From: Andrew Kantor [mailto:AKantor@kantorlaw.net]
Sent: Wednesday, October 25, 2017 2:38 PM
To: EBSA, E-ORI - EBSA
Subject: RIN 1210-AB39

To Whom It May Concern,

My name is Andrew Kantor. I am an attorney working in southern California who specializes in representing plaintiffs who have been wrongfully denied employee benefits. A majority of my current practice involves ERISA disability denials.

As I'm sure you are aware, ERISA remedy pre-emption is extraordinarily harmful to claimants. Any insurance attorney can tell you that ERISA-governed insurers and administrators will freely and consistently deny rightful claims for benefits, because the incentive NOT to do so (in the form of extra-contractual damages) is stripped by ERISA. As such, it ends up being *good business* for ERISA insurers to deny righteous claims. If the claimant fights, the most the insurer risks is paying the benefits due anyway, and maybe a slap on the wrist in the form of attorneys' fees. If the claimant does not fight the denial, the insurer has effectively robbed its claimants of benefits without repercussion- and unfortunately, most claimants do not fight. As such, the deck is extraordinarily stacked against ERISA claimants, with no congressional legislation to repair this broken system anywhere in sight. And this is why the proposed regulations are so important, as it provides a more even playing field for ERISA claimants who desperately need it.

Further, these regulations help claimants and plan administrators understand their rights and obligations. They were proposed in the usual regulatory sense and there was sufficient time for all interested parties to weigh in during the approval process. Implementation of these regulations should not be delayed and will cause more bureaucratic confusion among plan administrators and claimants regarding their duties, rights and responsibilities. The new Regulations provide clarity and will avoid unnecessary litigation over issues that are not appropriately addressed in the 2002 Regulations.

Finally, I do not believe that premiums will rise as a result of these obligations. Rather, because the regulations put in place common sense rules that facilitate a productive, full, and fair "administrative" process during the claim submission and appeal period, the new regulations will reduce litigation and reduce the costs of the cases that do end up being litigated. Considering "ERISA imposes higher-than-marketplace quality standards" on claims administrators, the regulations set to go into effect January 1, 2018 simply bring more clarity to the standards that need to be met to fulfill an already existing responsibility. *Metropolitan Life Ins. Co. v. Glenn*, 554 U.S. 105, 115 (2008). If this causes costs or litigation to rise (which it should not), it is simply evidence that, prior to the new regulations, claims administrators were not abiding by the law already in place.

Sincerely, Andrew Kantor

Andrew M. Kantor, Esq.
Kantor & Kantor, LLP

19839 Nordhoff St.
Northridge, CA 91324
AKantor@kantorlaw.net
(818) 886-2525