328.4132 (facsimile)

Common Law Equitable Principles	
A. History of state and federal regulation of insurance	3
B. Definitions	4
C. Types of subrogation: contractual, equitable, and effect of pro-rata or other	
insurance clauses	
D. Subrogation in the absence of a contract or statute? No and Yes	8
E. Equitable Principles	9
1. Made Whole Doctrine: the plaintiff's right to first recovery	9
A. Critique of Fortis opinion	13
B. HB 1869 Legislative Solutions to Fortis	15
C. Non Legislative Solutions to Fortis	17
1. Read the policy to see if it disclaims Made Whole	17
2. Do not apply Fortis to all contract provisions	18
i. Common fund doctrine	
ii. PIP and UM/UIM	. 20
iii. When subrogation has been waived contractually	
D. When the plan disclaims fairness but the client is not made whole.	. 22
1. Sue the third party tortfeasor	
2. Limit the damages sought in the third party suit	
3. Invite the plan to an Allocation Hearing	
4. Walk away from the case	
E. Ideas for ERISA Plans	
1. Get the Summary Plan Description	
2. Tell the client to spend the Money [risky]	
3. Focus on the Conditions Precedent	
4. Allocate the Money to family members who don't owe subr	
5. Focus on whether or not an "identifiable fund" exists	30
6. Determine whether or not a lien is required before an	
"identifiable fund" exists	
2. Common Fund Doctrine: the plaintiff's right to reimbursement of a prorata	
share of the cost of obtaining the recovery	
i. Passing the benefit of the common fund doctrine to the client	
ii. Passing the benefit of the common fund doctrine to the attorney	
3. Laches	
4. Can the carrier subrogate against itself?	38
5. Construe all ambiguities (re: children, spouses, 3rd parties, liable parties)	
against the plan?	40
	4.0
6. Subrogation as a sword and shield	
7. Does bankruptcy by the debtor discharge subro interest or a lien	
8. Children's recoveries and subrogation interests	44
II CURROCATION INTERESTS CRANTER BY FERENAL LAW (VA. MERICARE, ECURA)	1
II. SUBROGATION INTERESTS GRANTED BY FEDERAL LAW (VA, MEDICARE, FEHBA)	
A. Veterans Administration	
1. The fight of femioursement	. 44

I. Overview of Subrogation, History, Federal and State Balancing Act, and

	2. Made Whole, Pro-Rata Division; Common Fund, Reduction or Waiver	. 45
	3. For cases in litigation	.47
Β.	Medicare	. 47
	1. The right of reimbursement	. 47
	1.1. What is Medicare?	.47
	1.2. Who receives Medicare benefits?	. 47
	1.3. Other interests arise out of MCRA & Medicaid	. 48
	1.4. Medicare's interest arises out of Medicare Secondary Payer Act	. 48
	1.5. PIP/Med Pay are Primary and UM/UIM is subject to Medicare	
	1.6. 2003 Amendment to the MSP	48
	1.7. 2007 Amendment to the MSP	
	1.8. One slight exception for uninsured tortfeasors	. 49
	1.9. Medicare's interest is not a Lien	. 49
	2. Finding the intermediaries and opening the file	
	2.1. Open the file with COB	
	2.2. COB assigns file to MSPRC	
	2.2.1 MSPRC Recovery Portal	
	2.3. MSPRC interaction with CMS	
	2.4. FTCA cases	
	2.5 Documents to send to CMS/MSPRC	
	3. The amount of reimbursement	
	3.1. Pre-existing and unrelated conditions	
	3.2. Formula for reimbursement	
	3.3. Judgments and their effect	
	3.4 Wrongful death vs. survival damages	
	4. Set-aside provisions: Medicare takes a holiday	
	4.1. Definitions and Options offered for Public Comment by CMS	
	4.2. In the Meantime: Medicare Set Aside account	
	4.3 Medicare's position	
	4.4 MSA has its origins in worker's compensation	
	4.5 How to do WCMSAs	
	4.6 Mandatory reporting is now required by Defendants and Plaintiffs	
	4.7 Penalties for failing to report	
	4.8 Reporting effective dates	
	4.9 Content of the new reporting rules	
	4.10 De minimus reporting thresholds apply temporarily	
	4.11 The 180 page answer book	
	4.12 The amount to be set aside in trust	
	4.13 Comparative negligence of Plaintiff	
	4.14 Penalty for failing to create MSA	
	4.15 Seeking advance approval of MSA	
	4.16 Who establishes and administers the MSA?	
	4.17 Is an MSA required in all cases?	
	5. The procedure for determining reimbursement	
	5.1. For past medical expenses: start early	
	5.2. For future medical expenses	. 65

5.3. Confidentiality agreements	65
5.4 Court Allocation of Damages to avoid excessive repayment	65
6. Asking for a waiver	68
7. Penalties for failing to reimburse	68
7.1. Who must reimburse past medical expense subro interest	68
7.2. Medicare's enforcement options	69
7.3. Liability of counsel, tort defendants and liability insurers	69
7.4. Interest on damages	72
7.5 Statute of Limitations	72
7.6. Constructive notice	72
8. Naming Medicare, or not, on the settlement checks	72
9. Medicare Choice HMO's and Medicare Advantage	74
9.1 Authority for alternative plans under Medicare Part C	74
9.2 Does the Medicare Part C Plan have a private cause of action?	. 74
9.2.1 No, says the U.S. District Judge in <i>Humana v. Reale</i>	74
9.2.2 Yes says the 3rd Circuit in <i>In Re Avandia</i>	. 75
10. May Providers bill the patient instead of submitting to Medicare?	76
10.1. Providers who bill for claim related injuries	76
10.2. Seeking conditional payment from Medicare	77
10.3. Strategy to encourage providers to bill Medicare	77
10.4. The amount the provider may bill the patient beneficiary	78
11. Admitting evidence of the subro interest into evidence in 3rd party claim.	78
12. Recommended Reading	80
13. Protecting Recoveries in a Special Needs Trust	80
C. Medical Care Recovery Act, 42 U.S.C.A. Sec. 2651-53 (2002)	80
D. Federal Employees Health Benefits Act	80
E. Federal Employees Worker's Compensation Act	83
III. TEXAS STATUTORY SUBROGATION INTERESTS (BUT NOT WORKER'S COMPENSATION)	. 84
A. Medicaid	84
1. The right of reimbursement	84
2. Balance billing strictly regulated	86
3. Finding Medicaid to repay subrogation	
4. Preserving Medicaid eligibility	88
5. Reduction for client	88
a. Because the client needs public assistance	88
b. Ahlborn: Federal anti-lien statute prohibits assignment of property	89
6. Attorney's fees and expenses	92
B. Texas Rehabilitation Commission	92
C. Indigent Health Care Treatment Act	
D. Health Care to Prisoners	
E. Crime Victims Compensation Fund	
F. Child Health Plan for Certain Low Income Children (CHIPS)	93
G. State Employees Health Benefits Act- ERS	93

IV. TEXAS STATUTORY SUBROGATION INTEREST: WORKER'S COMPENSATION	95
A. The right of reimbursement	95
1. The scope of recovery: from the third party claim	95
a. Recovery: from the deductible?	
<ul><li>b. Recovery: Third party does not include employer for gross negl</li><li>c. Recovery: Third party is not those who contractually waive</li></ul>	96
subrogation against the employer	96
d. Recovery: when employer is negligent	
e. Recovery: The carrier's recovery is 2/3 of NET of claimant's	
recovery, not off the gross amount	97
f. County Law Enforcement Wage Continuation Benefits	
g. The carrier's rights are derivative but independent	
h. The intervening carrier does not recover interest or attorney's fees from the third party recovery	
2. Attorney fees for collecting the subrogation interest	
3. Attorney fees for collecting the attorney fee	
4. Attorney liability for failing to pay the w/c subrogation interest	
5. There is no made whole doctrine in worker's compensation: Allocating	. 102
the third party recovery and the subrogation interest	. 103
6. Three practice tips	
a. Contested hearing on damages	
b. Segregate each client's damages	
c. Drafting settlement documents	
7. Statute of limitations	105
a. Against third party	105
b. Against injured worker	
8. Disclosure and consent	106
9. Ethical considerations	106
10. Uninsured/Underinsured motorist coverage	107
11. Substitute Policies	
a. Apply Statutory Rules Found in HB1869	
b. Waivers are barred	
c. Retaliation is barred under ERISA	
12. When the third party settles the lien cheap	
13. Waiver of the worker's comp lien in contracts	
14. State of Texas self-funded worker's compensation plans	. 113
15. Worker's Compensation plans cannot subrogate to the Guaranty Assn	112
but Assn can subrogate to Ptf recovery	
16. Admitting evidence of the worker's comp lien in the third party case	. 114
V. TEXAS STATUTORY LIENS (HOSPITAL LIENS AND CHILD SUPPORT LIENS)	. 115
A. The hospital lien statute: lien content; UM/UIM; wrongful death; SOL	
1. Regular and Reasonable Rate & Patient Protection/Afford Care Act	
2. Emergency hospital care and Emergency medical care	
3. Admission within 72 hours	
4. Constructive notice and the timing of notice	.120

	5. The lien applies to a child's recovery	121
	6. Subrogation principles do not apply	122
	7. Unanswered question if recovery inadequate	
	8. Lienholders don't get interest or attorneys' fees plus lien (unless)	122
	9. Balance Billing: Hospitals and emergency care physicians are prohibited	
	by Chapter 146 of Civil Practice and Remedies Code from asserting a l	lien
	when health insurance should pay; Chapter 55 of the Property Code	
	reiterates that prohibition to physicians	122
	a. Chapter 146 and Medicaid and Medicare	123
	b. Seeking conditional payment from Medicare	124
	c. Strategy to encourage providers to bill Medicare	125
	d. The amount the provider may bill the Medicare beneficiary.	125
	10. Crime Victims Compensation Fund	126
	11. Statutory Remedies for improperly filed lien	126
	12. Does bankruptcy by the debtor discharge the lien?	126
	13. Turning a lien into lemonade: The <i>Stowers</i> Doctrine	.127
	14. Hospital liens in other states	127
B. The	Child Support Lien	.128
	1. Notice of the child support lien: actual or constructive?	129
	2. The property of the current spouse is not subject to the child support lien	
	3. Medical liens and attorneys' fees take priority over child support lien	
	4. Letters of protection do not take priority of the child support lien	.130
	5. Child support liens takes priority over an ERISA interest	131
	6. Lottery winnings may be subject to child support liens	131
	L OR COUNTY EMPLOYEE STATUTORY SUBROGATION INTERESTS GRANTED BY	101
	ployees of local political subdivisions	
B. Mun	nicipal officers and employees	133
VII. ERISA EN	MPLOYEE WELFARE BENEFIT PLANS	133
	effect of ERISA (overview of subrogation decisions)	
	blishing a plan's status as an 'employee welfare benefit plan'	
	1. There must be a plan	
	2. There must be proper intent and handling	
	3. The employer must be engaged in an industry or activity affecting	10)
	interstate commerce	139
	is that are not ERISA plans	
	s that are not preempted by ERISA	
	child support lien takes priority over an ERISA interest	
	liation is barred under ERISA	
	beneficiaries' remedy for ERISA plan's misrep of its subro rights	
_ :		
VIII. ERISA A	ND TEXAS COMMON LAW EQUITABLE CONCEPTS, INCLUDING MADE WHOLE AN	ND
COMMON FUNI	D, IN AN INSURANCE FUNDED PLAN	143

A. ERISA does not automatically kill off Texas' made whole doctrine or common
fund doctrine because ERISA's savings clause preserves state regulation
1. Made whole doctrine and ERISA
a. Do not waive your common law made whole doctrine
2. Common fund doctrine and ERISA
IX. THE DOCUMENTS MATTER; GET THE SUMMARY PLAN DESCRIPTION AND THE EMPLOYEE
Welfare Benefit Plan
A. ERISA and the Summary Plan Description
1. Statutory requirement
2. The Summary Plan Description requirements; compare it to the underlying
policy
3. What constitutes a Summary Plan Description
4. Read the Employee Welfare Benefit Plan's subrogation provision
4. Read the Employee Wehale Beliefit Flair's sublogation provision 132
X. ERISA AND SELF-FUNDED EMPLOYEE WELFARE BENEFIT PLANS
A. The statutory authority
· · · · · · · · · · · · · · · · · · ·
B. Stop Loss coverage
1. And the issue of state regulation
2. And the issue of appropriate equitable relief
C. The first seminal self-funded case: FMC v. Holliday
D. Supreme Court: what's equity got to do with it?
E. Bad news (so far) from the 4th Circuit: Failing to sign subrogation reimbursement
forms terminates coverage
F. The Effect of Knudson and Sereboff: The Plan may seek equitable relief, including
imposing a constructive trust on identifiable funds
G. Overview of Cases on Appropriate Equitable Relief and the Plan's Remedies 163
1. Liability of the plan member
2. Liability of the plan member's attorney
H. The plan must plead and prove its ERISA status
I. Four practice tips
a. The subrogation questionnaires
b. Close out the subrogation interest at settlement
c. Know your risks and benefits
d. Ethics: Avoid dual representation of the client and plan 175
at Edition 11 fold dual representation of the effect and plan 11 for 17 fo
XI. ERISA'S PREEMPTION (OR NOT) OF FEDERAL OR STATE LAW CAUSES OF ACTION 175
A. State law causes of action and ERISA preemption
B. Federal law causes of action and preemption
C. The Common Fund doctrine and ERISA preemption
D. Preemption of state court jurisdiction, or not
E. Long Term Disability Policies
F. Additional research sources
1.7 Realional research sources
XII. USING THE DECLARATORY JUDGMENT ACT TO CONSTRUE AN AMBIGUOUS OR SILENT PLAN
DOCUMENT OR TO DETERMINE ENTITLEMENT TO RECOVERY

A. Federal actions authorized by ERISA	
B. Action in state court	182
XIII. NON-ERISA PLANS SUCH AS HMO'S, CHURCH-SPONSORED OR GOVERNMENT PLA	ANS, AND
INDIVIDUALLY PURCHASED HEALTH INSURANCE CONTRACTS	183
A. Non-ERISA plans	
B. HMO's	
C. Private health insurance	184
D. Government or church employer sponsored plans	
XIV. AUTOMOBILE POLICIES, INCLUDING PIP, MEDICAL PAYMENTS, UM/UIM, AND PI	ROPERTY
Damage	
A. Preserving the plaintiff's PIP	
B. Medical Payments Coverage on auto policies	
1. The Common Fund Doctrine	
2. The Made Whole Doctrine	
C. Uninsured/Underinsured Motorist Coverage	188
1. The Statutory Authority	
a. Preserving the UM/UIM carrier's subrogation rights	
b. Stowers and the UIM carrier	
c. Preserving the client's UM/UIM coverage free of subrogation	
i. When the subrogation interest is ambiguous about its i	ight
to subrogate to first party uninsured motorist coverage.	
ii. Because underinsured motorist coverage is first party	
coverage, not third	190
D. Vehicle Property Damage	
XV. COORDINATION OF BENEFITS AS A MEANS OF AVOIDING PAYMENT BY INSURERS	191
XVI. ASSIGNMENTS TO CREDITORS, LOPS, AND AGREEMENTS TO REPAY SUBROGATION	ı193
A. Assignments to creditors	
B. Letters of Protection	195
C. Agreements to Repay the Subrogation Interest	197
1. Ethical Issues if the client reneges or the recovery is inadequate	
2 Ethical Issues when the Plan is self-funded	199
3. Does a Reimbursement agreement confer more benefits to the Plan the	ıan a
Subrogation Agreement	201
4. Do not sign a Reimbursement Agreement which is broader that the P	lan or
the Summary Plan Description provisions	201
XVII. STATUTORY VIOLATIONS BY HEALTHCARE PROVIDERS AND STATUTORY VIOLAT	IONS BY
Subrogation Collection Agencies	201
A. Chapter 146, Civil Practice & Remedies Code and Balance Billing	201
B. Violations of Insurer Federal Fair Debt Collections Practices Act	203
C. Violations of the Texas Deceptive Trade Practices-Consumer Protection Ac	t 203
1. State law damages available to injured consumers	204

2. Extra-contractual damages may not be allowed in ERISA Plans	204
D. Violations by Hospitals of the Patient Protection and Affordable Care Act	205
XVIII. ADVICE TO ATTORNEYS	205
A. Communicating with the client	
1. At the first interview	
2. At the time of settlement	
3. If a lawsuit against the subrogee is necessary	
B. Communicating with the third party liability carrier	
1. At the time the file is opened	
2. At the time of settlement	
C. Communicating with the subrogated insurer or Self-Funded Health Plan	
1. At the time the file is opened	
2. During the course of the claim	
3. At the time of settlement	
D. Converting the money bad idea	
1. Penalties for conversion	
2. Protect yourself if the client does not want to repay	
3. Statute of limitations	
E. Health insurers who refuse to pay bills rather than pay and subrogate	
XIX. INDEMNIFICATION AND RELEASE DOCUMENTS	213
XX. APPENDIX	

HB 1869

Medicare Attorney Tool Kit overview

Medicare Recovery Worksheet

Medicare HIPAA Release

Medicare MMSEA Claimant Refusal to Release SSN

Medicare Claimant Declaration of no Medicare benefits or future medical payments

Medicare Alert regarding delays in reporting provisions and Dollar Thresholds

Patient Protection and Affordable Care Act Notice 2010-39 re: hospital bills

Subrogation and Liens

JUDITH A. KOSTURA

JUDGE, KOSTURA & PUTMAN, P.C. THE COMMISSIONER'S HOUSE AT HERITAGE SQUARE 2901 Bee Cave Road, Box L, Austin, Texas 78746

Telephone (512) 328-9099 Facsimile (512) 328-4132

<u>jkostura@prismnet.com</u> (subrogation; evenings) <u>jkostura@jkplaw.com</u> (client/firm business)

Licenses: Licensed by Texas Supreme Court: 1980; Licensed by Western District, Federal Court: 1988

Legal Practice: Judge, Kostura & Putman, P.C., www.jkplaw.com; 2004 to current

Sole Practitioner, plaintiff's personal injury practice 1990-2003 Binder & Kostura, plaintiff's personal injury practice 1985-1990

Sole practitioner, general civil practice 1980-1985

AV Rating by Martindale-Hubbell (highest ranking for competence and ethics)

Experience: Trucking Industry Collisions, Automobile Collisions, Dram Shop, Premises Liability, Wrongful Death, Burn Injuries, Driving While Intoxicated Injuries, Attack by Vicious Animals, Subrogation and Liens, Insurance Bad Faith

West Publishing Co.: Personal Injury Form Book on Disk: *Texas Personal Injury Petitions/FAST* Insurance Subrogation texts for American Association of Justice, Texas Trial Lawyers Association; CLE speaker on Ethics, Client Communications, Insurance Subrogation, for: American Association of Justice, Texas Trial Lawyers Association, UT School of Law, State Bar of Texas, University of Houston Law School, South Texas College of Law; Texas Advanced Paralegal Seminar; Capital Area Trial Lawyers Association; Travis County Bar Association. Course Director SBOT Damages February 2011; Course Director SBOT Advanced PI 2013

### **Professional Affiliations:**

Life Fellow, Texas Bar Foundation

Texas Trial Lawyers Association: Executive Committee and Nominating Committee (2005-2006), Communications Committee, ListServ Committee, CLE Planning Committee Texas Watch Champion of Justice 2005-2013

Capital Area Trial Lawyers Association (President 1999-2000, President Elect 1998-1999, Secretary Treasurer 1997-1998, Executive Committee current)

Travis County Bar Association, Board of Directors (1995-1998);

Lawyer Referral Service Board of Trustees through 2013 (Chair 1995-1998)

Pro Bono College of Law, over 100 hours of Pro Bono Public Service; 1992 and 1993

College of State Bar (various years)

Professional Honors: John Howie Spirit of Mentorship Award, Texas Trial Lawyers Association 2006

Scott Ozmun Trial Lawyer of the Year Capital Area Trial Lawyers Association 2011 Resolution Honoring Legislative Contribution Texas Trial Lawyers Ass'n 2013

Education: Doctor of Jurisprudence, University of Texas at Austin: 1980

Bachelor of Arts, With Honors, University of Texas : 1977

Personal: married to Tom Polk, Realtor, since 1982; mother of daughters Rachel and Kisa

The Author acknowledges the assistance of colleagues who send her opinions from across the state and nation. Especially prolific and insightful is Roger Baron, Professor of Law at the University of South Dakota, who can be followed at <a href="http://erisawithprofessorbaron.com/">http://erisawithprofessorbaron.com/</a>

#### SUBROGATION AND LIENS

I. OVERVIEW OF SUBROGATION, HISTORY, FEDERAL AND STATE BALANCING ACT, AND COMMON LAW EQUITABLE PRINCIPLES.

## A. History of state and federal regulation of insurance.

Subrogation is an element of insurance law. In 1944, the United States Supreme Court determined that "insurance" is a form of commerce subject to regulation; see United States v. South-Eastern Underwriters Assoc., 322 U.S. 533 (1944). thereafter, Congress passed the McCarran-Ferguson Act, 15 U.S.C.S. § 1011 and following. The McCarran-Ferguson Act granted authority to the states to regulate the "business of insurance." Various federal laws continued to govern the "peripherals of the industry (labor, tax, securities)." State laws which regulated the core nature of the insurance business therefore overrode most federal laws to the contrary. This paper is designed to analyze the myriad of state and federal statutes and cases on the topic of subrogation, from the standpoint of the plaintiff's personal injury practitioner.

In an attempt to harmonize the proliferation of insurance policies and laws, Congress passed the Employee Retirement and Income Security Act, commonly known as ERISA, in 1974. ERISA did not vitiate the McCarran-Ferguson's grant of state regulation; it did spawn a spate of lawsuits trying to determine which state laws qualify as state regulation (not-preempted by ERISA) and which laws deal with peripheral issues (preempted by ERISA). ERISA also recognized that some health plans are self-funded, not funded by insurance premiums, and those plans are exempt from state regulation.

The shifting of risk through the payment of premiums is the most fundamental principle of insurance. Subrogation is a bastardization of that risk-shifting principle. Therefore, subrogation should come within the "core business" of insurance and be subject to state regulation for all premium funded insurance policies. A Florida court traced the history and analysis:

[T]the court in *Pilot* looked to case law interpreting the phrase "business of insurance" under the McCarran-Ferguson Act. *Id.* This law, taken as a whole, provided three criteria for

determining whether a practice would fall under the "business of insurance." *Id.* Namely:

"[F]irst, whether the practice has the effect of transferring or spreading a policyholder's risk; second, whether the practice is an integral part of the policy relationship between the insurer and the insured; and third, whether the practice is limited to entities within the insurance industry." *Union Labor Life Ins. Co. v. Pireno*, 458 U.S. 119, 129, 102 S.Ct. 3002, 3009, 73 L.Ed.2d 647 (1982) (emphasis in original). *Id.* at 48-49.

However, more recently, in <u>Kentucky</u> <u>Ass'n of Health Plans, Inc. v. Miller</u>, 538 <u>U.S. 329</u>, 341-42 (2003), the Supreme Court receded from the McCarran-Ferguson factors, stating:

Today we make a clean break from the McCarran-Ferguson factors and hold that for a state law to be deemed a "law ... which regulates insurance" under § 1144(b)(2)(A), it must satisfy two requirements. First, the state law must be specifically directed toward entities engaged in insurance. See Pilot Life, supra, at 50, 107 S.Ct. 1549, UNUM, supra, at 368, 119 S.Ct. 1380; Rush Prudential, supra, at 366, 122 S.Ct. 2151. Second ... the state law must substantially affect the risk pooling arrangement between the insurer and the insured. Kentucky's law satisfies each of these requirements.

The majority of cases addressing state subrogation and collateral source statutes have determined that they are laws regulating insurance. In <u>FMC Corp. v. Holliday</u>, 498 U.S. 52, 60-61 (1990), the Supreme Court considered whether a Pennsylvania anti-subrogation statute was a law "regulating insurance" and held:

There no dispute that the is Pennsylvania law falls within ERISA's insurance saving clause.... Section 1720 directly controls the terms of insurance contracts by invalidating subrogation provisions that they contain. See Metropolitan Life Ins. Co. v. Massachusetts, 471 U.S., at 740-741, 105 S.Ct., at 2389-2390. It does not merely have an impact on the insurance industry; it is aimed at it. See Pilot Life <u>Ins. Co. v. Dedeaux</u>, 481 U.S. 41, 50, 107 S.Ct. 1549, 1554, 95 L.Ed.2d 39 (1987). This returns the matter of subrogation to state law.

Coleman v. BCBS of Alabama, Inc., No. 1D10-1366, (D. Ct of Appeal Florida, 1<sup>st</sup> Dist. - Dec. 8, 2010)

This paper reviews U.S. and Texas subrogation interests and liens in favor of Veterans Administration, Medicare, Medicaid, workers' compensation, Hospital Liens, or child support liens. It covers conventional/contractual subrogation interests, including **ERISA** Employee Welfare Benefit Plans and Non-ERISA Plans, Self-funded Pools, Private Health Insurance, Government Employer or Church Sponsored Plans, Medical Payments Coverage, Uninsured/Underinsured Motorist Coverage, Vehicle Property Damage, and HMO's. It also covers equitable subrogation imposed by law. It will also analyze the devastating effect of the Texas Supreme Court's decision in Fortis Benefits v. Cantu, 234 S.W.3d 642, 649 (Tex. 2007), No. 05-0791, on the made whole doctrine, and the success in limiting that opinion by the passage of HB 1869, signed into law by Gov. Perry on May 23, 2013, to be effective with causes of action accruing on or after 01/01/2014; see Liberty Mutual Ins. Co. v. Transit Mix Concrete & Materials Co., No. 06-12-00117-CV, (\_\_\_ S.W.3d \_\_\_ June 28, 2013) for discussion of the statute's effective date.

#### B. Definitions.

"Subrogation" has been defined as the "substitution of one person in the place of another with reference to a lawful claim, demand or right." Black's Law Dictionary.

Subrogation is the substitution of one person in the place of another, whether as creditor or as the possessor of some lawful claim, so that he who is substituted succeeds to the rights of the other in relation to the debt or claim. . . . By subrogation, a court of equity, for the purpose of doing exact justice between parties in a given transaction, places one of them, to whom a legal right does not belong, in the position of a party to whom the right does belong. 53 Tex.Jur.2d Subrogation § 1, at 429 (1964).

Subrogation has been characterized by Texas courts as a 'pure equity,' as a 'wholesome rule of

equity,' and as 'a doctrine belonging to an age of enlightened policy and refined, although natural justice.' *Chambers & Co. v. Little*, 21 S.W.2d 17, 22 (Tex. App.--Eastland 1929, writ ref'd); *O'Brien v. Perkins*, 276 S.W. 308, 315 (Tex. App.--Amarillo 1925), aff'd sub nom., *Shelton v. O'Brien*, 285 S.W. 260 (Tex.1926). But recent judicial struggles with the notion of "equity" rely little on notions of fairness.

Texas courts have always been particularly hospitable to the right of subrogation and have been in the forefront of upholding it. As Judge Brown declared in *Faires v. Cockerell*, 88 Tex. 428, 437, 31 S.W. 190, 194, 28 L.R.A. 528 (1895) (quoted in a 1974 opinion):

Perhaps the courts of no state have gone further in applying the doctrine of subrogation than has the court of this state...

The doctrine of subrogation is always given a liberal interpretation and is broad enough to include every instance in which one person, not acting voluntarily has paid a debt for which another was primarily liable and which in equity and good conscience should have been discharged by the latter. Galbraith-Foxworth Lumber Co. v. Long, 5 S.W.2d 162, 167 (Tex. App.--Dallas 1928, writ ref'd); Constitution Indemnity Co. v. Armbrust, 25 S.W.2d 176, 180 (Tex. App.--San Antonio 1930, writ ref'd); Independence Indemnity Co. v. Republic Nat'l Bank & Trust Co., 114 S.W.2d 1223 (Tex. App.--Dallas 1938, writ dism'd w.o.j.). ...

Where the court can give a policy a construction which, while preserving the protection given the insured under its terms, would also relieve the insurer from the increased hazard against which it undertook to provide, then such construction must be adopted, 'for such was the evident intent of the parties.' *Royal Ins. Co. v. Texas & G. Ry.*, 53 Tex. App. 154, 159, 115 S.W. 117, 120 (1909, writ ref'd).

McBroome-Bennett Plumbing, Inc. v. Villa France, Inc., and Westchester Fire Insurance Company, 515 S.W.2d 32, 36-37 (Tex. App. – Dallas 1974)



Also available as part of the eCourse <u>Workers' Compensation and SNTs, plus The View from HHSC</u>

First appeared as part of the conference materials for the  $10^{\hbox{\tiny th}}$  Annual Changes and Trends Affecting Special Needs Trusts session "Workers' Compensation and SNTs"