1 2 3 4	MANATT, PHELPS & PHILLIPS, LLP CRAIG S. BLOOMGARDEN (Bar No. CA 11 11355 West Olympic Boulevard Los Angeles, CA 90064-1614 Telephone: (310) 312-4000 Facsimile: (310) 312-4224 Email: cbloomgarden@manatt.com	0241)		
5 6 7 8 9 10 11	RUPP, BAASE, PFALZGRAF, CUNNINGHADavid R. Pfalzgraf, Jr., pro hac vice pending Daniel E. Sarzynski, pro hac vice pending Charles D.J. Case, pro hac vice pending 1600 Liberty Building Buffalo, New York 14202 Telephone: (716) 854-3400 Facsimile: (716) 332-0336 Attorneys for NEW YORK STATE WORKERS' COMPENS			
12 13 14	SUPERIOR COURT OF THE STATE OF CALIFORNIA CITY AND COUNTY OF SAN FRANCISCO			
15 16 17 18 19 20 21 22	INSURANCE COMMISSIONER OF THE STATE OF CALIFORNIA, Applicant, vs. MAJESTIC INSURANCE COMPANY, Respondent.	MEMOR AUTHO NEW YO COMPE OBJECT REHABI	CPF-11-511261 RANDUM OF POINTS AND RITIES IN SUPPORT OF ORK STATE WORKERS' NSATION BOARD'S CIONS TO THE PROPOSED ILITATION PLAN FOR CIC INSURANCE COMPANY June 2, 2011 9:30 a.m. 301 Hon. Peter J. Busch	
23 24 25 26 27 28	300256097.1			

TABLE OF CONTENTS

•	INDEE OF CONTENTS		
2			
3	TABLE OF AUTHORITIESii		
4	FACTUAL BACKGROUND1		
	ARGUMENT3		
5	I3		
6	THE POLICE POWERS EXERCISED BY THE		
7	CALIFORNIA COMMISSIONER OF INSURANCE IN CONSERVATION ARE NOT WITHOUT LIMITS		
8	II		
9			
10	THE REHABILITATION PLAN FOR MAJESTIC IS ARBITRARY AND IMPROPERLY DISCRIMINATES AGAINST THE NYWCB		
11	III9		
12			
13	THE COMMISSIONER OF INSURANCE HAS BREACHED HIS DUTY AS TRUSTEE TO ACT		
14	FOR THE BENEFIT AND IN THE BEST INTEREST OF ALL POLICYHOLDERS AND CREDITORS		
15	IV10		
16	THE COURT SHOULD REJECT THE PLAN BECAUSE		
17	THE COOKT SHOULD RESIDENT THE TEAN BLCAGSE THE CONSERVATOR HAS FAILED TO SHOW THAT IT PROVIDES THE NYWCB WITH THE LIQUIDATION		
	VALUE OF ITS CLAIMS		
18			
19	V11		
20	IN A CONSERVATION PROCEEDING, LIQUIDATION IS A LAST RESORT AND SHOULD ONLY BE UNDERTAKEN		
21	WHEN ALL EFFORTS AT REHABILITATING THE INSOLVENT INSURANCE COMPANY HAVE FAILED		
22	CONCLUSION		
23	CONCLUSION 14		
24			
25			
26			
27			
28 s &	300256097.1 i		

MANATT, PHELPS & PHILLIPS, LLP ATTORNEYS AT LAW LOS ANGELES

MEMORANDUM OF POINTS AND AUTHORITIES IN SUPPORT OF NYWCB'S OBJECTIONS TO PROPOSED REHABILITATION PLAN

1	TABLE OF AUTHORITIES			
2				
3	CASES			
4	Carpenter v. Pacific Mut. Life Ins. Co., 10 Cal. 2d 307, 329 - 331 (1937)			
5 6	Commercial Nat. Bank v. Superior Court, 14 Cal. App. 4th 393 (2d Dist. 1993)			
7	In re Executive Life Ins. Co. v. Aurora National Life Assurance Co., 32 Cal. App. 4th 344, 358 (2d Dist. 1995)			
8 9	Foster v. Mut. Fire, Marine & Inland Ins. Co., 614 A.2d 1086, 1093-94 (Pa. 1992)10			
10	Grode v. Mut. Fire, Marine & Inland Ins Co., 572 A.2d 798, 804 (Pa. Commw. Ct. 1990)10			
11 12	Koken v. Fidelity Mut. Life Ins. Co., 907 A.2d 1149 (Pa. Commw. Ct. 2006)10			
13	Neblett v. Carpenter, 305 U.S. 297 (1938)1			
14 15	STATUTES			
16 17	Cal. Ins. Code § 1010 et. seq. (Deering 2011) 3 Cal. Ins. Code § 1011 (Deering 2011) 11 Cal. Ins. Code § 1012 (Deering 2011) 11 Cal. Ins. Code § 1016 (Deering 2011) 11 Cal. Ins. Code § 1023 (Deering 2011) 9 Cal. Ins. Code § 1025 (Deering 2011) 9 Cal. Ins. Code § 1033 (Deering 2011) 6, 9 Cal. Ins. Code § 1043 (Deering 2011) 12 Cal. Ins. Code § 1057 (Deering 2011) 4, 6, 9			
18 19				
20	12 NYCRR § 317.20 (McKinney 2011)1			
21 22	OTHER AUTHORITIES			
23	1 COUCH ON INS. § 5:29			
24	Company Insolvencies, at 5, 448 (2009)			
25				
26				
27				
28 PS &	300256097.1 ii			

MANATT, PHELPS &
PHILLIPS, LLP
ATTORNEYS AT LAW
LOS ANGELES

MEMORANDUM OF POINTS AND AUTHORITIES IN SUPPORT OF NYWCB'S OBJECTIONS TO PROPOSED REHABILITATION PLAN

2

3 4

6

8

7

9

10 11

12

13

14

15

16

17 18

19

20

21 22

23

24

25

26

27 28

MEMORANDUM OF POINTS AND AUTHORITIES

The New York State Workers' Compensation Board ("NYWCB") submits this Memorandum in support of its objections to the proposed Rehabilitation Plan ("Plan") for Majestic Insurance Company ("Majestic"), submitted to this Court by the California Commissioner of Insurance ("Conservator"). NYWCB objects to the Plan on the grounds that it: (1) is discriminatory in that in specifically excludes the claims of the NYWCB prior to the NYWCB even submitting its claims for consideration; (2) is an abuse of discretion because the Conservator did not put the definitive agreements with AmTrust out for competitive bid; (3) is an abuse of discretion because the Conservator approved AmTrust as purchaser based upon AmTrust's commitment to keep jobs and resources in the State of California, instead of what is in the best interests of policyholders and creditors; (4) is an abuse of discretion because the Conservator in his role as trustee has failed to pursue less drastic remedies that were available to him, and remain available to him, in order to rehabilitate Majestic for the protection of its policyholders and creditors; (5) and is an unconstitutional taking because the Conservator has not shown that the Plan provides the NYWCB with at least the liquidation value of its claims.

FACTUAL BACKGROUND

By way of background, and as more fully set forth in the accompanying Declaration of Michael Papa (the "Papa Declaration"), the NYWCB is a governmental agency created pursuant to the New York State Workers' Compensation Law ("NYWCL"). Pursuant to regulations promulgated by the Commissioner of the NYWCB, attendant to NYWCL, including 12 NYCRR § 317.20, the NYWCB is the successor in interest to a number of group self-insured trusts ("GSITs"), through which employers provided workers' compensation coverage to their employees through self-funded insurance trusts, and through which excess coverage is in force through private carriers, among them Majestic. The NYWCB's objections to the Plan thus are in its capacity as a Majestic policyholder. Upon information and belief, the NYWCB is the largest claimant in these proceedings.

On December 9, 2009, the NYWCB filed suit in the State of New York Supreme Court, Albany County, against Compensation Risk Managers, LLC ("CRM") (the parent of Majestic), Majestic, and numerous other related entities. *See* Papa Declaration at ¶ 59. In this complaint and the NYWCB's amended complaint, which was filed on March 26, 2010, the NYWCB asserted claims against the defendants for, among other things, breach of contract, breach of fiduciary duty, breach of duty of good faith and fair dealing, fraud in the inducement, fraud, unjust enrichment, deceptive business practices, false advertising, and conversion. *See* Papa Declaration at ¶ 66.

CRM's actions of mismanagement included placing excess insurance coverage for the GSITs with Majestic, which was owned by CRM, without obtaining excess insurance quotes that would have cost less in premiums to the GSITs, and without notifying the NYWCB of the relationship between CRM and Majestic. This was done in violation of the New York Workers' Compensation Law ("WCL"), as well as in violation of CRM's fiduciary duty to the GSITs and for the purpose of financially benefiting CRM and Majestic. *See* Papa Declaration at ¶ 62-63.

In July 2010, subsequent to the reduction of Majestic's AMBest rating, the Conservator began talks with Majestic and the NYWCB aimed at settling the New York litigation. *See* Papa Declaration at ¶ 75. Through these negotiations, a settlement plan was reached whereby Bayside Capital Partners, LLC ("Bayside") agreed to purchase Majestic. *Id.* at ¶ 69. This plan required the approval of the California Department of Insurance ("CADOI") in order to be finalized. However, after eight months of inaction on the part of the CADOI, during which Majestic continued to incur additional losses, Bayside withdrew from the settlement on March 1, 2011. *Id.* at ¶ 83-84.

ARGUMENT

I. THE POLICE POWERS EXERCISED BY THE CALIFORNIA COMMISSIONER OF INSURANCE IN CONSERVATION ARE NOT WITHOUT LIMITS

The California Insurance Code provides that the Commissioner of Insurance has the power to seize the assets of an insurance company operating in such a deficient financial

'.1

condition that it is hazardous to its policyholders, creditors, and the general public. *See* Cal. Ins. Code § 1010 *et. seq.* Although the Commissioner is authorized to exercise the state's police powers in rehabilitating and/or liquidating the insurance company in conservation, these powers are limited under the law. *See Carpenter v. Pacific Mut. Life Ins. Co.*, 10 Cal. 2d 307, 329 - 331 (1937); *Commercial Nat. Bank v. Superior Court*, 14 Cal. App. 4th 393 (2d Dist. 1993).

The plan to rehabilitate the insurance company in conservation must not be arbitrary, nor may it improperly discriminate against policyholders within the same class. *See Carpenter*, 10 Cal. 2d at 329. Further, the Commissioner must act as a trustee for the benefit of all creditors and all interested persons while administering the insurance company in conservation. *See* Cal. Ins. Code § 1057. Finally, the conservation proceedings must favor rehabilitation over liquidation if at all possible, with liquidation being viable only as an absolute last resort. *See Carpenter*, 10 Cal. 2d at 329. The court reviews the actions of the Commissioner in administering a rehabilitation plan for abuse of discretion. *In re Executive Life Ins. Co. v. Aurora National Life Assurance Co.*, 32 Cal. App. 4th 344, 358 (2d Dist. 1995).

II. THE REHABILITATION PLAN FOR MAJESTIC IS ARBITRARY AND IMPROPERLY DISCRIMINATES AGAINST THE NYWCB

In reviewing a rehabilitation plan of an insurance company in conservation, the court is vested with the authority to determine whether the plan is impermissibly arbitrary. *See Executive Life Ins.*, 32 Cal. App. 4th at 358. A plan may be deemed arbitrary if it is unsupported by a rational basis or is contrary to a specific statute. *Id.* In order for a plan to avoid a determination that it is arbitrary, it must be formulated only after a diligent effort to ascertain the best possible outcome for all potential creditors, and must follow the guidelines of the California Insurance Code for the disposition of assets of an insurance company in conservation.

300256097.1

In *Executive Life Ins.*, a portion of the rehabilitation plan involved the sale of a portfolio of high-yield securities with low or no credit rating, *i.e.*, junk bonds. The Commissioner planned to sell this portfolio in order to begin issuing new life insurance policies through the new owners of the portfolio of the junk bonds. Although the Commissioner was engaged in talks with one proposed buyer of the portfolio, Altus, for a period of time, and entered into a publicized "Definitive Agreement" with Altus concerning the buyer's plans for reinvestment of the bonds and issuance of new life insurance policies, the Commissioner permitted a rigorous bidding process involving several proposed buyers.

After several months of reviewing bids from proposed buyers, including Altus, the Commissioner, with the court's approval, selected Altus as the winning bidder. Although another proposed buyer had been selected as the potential winner, this alternate buyer was unable to overcome certain concerns over its ability to advance funds to the new life insurance policies, which would have made them less dependent on the performance of the junk bond portfolio. The court found that this rigorous and diligent process, which involved several rounds of bidding and continuous involvement from the trial court overseeing the conservation proceeding, was sufficient to overcome a challenge of arbitrariness.

In this case, by contrast, the actions of the Conservator and the California Department of Insurance ("CADOI") in formulating the Majestic Rehabilitation Plan have been arbitrary. As discussed more fully below, and in the accompanying Papa Declaration, for approximately nine months prior to the Conservator commencing this proceeding, the Conservator, through the CADOI, engaged in discussions with the NYWCB regarding a proposed settlement of the NY Litigation, which would have upgraded Majestic's AMBest ratings and effectively restored it to a sound financial operating position. *See* Papa Declaration at ¶ 75-83.

Specifically, the NYWCB believes the Conservator delayed settlement of the NY Litigation (as defined in the Papa Declaration, ¶ 4) and used the delay to build a case to bring Majestic into conversion, in order to give a preferential deal to AmTrust based on AmTrust's commitment to keep jobs and resources in California, all of which was to the detriment of the policyholders and creditors of Majestic. *See* Papa Declaration at ¶ 70-71, 88. Based on the Conservator and the CADOI's conduct during the nine-month negotiation process, it appears that there never was an intention of approving a settlement with the NYWCB, and that the nine months of review was a pretext for the real goal of delaying and eventually denying the proposed settlement with the company that initially considered acquiring Majestic -- Bayside Capital Partners, LLC ("Bayside"). *Id*.

In July 2010, the NYWCB, Majestic, and Consolidated Risk Management, LLC, ("CRM") resolved (at least preliminarily) the NY Litigation via a Memorandum of Understanding ("MOU"). Pursuant to the MOU, Majestic would have been sold to Bayside. *See* Papa Declaration at ¶ 101 - 104. The settlement outlined in the MOU would have eliminated the source of AMBest's downgrade of Majestic's rating which, as explained further below, was the primary reason for Majestic's financial decline. *Id.* With Majestic's rating improved, the premium inflow to Majestic would have been restored. This would have eliminated the majority of the basis for this conservation. *Id.* The settlement, however, was subject to the approval of the CADOI. Instead, and as a result of CADOI's inaction for nine months, Bayside withdrew from the transaction. *Id* at ¶ 80 – 84. While NYWCB had been willing to accept alternative settlement compensation, AmTrust and CADOI have excluded NYWCB's claims from the Majestic liabilities that AmTrust will assume under the Plan if approved by this Court. *Id* at ¶ 85 – 91.

In contrast to the transparency and diligence with which the commissioner pursued rehabilitation arrangements in *Executive Life Ins.*, in this case the Plan was negotiated in secret, to

300256097.1

the detriment of NYWCB. Furthermore, the Conservator has set forth no proof that the definitive agreements with AmTrust have been put out to bid, as was done in Executive Life Ins. The result is that AmTrust will assume all of Majestic's assets but none of its New York liabilities. See Papa Declaration at $\P 87 - 91$. No legitimate effort was made by the Conservator or the CADOI to investigate whether allowing the settlement involving NYWCB, Bayside, and Majestic to go forward would have been equally beneficial to Majestic's policyholders and creditors, to which the Conservator is legally bound as a fiduciary. See Cal. Ins. Code §1057, Papa Declaration at ¶85. Thus, the Plan should be rejected as arbitrary.

A rehabilitation plan also must not improperly discriminate between holders of the same type of policy. All policyholders are placed into the same priority level of claims in a conservation proceeding, and all claimants (including policyholders) are entitled to share ratably with other claimants within their class. See Cal. Ins. Code § 1033. A rehabilitation plan must adhere to this requirement. Discrimination between different types of policies is justified only "if it is founded on a rational basis related to effecting a successful rehabilitation," i.e., if certain types of policies were unprofitable to the insurance company and needed to be restructured in order to return the insurance company to a favorable financial position. Commercial National Bank v. Superior Court, 14 Cal. App. 4th 393, 404 (2d Dist. 1993), citing Carpenter, 10 Cal.2d at 336-337. A rehabilitation plan is, however, impermissibly discriminatory if it does not treat policyholders of the same type of policy equally. *Id*.

In Commercial National Bank, the rehabilitation plan proposed by the Commissioner of Insurance established a valuation system for the claims of policyholders of certain guaranteed investment contracts involving municipal bonds, or muni-GICs. See Commercial National Bank, 14 Cal. App. 4th at 404. This valuation system contained two tiers that treated holders of muni-GICs differently from holders of other GICs, by valuing the

26

27

muni-GICs under a different formula than other GICs. The Court of Appeals stated that this portion of the plan violated the requirement that holders of the same types of policies be treated equitably, and thus was impermissibly discriminatory. *Id*.

In this case, the Plan impermissibly discriminates against New York policyholders, and specifically against the NYWCB as a policyholder. *See* Papa Declaration at ¶88 – 93. This impermissible discrimination is yet another example of the Plan's arbitrariness, in contravention to the *Carpenter* standard for rehabilitation plans. Majestic's financial difficulties are a result of its inability to settle the litigation involving NYWCB. The Conservator has stated in conversations with NYWCB's declarant, Michael Papa, that much of the problem with Majestic is the "black cloud hanging over it as a result of the NY Litigation." *Id.* at ¶78. The decline in Majestic's revenues was caused in large measure by the decline of its AM Best rating in 2009. AM Best's statement, effective December 16, 2009, which downgraded Majestic from A - to B++, indicates that the basis for the downgrade was the NY Litigation. *Id.* at ¶ 96. This downgrade, which occurred immediately prior to Majestic's renewals, caused Majestic's premium renewals to decline. *Id.*

The Declaration of Ronald A. Dahlquist submitted in support of the proposed Plan states that Majestic failed to properly administer its liabilities and assets and did nothing to stop the company's decline when it began in December 2009. *See* Dahlquist Declaration paragraph 8(e). However, as soon as AM Best downgraded Majestic because of the NY Litigation, Majestic approached the NYWCB and the Office of the Attorney General of New York State about settlement. Also, the NYWCB understands and believes that CRM engaged in discussions with AMBest and convinced it to hold off a further downgrading of Majestic pending settlement negotiations with the NYWCB. *See* Papa Declaration at ¶ 99 - 100.

MANATT, PHELPS & PHILLIPS, LLP

ATTORNEYS AT LAW

LOS ANGELES

Rather than take the appropriate action in response to this decline, which would have been to approve the settlement of the NYWCB litigation, the Plan seeks to transfer substantially all of Majestic's assets into AmTrust, but specifically excludes from the transaction Majestic's liability in the NYWCB action. This is arbitrary and discriminatory against the NYWCB as a policyholder. The New York policyholder trusts did not cause Majestic's financial downturn, and effectively excising Majestic's liability to the NYWCB concerning these policyholder trusts is an action that is unrelated to Majestic's quest to return to financial stability. Instead, it is an action which arbitrarily discriminates against the NYWCB, along with other New York policyholders.

Under the Plan, with the limited exception of the \$15 million that will remain in the estate, all of the excessive premiums that were paid over to Majestic by the GSITs will be turned over to AmTrust, and the Plan specifically carves out the transfer of any New York-based liabilities. *See* Papa Declaration at ¶ 90 – 91, 104. This is impermissibly discriminatory against New York policyholders. When coupled with the fact that, but for the Conservator and the CADOI's failure to approve the settlement involving Majestic and NYWCB, there would be no basis for the instant conservatorship, the Plan becomes especially discriminatory against New York policyholders and the NYWCB.

Additionally, the Plan does not "materially improve the current security position of Majestic's [New York] policyholders," as Majestic already has sufficient assets to meet all of the obligations of the Majestic policyholders, and the Plan would result in the \$35 million statutory deposit currently held by the New York State Department of Insurance being returned to AmTrust. *See* Papa Declaration at ¶ 105. In reality, the Plan materially decreases the protection for claimants in New York, with no rational basis for doing so. Thus, the Plan is arbitrarily discriminatory.

300256097.1

16

17

18

19 20

21

22 23

24

25

26

27 28

MANATT, PHELPS & PHILLIPS, LLP

ATTORNEYS AT LAW

LOS ANGELES

300256097.1

III. THE COMMISSIONER OF INSURANCE HAS BREACHED HIS DUTY AS TRUSTEE TO ACT FOR THE BENEFIT AND THE BEST INTEREST OF ALL POLICYHOLDERS AND

The Commissioner of Insurance, acting as the conservator of an insolvent insurance company, is "deemed a trustee for the benefit of all creditors and other persons interested in the estate of the person against whom the proceedings are pending." Cal. Ins. Code § 1057. When read together with Sections 1023 and 1025 of the California Insurance Code (dictating the form of insolvency proceedings) and Section 1033 (requiring that claimants share ratably with other claimants within the same class), it is understood that "the insolvency trustee has a fiduciary duty to effect a pro rata distribution to all allowed policyholder claimants." Commercial National Bank, 14 Cal. App. 4th at 409.

This fiduciary duty is embodied in the requirement that rehabilitation plans be neither arbitrary nor impermissibly discriminatory. Further, this precludes the Commissioner from "reducing the value of [insurance policy contracts] in order to achieve objectives extraneous to the entitlements of policy owners." Id. The Commissioner's primary duty in a conservation proceeding is to protect the interests of <u>all</u> policyholders and creditors and to ensure that the rehabilitation plan treats them equitably.

As discussed more fully herein, the Conservator's actions in this case are designed to "achieve objectives extraneous to the entitlements of the policy owners." The real goal of the Conservator and the CADOI appears to have been to allow AmTrust to obtain all of the assets and simultaneously escape NYWCB's action in exchange for keeping California employees employed and maintaining California-based obligations, conditions to which Bayside would not commit. See Papa Declaration at ¶ 93. It appears that the Conservator and the CADOI delayed approval of the NYWCB settlement for nine months in order to allow Majestic to decline such that an

Majestic's policyholders and creditors.

IV.

12

11

14

13

15 16

17

18

19 20

21

22 23

24

25 26

27

28

MANATT, PHELPS & PHILLIPS, LLP

ATTORNEYS AT LAW

LOS ANGELES

300256097.1

delay").

10

argument for conservation could better be made. Id. at 84. This was an improper basis for

placing Majestic into conservation, and violates the Conservator's duties as a fiduciary to

THE COURT SHOULD REJECT THE PLAN BECAUSE THE

of rehabilitation. Carpenter v. Pac. Mut. Life Ins. Co. of Cal., 10 Cal. 2d 307, 335-336, 74 P. 2d

761, 777-778 (Cal. 1938), aff'd sub nom Neblett v. Carpenter, 305 U.S. 297 (1938). This

requirement is rooted in the constitutional prohibition against governmental takings, Neblett v.

Carpenter, 305 U.S. 297 (1938), and has been applied by courts in rehabilitation proceedings

throughout the country. See, e.g., In re Executive Life Ins. Co., 38 Cal. Rptr. 2d 453, 480 (Cal.

Ct. App. 1995) (applying Carpenter); Foster v. Mut. Fire, Marine & Inland Ins. Co., 614 A.2d

1086, 1093-94 (Pa. 1992) ("Under [Carpenter], creditors must fare at least as well under a

rehabilitation plan as they would under a liquidation[.]"); Koken v. Fidelity Mut. Life Ins. Co., 907

A.2d 1149 (Pa. Commw. Ct. 2006) (court approved rehabilitation plan after finding plan gave

policyholders at least what they would have received under a forced liquidation); Grode v. Mut.

Fire, Marine & Inland Ins Co., 572 A.2d 798, 804 (Pa. Commw. Ct. 1990) (a rehabilitation plan

must be viewed in light of the Carpenter rule that it may not give parties worse treatment than

they would receive in liquidation); NAIC, Receivers Handbook for Insurance Company

Insolvencies, at 5, 448 (2009) (a rehabilitation plan should not give policyholders and creditors

worse treatment than they would receive in liquidation); 1 COUCH ON INS. § 5:29 (rehabilitation

plan objector must receive "the liquidated value of his contract rights without any unreasonable

CONSERVATOR HAS FAILED TO SHOW THAT IT PROVIDES THE NYWCB WITH THE LIQUIDATION VALUE OF ITS CLAIMS

Policyholders must receive at least the liquidation value of their claims from a plan

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

Here, the Conservator has failed to demonstrate that the Plan provides the NYWCB with at least the liquidation value of its claims. Instead, the Conservator has improperly predetermined the NYWCB claims prior to their even being submitted. See Papa Declaration at ¶ 117. For this reason, before ruling on the Plan the Court should order the Conservator to demonstrate that the NYWCB and all other policyholders will receive under the Plan, at a minimum, the liquidation value of their claims.

IN A CONSERVATION PROCEEDING, LIQUIDATION IS V. LAST RESORT AND SHOULD ONLY BE UNDERTAKEN WHEN ALL EFFORTS AT REHABILITATING THE INSOLVENT INSURANCE COMPANY HAVE FAILED

In a conservation proceeding, the Commissioner not only has fiduciary duties to policyholders and creditors of the insolvent insurance company, but also has a duty to the general public to preserve the insurance company as a going concern if at all possible. See Carpenter, 10 Cal.2d at 329. In Carpenter, the Supreme Court of California stated that "insurance is a public asset, a basis of credit, and a vital factor in business activity . . . [and] the public has a grave and important interest in preserving the business if that is possible. Liquidation is a last resort." Id. (emphasis added). If an insurance company is liquidated, it would "immeasurably [injure] many of its policyholders." Id. For these reasons, rehabilitation plans that do not include liquidation of the insolvent insurance company's assets are vital.

The structure of the California Insurance Code reflects this obvious preference for rehabilitation over liquidation. Specifically, Section 1011 requires that the Commissioner of Insurance be appointed as conservator of an insolvent insurance company, and be vested with the control of the insurance company necessary to return it to a profitable status. See Cal. Ins. Code § 1011. Section 1012 provides for a phase of state control which must last until the insolvent insurance company evinces an ability to conduct its own business affairs in a profitable manner. See Cal. Ins. Code § 1012. This phase of state control allows the Commissioner time to 300256097.1

rehabilitate the insurance company and instill procedures designed to maintain its profitability. Section 1016 allows the Commissioner to seek leave from the court to liquidate an insurance company in conservation only if further efforts of rehabilitation under state control "would be futile." Cal. Ins. Code § 1016. Section 1043 embodies the Commissioner with the duty to rehabilitate the insolvent insurance company through mutualization, reinsurance, or other "rehabilitation agreements." Cal. Ins. Code § 1043.

When read together, these sections create a strong presumption toward rehabilitation over liquidation, if at all possible, and impose on the Commissioner a duty to avoid liquidation at nearly all cost. *See Carpenter*, 10 Cal.2d at 331. If a viable avenue for rehabilitation exists that can avoid extinguishing the insurance company as a going concern, it must be pursued before liquidation can be considered. *Id*.

Here, while the Plan is styled as a rehabilitation, it is in effect a *de facto* liquidation of Majestic, as its policies will be rewritten by AmTrust and a scant \$15 million will be left in Majestic as assets for distribution to general creditors. *See* Papa Affidavit at ¶ 122. This is unnecessary in light of Majestic's current financial condition, especially considering California's clear preference for rehabilitation plans which allow the insolvent insurance company to continue its business as a going concern.

The Plan is premised upon the results of the examination of Majestic as set forth in the Dahlquist declaration. Dahlquist relies upon an alleged \$46.4 million underfunding of reserves and a drop in premiums from \$150 million in December 2009 to \$84 million in December 2010. As a result of the premium decline, Dahlquist alleges Majestic's expense ratio is above 50%, with its surplus declining at a rate of \$1.5 million per month. *See* Papa Declaration at ¶ 107.

300256097.1

PHILLIPS, LLP
ATTORNEYS AT LAW

LOS ANGELES

However, the NYWCB believes that no increase in Majestic's reserves is necessary. The fact that AmTrust is willing to accept only \$26 million above current reserve levels indicates that Majestic's reserve deficiency is not \$46.4 million. See Papa Declaration at ¶ 108 - 113. A better solution than the Plan – a solution that would avoid the *de facto* liquidation of Majestic – would be for the Conservator to approve a settlement of the NY Litigation. Settlement would allow for Majestic to move on from the NY Litigation, improve its AM Best rating, and rebuild its revenues and book of business without the drastic step of liquidating its business. Id. While the Plan is styled as a rehabilitation, it is, in fact a liquidation of Majestic's business. Majestic will no longer exist and millions of dollars in claims against Majestic will go unpaid, prejudicing the NYWCB. *Id*. /// 11.1 /// /// /// /// /// 300256097.1

MANATT, PHELPS &
PHILLIPS, LLP
ATTORNEYS AT LAW
LOS ANGELES

CONCLUSION

Based on the foregoing, the NYWCB respectfully requests that this Court enter an order rejecting the Plan. In the alternative, the NYWCB respectfully requests that this Court (a) permit limited discovery and set an evidentiary hearing with respect to the issues raised in the NYWCB's Objections, (b) defer ruling on the Conservator's Motion pending that hearing and the Conservator's both putting the definitive agreements with AmTrust out for competitive bid, and demonstrating that policyholders will receive at least the liquidation value of their claims under the Plan, and (c) strike Section 7.1(c) of the Plan and order that New York's statutory deposit (rather than being turned over to a subsidiary of AmTrust) be increased by that portion of the claimed \$46.4 million reserve deficiency that is attributable to the New York claims.

12 13

1

2

3

4

5

6

7

8

9

10

11

Dated: May 18, 2011

MANATT, PHELPS & PHILLIPS, LLP

14

15

16

17

18

19

20

2122

23

24

25

26

2728

300256097.1

RUPP, BAASE, PFALZGRAF, CUNNINGHAM & COPPOLA LLC

David R. Pfalzgraf, Jr., pro hac vice pending Daniel E. Sarzynski, pro hac vice pending Charles D.J. Case, pro hac vice pending

Attorneys for NEW YORK STATE WORKERS' COMPENSATION BOARD

1 PROOF OF SERVICE 2 I, Luana R. Washington, declare as follows: 3 I am employed in Los Angeles County, Los Angeles, California. I am over the age of eighteen years and not a party to this action. My business address is MANATT, PHELPS & PHILLIPS, LLP, 11355 West Olympic Boulevard, Los Angeles, California 90064-1614. 4 On May 20, 2011, I served the within: 5 MEMORANDUM OF POINTS AND AUTHORITIES IN SUPPORT OF NEW YORK STATE WORKERS' 6 COMPENSATION BOARD'S OBJECTIONS TO THE 7 PROPOSED REHABILITATION PLAN FOR MAJESTIC INSURANCE COMPANY 8 on the interested parties in this action addressed as follows: 9 SEE ATTACHED SERVICE LIST 10 11 X (BY OVERNIGHT MAIL) By placing such document(s) in a sealed envelope, for collection and overnight mailing at Manatt, Phelps & Phillips, LLP, 12 Los Angeles, California following ordinary business practice. I am readily familiar with the practice at Manatt, Phelps & Phillips, LLP for collection and processing 13 of overnight service mailing, said practice being that in the ordinary course of business, correspondence is deposited with the overnight messenger service, 14 Federal Express, for delivery as addressed. 15 (BY ELECTRONIC MAIL) By transmitting such document(s) electronically X 16 from my e-mail address, LWashington@manatt.com at Manatt, Phelps & Phillips, LLP, Los Angeles, California, to the person(s) at the electronic mail addresses 17 listed above. The transmission was reported as complete and without error. 18 I declare under penalty of perjury under the laws of the State of California that 19 the foregoing is true and correct and that this declaration was executed on May 20, 2011, at Los Angeles, California. 20 21 22 23 24 25 26 27 28 300254729.1 MANATT, PHELPS &

PROOF OF SERVICE

PHILLIPS, LLP

ATTORNEYS AT LAW LOS ANGELES

1	<u>SERVICE LIST</u>
2	
3	Thomas J. Welsh, Esq. Orrick, Herrington & Sutcliffe LLP
4	400 Capitol Mall, Suite 3000 Sacramento, CA 95814
5	Telephone: 916-447-9200 Fax: 916-329-4900
6	Email: tomwelsh@orrick.com
7	Kristian D. Whitten, Esq. Deputy Attorney General
8	455 Golden Gate, Suite 11000 San Francisco, CA 94102
9	Telephone: 415-703-5589 Fax: 415-703-5480
10	Email: Kris.Whitten@doj.ca.gov
11	Jon Holloway Conservation Manager
12	Majestic Insurance Company in Conservation 101 California Street, 22nd Floor
13	San Francisco, CA 94111 Telephone: 415-362-7000
14	Email: hollowayj@caclo.org
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	300254729.1
MANATT, PHELPS & PHILLIPS, LLP ATTORNEYS AT LAW	PROOF OF SERVICE
Los Angeles	