

District Courts in the Fourth Circuit Run Full Speed Ahead with Equitable Estoppel Claims

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When a claimant brings a lawsuit seeking benefits under an employee benefit plan pursuant to **ERISA** § 502(a)(1)(B), one of the remedies available to the Court is a remand back to the plan fiduciary for further review. But under what circumstances is a remand warranted? Certainly, if the Court finds that the plan fiduciary abused its discretion or committed a procedural error, remand may be ordered if further investigation is necessary before an award can be evaluated.

In any event, as explained by the Court in [*Hooks v. Hartford Life and Accident Ins. Co.*, 2012 U.S. Dist. LEXIS 150536 \(M.D. Ala. October 18, 2012\)](#), a claimant is not entitled to a remand until the Court has reviewed the fiduciary's determination in the first place. In *Hooks*, the plaintiff submitted a claim for long-term disability benefits under her employer's benefit plan. After her claim was denied by the claims administrator, the plaintiff requested an administrative appeal, and the claim administrator upheld its denial on appeal. Subsequently, the Social Security Administration ("SSA") approved plaintiff's claim for Social Security disability benefits. Plaintiff requested that the claims administrator re-open its review to consider this information, but the claims administrator declined. The plaintiff filed suit pursuant to ERISA § 502(a)(1)(B), and in connection therewith, moved for a remand, for the purpose of having the SSA's decision reviewed and considered by the claims administrator.

The Court declined to order a remand, focusing on the limit of its scope of review: The Court reviews the claims administrator's decision based upon the information it had at the time. Accordingly, the Court must review the fiduciary's decision before making any decision to remand. Implicit in the Court's holding was the recognition that, if the claims administrator abused its discretion, a remand may be warranted, but if the claims administrator did not abuse its discretion, based upon the information it had at the time, its decision can be upheld, and a claimant cannot force the re-opening for further information to be considered.

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