

# SUPREME COURT OF THE UNITED STATES

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IN THE SUPREME COURT OF THE UNITED STATES

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GIANINNA GALLARDO, AN )  
INCAPACITATED PERSON, BY AND )  
THROUGH HER PARENTS AND )  
CO-GUARDIANS, PILAR VASSALLO AND )  
WALTER GALLARDO, )  
                                Petitioner, )  
                                v. ) No. 20-1263  
SIMONE MARSTILLER, IN HER OFFICIAL )  
CAPACITY AS SECRETARY OF THE )  
FLORIDA AGENCY FOR HEALTH CARE )  
ADMINISTRATION, )  
                                Respondent. )  
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Pages: 1 through 105  
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13    ADMINISTRATION,                        )

14                                 Respondent.                    )

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16                                 Washington, D.C.

17                                 Monday, January 10, 2022

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19           The above-entitled matter came on for oral

20    argument before the Supreme Court of the United

21    States at 10:00 a.m.

22

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25

1 APPEARANCES:

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3 behalf of the Petitioner.

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7 supporting the Petitioner.

8 HENRY C. WHITAKER, Solicitor General, Tallahassee,  
9 Florida; on behalf of the Respondent.

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P R O C E E D I N G S

(10:00 a.m.)

CHIEF JUSTICE ROBERTS: Justice Sotomayor is participating remotely this morning.

We'll hear argument this morning in Case 20-1263, Gallardo versus Marstiller.

Mr. Gowdy.

ORAL ARGUMENT OF BRYAN S. GOWDY

ON BEHALF OF THE PETITIONER

MR. GOWDY: Mr. Chief Justice, and may it please the Court:

Medicaid provides a benefit to persons needing medical care. It is not a loan to be repaid later. The anti-lien and anti-recovery provisions, part of the original 1965 Medicaid law, reflect this policy by prohibiting states from taking any property belonging to a beneficiary, including her third-party liabilities.

But, in 1968, Congress, in subparagraphs (A) and (B), established a limited pool of third-party liabilities from which a state could seek reimbursement for Medicaid expenses. States

1 were directed, and I quote, "to ascertain the  
2 legal liability of third parties to pay for  
3 care and services available under the plan" and  
4 "to seek reimbursement to the extent of such  
5 legal liability."

6 A liability for future medical  
7 expenses does not pay for care available under  
8 the Medicaid plan and, thus, is not part of the  
9 pool of reimbursement funds.

10 The procedural tools enacted by  
11 Congress after 1968 did not change the pool of  
12 reimbursement funds. To the contrary,  
13 subparagraph (H) confirms that a state acquires  
14 only a beneficiary's rights to third-party  
15 payments, and I quote, "for health care items  
16 or services furnished" to the beneficiary.

17 Finally, Florida's isolated reading of  
18 the assignment clause cannot be right because  
19 it forces beneficiaries to make lifetime  
20 assignments, leading to absurd results that  
21 convert Medicaid from a benefit to a loan.

22 JUSTICE THOMAS: Counsel, the -- the  
23 limitations that you would apply in this case  
24 to the assignment, would you also apply it to  
25 child support?

1           MR. GOWDY: They apply the -- they  
2           apply the same, Your Honor. However, child  
3           support works differently than a tort recovery.  
4           Child support normally requires ongoing  
5           payments to cover all of the child's medical  
6           care. A tort payment is a one-time payment for  
7           limited medical care that was caused by the  
8           tort. So there -- it's -- so that's a --

9           JUSTICE THOMAS: Oh, I understand  
10          that, but your -- you said that these  
11          provisions limit -- the -- the provision you're  
12          talking about, the assignment provision, is  
13          very broad.

14          MR. GOWDY: Yes, Your Honor.

15          JUSTICE THOMAS: It doesn't have these  
16          built-in limitations. And I will take -- I  
17          will also agree that perhaps child support is  
18          very broad in a different way. But you said  
19          that the -- and they appear generally in the  
20          same part of the statute.

21                 But you say that the provisions that  
22                 you mentioned restrict the assignment, the  
23                 broad assignment language. Why doesn't that  
24                 also apply to the child support language?

25          MR. GOWDY: Well, Your -- Your Honor,

1 the -- the analysis would still be the same  
2 whether it's child support or tort recovery.  
3 The analysis would be -- the medical care --  
4 and I said yes when you said it's very broad,  
5 but the medical care mentioned in the  
6 assignment clause, in -- in our view, when read  
7 in the whole text, is shorthand for medical  
8 care covered by Medicaid, furnished by  
9 Medicaid, paid for by Medicaid, and, therefore,  
10 the analysis will be whether the third-party  
11 liability covers the same care, service, or  
12 item covered by Medicaid.

13           And my point about distinguishing  
14 between tort recoveries and childcare is tort  
15 recovery does -- often pays for items, care,  
16 and service not covered by Medicaid. For  
17 example, if you're a disabled person, you will  
18 need a special vehicle with medical equipment  
19 to be transported to your appointments.  
20 Medicaid does not cover for that, but a  
21 tortfeasor may have to pay for that.

22           Childcare, I think, is different in  
23 the other regard in that childcare requires the  
24 parent to pay for all medic -- medical care,  
25 whether it's covered by Medicaid or not, and,



1       therefore, I think it'll operate differently in  
2       that context than in the tort recovery context.

3                 JUSTICE THOMAS: Thank you.

4                 MR. GOWDY: I'd like to turn back to  
5       the -- the third-party liability provision if  
6       the Court doesn't have any questions. The  
7       Solicitor General has correctly stated this is  
8       the anchor or main provision that sets a  
9       state's general duty to reinvert --  
10      reimbursement. And to quote a little bit more  
11     than I did in my opening, in sub --  
12     subparagraph (B), it says "where such a legal  
13     liability is found to exist after medical  
14     assistance has been made available, the State  
15     will seek reimbursement for such assistance to  
16     the extent of such legal liability."

17                This language in the 1968 provision  
18     that establishes the pool of reimbursement  
19     funds clearly indicates that it is for  
20     third-party payments for medical assistance  
21     already provided by Medicaid, already incurred.  
22     And the -- the last phrase in subparagraph (B)  
23     refers to "such legal liability," which must be  
24     -- is cross-referencing the phrase in (A), "pay  
25     for care and services available under the

1 Medicaid plan."

2 And as my hypothetical with Justice  
3 Thomas mentioned, many of the items, services,  
4 and care that a tortfeasor must pay for,  
5 whether we're talking about past or future  
6 medical expenses, are not covered by Medicaid.

7 So -- so, read sensibly, the  
8 third-party liability in (A) and (B) must be  
9 for the care, services, or items that have been  
10 made available by Medicaid to the beneficiary  
11 and can't be for future medical care, items, or  
12 services that may never be made available by  
13 Medicaid to the beneficiary.

14 JUSTICE KAGAN: Mr. Gowdy, I guess I'm  
15 not quite sure why you read this language, to  
16 pay for care and services available under the  
17 plan, why you necessarily read that as  
18 precluding payments for future expenses.

19 I mean, couldn't we just read that as  
20 saying something like, you know, there's --  
21 there are kinds of medical care that are  
22 available under the plan, and, regardless,  
23 whether they're past or future, those are the  
24 kinds of things that are covered, and then  
25 there are kinds of medical services that are

1 not available under Medicaid, and so that would  
2 not be covered.

3 But why is it a future/past  
4 distinction to have language like "available  
5 under the plan"? I -- I would think it's just  
6 a kind of service distinction.

7 MR. GOWDY: Right. And I understand  
8 Your -- Your Honor's reading of that, but we --  
9 we don't believe that's the most sensible  
10 reading in the entire text of all these  
11 provisions.

12 First, I would note that a dictionary  
13 definition of "available" is "present or ready  
14 for immediate use." And given the context  
15 here, especially how "available" is used in the  
16 -- in the immediately subsequent subparagraph,  
17 "have been made available," we believe that it  
18 -- it makes most sense to be talking about  
19 services that have been incurred or provided.

20 That also lines up with subparagraph  
21 (H). And then --

22 JUSTICE KAGAN: Right. I mean, you  
23 definitely have -- I mean, sort of the way I  
24 read these three provisions, like, (H) is for  
25 you, and (K) is for Florida, and then there's a

1 little bit of a -- and then I think, you know,  
2 (A) is -- is -- is harder, but I guess I'm  
3 wondering why I shouldn't basically read it --  
4 I'm not sure if it's really quite Florida's  
5 way, the -- the -- the alternative that I'm  
6 proposing. I'd like to ask General Whitaker  
7 about that.

8 But -- but why is -- I would not think  
9 that this language makes a distinction between  
10 current -- between past and future payments, as  
11 opposed to payments for things that Medicaid  
12 covers and payments for things that Medicaid  
13 doesn't cover.

14 There are some things that we know  
15 that Medicaid is not going to cover, and -- and  
16 those are kind of read out of this provision.

17 MR. GOWDY: Right. Well, first, we  
18 would agree with the government's position.  
19 The focal point should be on what Medicaid pays  
20 for or covers. And so you can have this same  
21 issue come up as it did in the Doe case out of  
22 Vermont for past medical expenses.

23 Our context in this particular case  
24 and many cases is future medical expenses,  
25 which, in our view, are never available under

1 Medicaid, and I would give two reasons for  
2 that, Your Honor.

3 First, you -- you have to know the  
4 financial circumstances of the individual. And  
5 many persons who receive a tort recovery become  
6 immediately ineligible for Medicaid. So, until  
7 we know the moment in time that the medical  
8 care is administered and you look at that  
9 person's financial situation, you don't know if  
10 Medicaid is available.

11 Two, you have to know the person's  
12 medical condition. Even if someone receives a  
13 future medical expense award, because of the  
14 confines of a -- of a tort lawsuit, a jury has  
15 to make a -- a prediction about the -- the  
16 medical care that a person will need in the  
17 future.

18 But, as we know, sometimes people have  
19 more rapid recoveries. Sometimes things get  
20 worse. And then at that point in time when the  
21 medical care is needed is when the availability  
22 determination has to be made.

23 JUSTICE ALITO: What if -- what  
24 happens if the person who receives a tort  
25 recovery continues to be eligible for Medicaid

1 and continues to have medical bills paid by  
2 Medicaid? That does happen in some instances,  
3 doesn't it? Then would -- am I right on that?  
4 And, if I am, would -- would you say that  
5 Medicaid cannot recover for those expenses from  
6 the portion of the tort recovery that was  
7 allocated to future expenses?

8 MR. GOWDY: So, yes, you're right.  
9 People do remain on Medicaid after -- after the  
10 tort recovery. And especially it happens, as  
11 it does in this case, with disabled children --

12 JUSTICE ALITO: Right.

13 MR. GOWDY: -- because they have  
14 what's called a special needs trust, which is  
15 discussed in the AAJ amicus brief.

16 To answer your question, the second  
17 question, no, the state may not recover from  
18 the future medical expense award, and I would  
19 -- really two reasons for that.

20 The moment of the tort recovery, that  
21 becomes the property of Ms. Gallardo and is --  
22 is protected by the anti-lien provision. And  
23 unless the state can point to an exception in  
24 one of these third-party provisions, it is  
25 protected.

1           And, secondarily, though, I would say  
2     the state is -- and -- and what we say, really,  
3     the assignment provision, 1396k, it -- it does  
4     two primary things, Your Honor.

5           One, it granted the state the right to  
6     control the beneficiary's cause of action for  
7     medical damages paid by Medicaid and to -- and  
8     to demand the beneficiary's cooperation in that  
9     action.

10           Florida would have the right, if it  
11     was concerned about life-long care for someone  
12     like Ms. Gallardo, they could sue the  
13     tortfeasor themselves and try to set something  
14     up similar to a workers' compensation system  
15     where you have ongoing payments.

16           JUSTICE ALITO: But why does that --  
17     why does that regime make sense?

18           MR. GOWDY: Well, if an award --

19           JUSTICE ALITO: Why should --

20           MR. GOWDY: I'm sorry.

21           JUSTICE ALITO: -- why should Medicaid  
22     not be able to recover for expenses that were  
23     covered by the tort recovery, the portion of  
24     the tort recovery for future medical expenses?  
25     Why does that make sense?

1           MR. GOWDY: Well, it makes sense, Your  
2 Honor, because the -- the -- because the few --  
3 because, at the moment of the tort recovery, we  
4 have to determine, is this person -- what is  
5 this property here?

6           And -- and just like today you may be  
7 on a certain health insurance policy, if you  
8 lose your job tomorrow, you're not, and,  
9 therefore, you will have to pay those expenses  
10 out of pocket.

11           So it'll be -- there are many cases  
12 where the person receives the tort recovery and  
13 they're ineligible for Medicaid, but whether  
14 they're ineligible or not, the -- the analysis  
15 has to be at the point in time of the recovery.

16           And as far as what I suggested about a  
17 workers' comp scheme, you know, if Florida were  
18 to -- or the states were to set that up, those  
19 often work where there's a determination that  
20 there's an injury that was in the course and  
21 scope of the employment, and then there could  
22 be future determinations where the workers'  
23 comp carrier has to make payments for future  
24 care.

25           Unfortunately, the tort system is not



1 set up like that, and liability policies aren't  
2 set up like that. There's a one-time payment.  
3 And, therefore, we have to look at -- just like  
4 with the -- the damages we discussed in -- that  
5 were discussed in Ahlborn with respect to lost  
6 wages, pain and suffering, we have to determine  
7 who has the ownership of those damages at the  
8 time of the tort recovery.

9 JUSTICE SOTOMAYOR: Counsel, this is  
10 Justice Sotomayor.

11 MR. GOWDY: Yes, Your Honor.

12 JUSTICE SOTOMAYOR: I want to break  
13 down what you're saying. You've been using,  
14 and so have we, the Justices, past and future  
15 medical expenses.

16 But the government makes it very clear  
17 that this is not about past or future medical  
18 expenses. This is about the statute, the  
19 amount that the Medicaid has paid, correct?

20 MR. GOWDY: Correct.

21 JUSTICE SOTOMAYOR: And to the extent  
22 that at the moment of a tort recovery the  
23 government hasn't paid anything, it's not  
24 entitled to recovery under the anti-lien  
25 statute, correct?

1 MR. GOWDY: Correct.

2 JUSTICE SOTOMAYOR: And that's what  
3 Ahlborn said, which is you're only entitled to  
4 what -- the state is only entitled to what it's  
5 paid, and at the moment of recovery, that's all  
6 that it has a legal claim to, correct?

7 MR. GOWDY: Correct.

8 JUSTICE SOTOMAYOR: All right. So  
9 your -- as I understand your position as you've  
10 been discussing is, at the moment the lien is  
11 placed on a tort recovery, even at the time of  
12 an assignment, it -- you can only be assigned  
13 what you have a right to.

14 And they are claiming they have a  
15 right to all medical services. But the  
16 problem, any services, is they haven't given  
17 any services at that point, correct?

18 MR. GOWDY: Correct.

19 JUSTICE SOTOMAYOR: So they can't have  
20 a lien for services at that moment they haven't  
21 rendered?

22 MR. GOWDY: Correct.

23 JUSTICE SOTOMAYOR: All right. Now,  
24 with respect to Justice Alito's question, if  
25 I'm understanding it correctly, he's saying why

1 shouldn't we let Medicaid take. And your  
2 answer, I think, is we don't know what it's  
3 going to pay.

4 If the recovery is large enough, the  
5 person can become ineligible for Medicaid,  
6 correct?

7 MR. GOWDY: Correct.

8 JUSTICE SOTOMAYOR: Congress has given  
9 a trust for -- the right to take money that is  
10 given and place it in a trust for the medical  
11 care of the children, correct?

12 MR. GOWDY: If they are disabled like  
13 Ms. Gallardo, yes, correct.

14 JUSTICE SOTOMAYOR: Exactly. And so  
15 that's what happened here.

16 MR. GOWDY: Correct.

17 JUSTICE SOTOMAYOR: So it's not like  
18 that money is a windfall to her. It's being  
19 used to pay medical expenses?

20 MR. GOWDY: Yes, or like things for a  
21 van to get her to her appointment.

22 JUSTICE SOTOMAYOR: Right. But the  
23 point is it's not a windfall?

24 MR. GOWDY: No. And -- and I would  
25 add that when Ms. Gallardo dies, all the money

1 in the special needs trust goes back to  
2 Medicaid.

3 JUSTICE SOTOMAYOR: Exactly. And so  
4 it's not like med -- that the state is being  
5 denied anything?

6 MR. GOWDY: Correct.

7 JUSTICE SOTOMAYOR: Now, with respect  
8 to the future support payments that Justice  
9 Thomas pointed to in this statute, as I read  
10 that, that's not an assignment of any kind.  
11 It's just an obligation for paternity to be  
12 established and the parent to -- to be  
13 obligated to pay for medical care. It's not  
14 going to the state.

15 MR. GOWDY: Correct. That -- that's  
16 right.

17 JUSTICE SOTOMAYOR: All right. Thank  
18 you, counsel.

19 CHIEF JUSTICE ROBERTS: Thank you,  
20 counsel.

21 Justice Thomas, anything further?

22 JUSTICE THOMAS: Nothing.

23 CHIEF JUSTICE ROBERTS: Justice  
24 Breyer?

25 JUSTICE BREYER: Well, I thought I

1 understood it, but I'm a little less certain  
2 now. Look, suppose that Medicare -- there's an  
3 accident, okay, and Smith caused it, and, as a  
4 result, Jones was in the hospital. His car was  
5 destroyed. He had some -- television set which  
6 was destroyed. He may have past -- he will  
7 have past bills for -- and probably in the  
8 future too for -- for his illness and health.

9 Now my understanding was that the  
10 Medicaid, since he's on Medicaid, as of July 1,  
11 when we're all taking place, has paid already  
12 \$25,000. And the question was, I thought, but  
13 you better correct me if I'm wrong -- the  
14 question was they'd like to get this 25,000  
15 back. And it's Smith, the causer, who has  
16 settled with the victim, where they think they  
17 can get some of the money. And they get some  
18 of the money because \$10,000 was set aside in  
19 the settlement for past expenses. Right?

20 MR. GOWDY: Right.

21 JUSTICE BREYER: And there is another  
22 15,000 in past expenses that Medicare has paid,  
23 and now they'd like to get that back too.

24 MR. GOWDY: Correct. That's what --

25 JUSTICE BREYER: And they can't get it

1 back from that part of the settlement that's to  
2 pay for the television set?

3 MR. GOWDY: Correct.

4 JUSTICE BREYER: They can't get it  
5 back from that part that is to pay for the  
6 automobile repairs?

7 MR. GOWDY: Correct.

8 JUSTICE BREYER: But there is a little  
9 bit here, which, let's say, says 20,000 or  
10 30,000, which is to pay for medical expenses,  
11 and it doesn't say whether it's past or future.  
12 So what Florida would like is to get back some  
13 of its past expenses from that portion of the  
14 settlement which seems earmarked for future  
15 expenses.

16 MR. GOWDY: Correct. That's what  
17 Florida wants.

18 JUSTICE BREYER: That's what this  
19 issue is, is it not?

20 MR. GOWDY: Yes.

21 JUSTICE BREYER: And one problem for  
22 you is the statute says it can, that statute.

23 MR. GOWDY: Well --

24 JUSTICE BREYER: But the other four  
25 statutes seem to say, look, you are supposed to

1 get back from the settlement that which is  
2 earmarked for past. You're not supposed to get  
3 back money earmarked for paintings or cars or  
4 television sets but only that part for past.

5 And it doesn't say a damn thing about  
6 your getting money -- in fact, it suggests the  
7 contrary, those four -- money from that part  
8 which is future.

9 Now I don't know why Congress wrote it  
10 that way. They might have written it that way  
11 because they thought a lot of people fall off  
12 Medicare, and by the time they get future,  
13 there won't even be Medicare people. Or they  
14 might have written it because Medicare future  
15 -- because future payments are -- are  
16 uncertain. But that's how they wrote it.

17 MR. GOWDY: Right.

18 JUSTICE BREYER: And so you're saying,  
19 hey, there's no more reason here -- I mean, now  
20 I'm back to Justice Kagan's question. That  
21 language in the last bit seems against you.

22 MR. GOWDY: It -- it -- I -- I  
23 understand that's the weak point for us, but I  
24 think -- now you kept saying Medicare, and --

25 JUSTICE BREYER: I meant Medicaid. I

1 mean Medicaid.

2 MR. GOWDY: Well, I wanted to point  
3 Your Honor, though, to 2651 --

4 JUSTICE BREYER: Yeah.

5 MR. GOWDY: -- which does -- and which  
6 is in the Medicare statutes, which does  
7 precisely what Florida really wants. And that  
8 statute allows Medicare to collect from the  
9 entirety of the tort recovery.

10 JUSTICE BREYER: Mm-hmm.

11 MR. GOWDY: And that makes sense  
12 sometimes, and Congress did that in 2013 with  
13 Medicaid and then nullified it with -- in 2018,  
14 because you would -- it makes sense to have the  
15 third party responsible for the tort to pay for  
16 all the medical care caused by the tort.

17 But, actually, Florida's reading and  
18 why I said at the beginning it was absurd --  
19 and I'm -- I'm trying -- I know I have to  
20 answer your question and I hope I'm doing that  
21 -- is that it's actually far broader, Florida's  
22 reading, than what 2651(a) does.

23 It allows a -- a lifetime assignment  
24 and would require third parties who are future  
25 health insurers or future tortfeasors who did



1 not cause Ms. Gallardo's injury to pay for the  
2 care that Medicaid paid for her injuries or --

3 JUSTICE BREYER: Okay. It's  
4 complicated, but I -- I suppose --

5 MR. GOWDY: That -- well, that's not  
6 --

7 JUSTICE BREYER: -- what Congress --  
8 is Congress saying this to Medicaid agencies?

9 MR. GOWDY: Well --

10 JUSTICE BREYER: Medicaid agency, you  
11 want to get back the future payments? Here's  
12 what you do: Sue the tortfeasor yourself.

13 MR. GOWDY: Exactly. And I would just  
14 say that Florida has pointed to these other  
15 provisions, but none of them do this future  
16 lifetime assignment. And so that's why, in --  
17 in our view, that's just not a sensible  
18 reading, Your Honor.

19 CHIEF JUSTICE ROBERTS: Justice Alito,  
20 anything further?

21 Justice Sotomayor, anything further?

22 JUSTICE SOTOMAYOR: No. Thank you.

23 CHIEF JUSTICE ROBERTS: Justice Kagan?  
24 Justice Gorsuch?

25 JUSTICE GORSUCH: I'm afraid I do,

1 Chief.

2 Medicaid is generally a statute about  
3 funding from the federal government to states.  
4 And if, in the normal course, we'd have a case  
5 about this, you might think of it between the  
6 federal government and the states, say, the  
7 state violates the anti-lien provision and the  
8 federal government stops paying.

9 That case would have a very different  
10 light to me, and it would raise federalism  
11 questions. Medicaid's a huge percentage of  
12 state budgets. We'd normally require the  
13 federal government, before it does something  
14 that drastic to a -- in -- in -- in our federal  
15 system to a state, to speak pretty clearly.

16 This case has a different light  
17 because we have an individual suing under 1983  
18 to protect tort compensation. But I wonder  
19 whether that premise that an individual can sue  
20 under 1983 is correct. I just don't know.

21 I know Florida has forfeited the issue  
22 in this case, and you're going to tell me that.

23 MR. GOWDY: I won't now.

24 JUSTICE GORSUCH: You -- you can.

25 People do it all the time. You can tell me

1 again, all right?

2           And -- but a number of states have  
3 written to us saying: Gosh, be careful about  
4 deciding this case on that premise because it  
5 may not be correct.

6           Do you have any thoughts for us about  
7 that?

8           MR. GOWDY: Well, I -- first, I'd say,  
9 if you want to avoid the question and the  
10 opinions of those states that argue that, I  
11 obviously don't object.

12           JUSTICE GORSUCH: I knew it was  
13 coming. Okay.

14           MR. GOWDY: So -- but I do have a  
15 thought, that 1396p(a)(1), which is the  
16 anti-lien provision, and the anti-recovery  
17 provision in (b) are clear. They're clear.  
18 And they are -- they are rights for  
19 individuals. They're not rights the federal  
20 government is likely to assert because it's  
21 Ms. Gallardo who will lose her property and be  
22 unable to pay for care that Medicaid doesn't  
23 pay for.

24           JUSTICE GORSUCH: I understand that.  
25 It was a legal question, though. What in the

1 statute makes you think that it's a right that  
2 belongs to individuals rather than to the  
3 federal government?

4 MR. GOWDY: Because -- because the  
5 statute by its plain text says no lien may be  
6 imposed against the property of any individual.  
7 So it is her individual right that she has a  
8 right to assert here or in the lower federal  
9 courts.

10 And, furthermore, I believe it's  
11 clear, and the only condition here that is  
12 happening is it's not like the state is -- I  
13 know you have other cases where the state must  
14 do A, B, and C to receive federal funding, but,  
15 here, that condition that I just read is clear.  
16 And what we're arguing about is whether the  
17 state can go seek some other money, and the  
18 federal government is telling them they can't.

19 But, anyway, to -- to directly answer  
20 your question, if you don't allow individuals  
21 to assert this right in federal court, it's  
22 effectively lost because it's the individual's  
23 -- it -- it's a statutory property right.

24 JUSTICE GORSUCH: Very helpful. Thank  
25 you.

1 CHIEF JUSTICE ROBERTS: Justice  
2 Kavanaugh.

3 JUSTICE KAVANAUGH: To the extent that  
4 one provision, as Justice Kagan said, is  
5 helpful to you and one provision is not helpful  
6 to you, I want to ask you why we shouldn't look  
7 to the Medicare analogy that you were  
8 discussing with Justice Breyer as a sensible  
9 landing point for us to arrive at in resolving  
10 the discrepancy between the two provisions.

11 What's different --

12 MR. GOWDY: Okay.

13 JUSTICE KAVANAUGH: -- about the  
14 Medicare?

15 MR. GOWDY: Well, so the Medicare  
16 statutes --

17 JUSTICE KAVANAUGH: Not -- not the  
18 language.

19 MR. GOWDY: Oh.

20 JUSTICE KAVANAUGH: But what would be  
21 wrong with resolving this and treating it in  
22 the same way as Medicare, given that you have  
23 assumed for the second contradictory  
24 provisions?

25 MR. GOWDY: Well, I -- I don't -- I

1 guess the premise of your question seems to be,  
2 and correct me if I'm wrong, that the language  
3 in the assignment clause is similar to the  
4 language in the Medicare statute. And --

5 JUSTICE KAVANAUGH: I think the  
6 premise is that that language just is not  
7 helpful to you and other language in a  
8 different provision is helpful to you. So we  
9 have to sort out how are we going to figure out  
10 which provision to follow.

11 And if Medicare is -- is done one way,  
12 what sense would it make to have Medicaid done  
13 a different way on this issue?

14 MR. GOWDY: This -- here's -- well, I  
15 have two -- two responses.

16 One, you could follow the path of  
17 Judge Wilson in the dissent in -- in the Utah  
18 Supreme Court in Latham and you -- and you  
19 apply the general specific canon and the most  
20 recently enacted canon. And we've argued that  
21 and we get the same point for Ms. Gallardo.

22 Number two, Medicare and Medicaid are  
23 very different. Medicare, generally, you  
24 become 65, you're eligible, and you're eligible  
25 for the rest of the time you're here on the

1 earth.

2 Medicaid, you frequently see people  
3 going in and out of Medicaid, and it actually  
4 happens in tort cases a -- a lot.

5 You will have somebody who, when the  
6 tort happens, is on private insurance, then  
7 loses their job, can't make the COBRA payments,  
8 and by the time you get to trial, they're on  
9 Medicaid. And so you have -- that's -- that  
10 happens where I was talking with these past  
11 payments. You have some paid by private  
12 insurance, some paid by Medicaid. And then  
13 they get the tort recovery and they're off.

14 So there's a real distinction between  
15 Medicare and Medicaid in that regard, and so I  
16 don't think you can just apply Medicare -- and  
17 -- and, again, Florida's reading is a lifetime  
18 assignment. It's not the same as -- Medicare  
19 -- the Medicare statute limits the recovery to  
20 the -- to the tortfeasor.

21 And though Florida says its current  
22 statute doesn't allow this, its reading of the  
23 assignment clause necessarily means that future  
24 third-party payers who didn't cause the tort  
25 must pay for the past care caused by the tort.

1 JUSTICE KAVANAUGH: Thank -- thank  
2 you. That's helpful.

3 CHIEF JUSTICE ROBERTS: Justice  
4 Barrett?

5 JUSTICE BARRETT: Just one question.  
6 So, you know, as several people, including  
7 Justice Kagan, have said, 1396a --  
8 1396k(a)(1)(A), you know, favors Florida and  
9 the later enacted (25)(H) is better for you.

10 I think your case would be a lot  
11 harder if you just had 1396k to go on. And I'm  
12 just wondering whether there are any cases  
13 interpreting 1396k before the later (25)(H) was  
14 enacted?

15 MR. GOWDY: We did -- yes, if you look  
16 at page 40 -- give me one second -- page 45 of  
17 our brief, you'll see cases there from the --  
18 from the 1980s from state courts --

19 JUSTICE BARRETT: Mm-hmm.

20 MR. GOWDY: -- that were enacted  
21 before -- before the 1993 (H) provision.

22 So -- so the -- I -- I don't have any  
23 Federal Circuit court opinion or -- but those  
24 --

25 JUSTICE BARRETT: But do they construe



1 it your way?

2 MR. GOWDY: They -- they --

3 JUSTICE BARRETT: That -- that was --

4 MR. GOWDY: I'd have to go --

5 JUSTICE BARRETT: -- that was the  
6 question. I'm just wondering whether, when  
7 that was all there was, did the general  
8 interpretation of that provision favor you?  
9 Because that -- that makes a difference, right?  
10 Otherwise, your argument really hinges on  
11 (25)(H) having somehow narrowed the scope.

12 MR. GOWDY: I guess. So,  
13 historically, this is what I would tell you:  
14 Before the Ahlborn decision, which was in 2006,  
15 many state courts, including those in Florida,  
16 read these provisions as allowing the states to  
17 take all those things Justice Breyer mentioned  
18 a few minutes ago.

19 So this issue about -- between medical  
20 expense -- medical care you don't see come up  
21 in the litigation very much because what was  
22 happening at that time was could we get the  
23 whole tort recovery, including the part for  
24 lost wages, pain and suffering, and the  
25 television, okay?

1 JUSTICE BARRETT: Mm-hmm.

2 MR. GOWDY: So -- but what I would say  
3 about these cases on page 45 is that they  
4 basically apply background principles of  
5 subrogation, assignment, and insurance law,  
6 which the government and we have put in our  
7 brief, including in our reply brief, and those  
8 background principles line up with us.

9 JUSTICE BARRETT: Mm-hmm.

10 MR. GOWDY: So that's the best I can  
11 do. And -- and you just -- I don't think  
12 you're going to find -- I looked.

13 JUSTICE BARRETT: Mm-hmm.

14 MR. GOWDY: I looked really hard. And  
15 I don't think you're going to --

16 JUSTICE BARRETT: I assumed that you  
17 had.

18 MR. GOWDY: You're not -- you're not  
19 going to find these cases from that time period  
20 because of Ahlborn happening in 2006, which  
21 kind of really changed the way a lot of the  
22 lower courts were looking at this.

23 JUSTICE BARRETT: Thank you.

24 CHIEF JUSTICE ROBERTS: Thank you,  
25 counsel.

1 Mr. Suri.

2 ORAL ARGUMENT OF VIVEK SURI

3 FOR THE UNITED STATES, AS AMICUS CURIAE,

4 SUPPORTING THE PETITIONER

5 MR. SURI: Mr. Chief Justice, and may  
6 it please the Court:

7 Our position does not turn on any  
8 distinction between past and future medical  
9 expenses. It instead turns on who paid for  
10 those expenses.

11 Medicaid is entitled to the portions  
12 of the recovery that correspond to the things  
13 Medicaid paid for, and the beneficiary gets the  
14 portions of the recovery that correspond to the  
15 things the beneficiary paid for.

16 Justice Thomas, you asked about how  
17 this would work in the context of child support  
18 or medical support provided by a parent. Our  
19 answer is that it would work the same way. The  
20 same kind of allocation would have to be made.

21 Justice Alito, you asked how this  
22 would work in the context of payments that are  
23 made after the settlement. I agree that's  
24 something that can happen, although it's  
25 unusual, and in that case, as I've said, we

1 draw no distinction between past and future  
2 payments. The entitlement would turn entirely  
3 on who made the payment.

4 Justice Kagan, you asked about the  
5 word "available" in (A). And we agree that the  
6 word "available" can be read to mean  
7 theoretically available. But the key language  
8 here is not in (A). It's in (B). (B) is the  
9 provision that specifies the pool of funds from  
10 which the recovery can be obtained. And that's  
11 at the very end of (B) where it says "to the  
12 extent of such legal liability."

13 But, if you look earlier in (B), it  
14 says such a legal liability is found to exist  
15 after medical assistance has been made  
16 available on behalf of the individual. And  
17 that makes clear that we're not talking about  
18 theoretical availability. We're talking about  
19 actually being made available.

20 In addition, if you look at page 7A of  
21 our brief, there's a regulation, 42 C.F.R.  
22 433.138, which interprets (A) itself to apply  
23 to services that are furnished and not merely  
24 available under the plan.

25 Justice Kavanaugh, you asked about the

1 Medicare analogy, and I don't think that  
2 analogy really helps in this context. That's  
3 because Medicare adopts the system that was  
4 rejected in Ahlborn. In other words, it's not  
5 the case that Medicare takes the pool of money  
6 that is attributable to future medical  
7 expenses. Rather, it takes from the entire  
8 pool of the settlement.

9           And now -- we think it's rational for  
10 Congress to have done one of two things. You  
11 could say you limit the -- the government to  
12 the pool of money that corresponds to the funds  
13 that have actually been paid for by Medicaid,  
14 and that would be fair to the beneficiary.

15           Alternatively, you could say that the  
16 government could take the entire settlement.  
17 That would be less fair to the beneficiary, but  
18 it avoids the administrative costs and hassle  
19 of having these allocation determinations.

20           But what's less understandable is why  
21 Congress would have adopted the middle ground  
22 that Florida wants, where you have the  
23 administrative expense of these allocation  
24 proceedings, but you also don't have the  
25 fairness to the beneficiary because Medicaid is

1 going beyond the pool that corresponds to the  
2 funds that Medicaid itself has paid for. In  
3 many ways, it's the worst of all worlds.

4 Justice Gorsuch, you had asked about  
5 Section 1983 and how that would apply here.  
6 The federal government agrees that the Court  
7 shouldn't reach that issue in this case. It's  
8 a difficult issue about how Section 1983 should  
9 be interpreted. There are also complications  
10 about whether it should be under Section 1983  
11 or Ex parte Young. We'd urge the Court to  
12 reserve that case -- that issue for future  
13 cases.

14 Justice Breyer, your hypothetical  
15 involved Smith and Jones and Smith getting to  
16 pay I think it was 15,000 out of the 25,000.  
17 How does Medicaid recover the remaining 10,000?

18 I think the way to deal with that is,  
19 first, the state could go after the tortfeasor  
20 directly. It has multiple avenues for doing  
21 that. It's received an assignment. It could  
22 use that assignment to bring the suit in the  
23 first place.

24 Second, after the suit has been  
25 brought by the private individual, the state

1 could intervene in that case.

2 Third, after the settlement has been  
3 reached, the state could say we're not a party  
4 to that settlement and we still want to sue the  
5 individual for the remaining money, and in that  
6 suit, the state could ask for the full extent  
7 of its expenses.

8 But what the state is doing here is  
9 it's not going after the tortfeasor. It's  
10 going after the victim of the accident, and  
11 it's seeking funds that don't correspond to the  
12 things it paid for.

13 We think that's exactly what the  
14 anti-lien clause prevents the state from doing.

15 If there are any other questions, I  
16 welcome them.

17 JUSTICE THOMAS: Mr. Suri, the -- I am  
18 curious as to, in these cases -- this is a  
19 funding case, right? Why wouldn't you just  
20 sanction the State of Florida if you think  
21 they're out of compliance?

22 MR. SURI: Justice Thomas, we would be  
23 entitled to do that under a separate provision  
24 of the Medicaid statute. I appreciate that you  
25 have written in a separate opinion that is

1 cited in Florida's brief that that would be the  
2 appropriate sanction, the appropriate sanction  
3 wouldn't be preemption, but seven other  
4 justices disagreed with that proposition in  
5 that case, and we've gone with what the  
6 majority of the Court has determined.

7 That's also consistent with what the  
8 Court held in both Ahlborn and Wos, where it  
9 rejected a state's efforts, even though the  
10 alternative of the federal government  
11 withholding funding was theoretically  
12 available.

13 JUSTICE GORSUCH: I guess that's why I  
14 -- I would appreciate the government's effort  
15 to address my -- my question because, if this  
16 is a Spending Clause case predominantly and a  
17 relationship between the federal and a state  
18 government, we might expect the federal  
19 government to speak more clearly in prohibiting  
20 or limiting the state's powers than it has here  
21 before imposing a fine or maybe withholding  
22 Medicaid funds altogether, which is a huge  
23 percentage of state budgets these days.

24 But, if there is a personal right to  
25 action here, that -- that -- that puts the case



1 in a different light. And I just want to make  
2 sure we're not addressing a unicorn that  
3 doesn't exist but something that actually does  
4 exist in the world. And you tell us we don't  
5 have to decide it. I understand that. You  
6 don't need to tell me that again.

7 But how would the government have us  
8 resolve that question? Does it have any views  
9 it wishes to offer on that?

10 MR. SURI: At the very least, Justice  
11 Gorsuch, even if the case couldn't proceed  
12 under Section 1983, we expect it could proceed  
13 under *Ex parte Young*. The state is taking an  
14 action that would be contrary to federal law,  
15 and the individual is entitled to bring an *Ex*  
16 *parte Young* case to say that action cannot  
17 proceed.

18 Now the argument on the other side,  
19 according to the states' amicus brief that you  
20 have cited, is that *Ex parte Young* wouldn't  
21 apply where Congress has implicitly foreclosed  
22 it, and they've relied on this Court's decision  
23 in *Armstrong*.

24 But *Armstrong* was a case in which the  
25 Court said that the provision being applied was

1       judicially inadministrable, and, therefore, you  
2       could infer that Congress meant for the  
3       Secretary, rather than individual lawsuits, to  
4       be the mechanism through which that provision  
5       was enforced. That concern isn't relevant  
6       here.

7                   JUSTICE SOTOMAYOR: Counsel, this is  
8       Justice Sotomayor. The strength that was  
9       conceded by Petitioner's counsel in k -- I'm  
10      not sure I agree that k is a weakness for the  
11      Petitioner. Are you in agreement with him?

12                   MR. SURI: I will say only that k is  
13      the least strong of our provisions. I wouldn't  
14      say that it's weak. We have two arguments just  
15      looking at k alone.

16                   The first that we would say is there's  
17      an absurdity argument that results from  
18      Florida's position. If Florida reads  
19      k(a)(1)(A) for all it's worth and the way that  
20      Florida insists it should be read, which is  
21      with no contextual limitations whatsoever, then  
22      it leads to an absurd result of a lifetime  
23      assignment.

24                   For example, imagine that Ms. Gallardo  
25      were to miraculously recover tomorrow, and 10

1 years from now she has a slip-and-fall  
2 accident. If you take Florida's position to  
3 its logical conclusion, that's medical care, so  
4 Florida could look into the portion of the  
5 judgment that represents medical care for the  
6 slip-and-fall accident and use that to  
7 reimburse the car accident care that it's  
8 provided here. In fact, it would be required  
9 to do that because this provision says a state  
10 plan for medical assistance "shall."

11 The other things we would look to in k  
12 are the language indicating that k does not  
13 stand alone, that k has to be read in context.  
14 This includes, for example, the opening words  
15 of k(a)(A), "for the purpose of assisting in  
16 the collection of medical support payments."  
17 That word "assisting" suggests that k is not  
18 some freestanding provision. It's meant to  
19 implement the preexisting duty in (A) and (B).

20 And, Justice Barrett, if I could  
21 quickly address your question about the  
22 sequencing of the statute here, the order in  
23 which Congress enacted the provisions was first  
24 came (A) and (B), then came k, and then finally  
25 came (H). So we don't have to rely on (H)

1 retroactively narrowing k, so to speak. We can  
2 just look at k being enacted against the  
3 backdrop of (A) and (B), and if you agree with  
4 us on (A) and (B), then k incorporates the same  
5 contextual limitation.

6 And even if you don't agree with that,  
7 there are a number of opinions in which this  
8 Court has said that a later-enacted provision  
9 can clarify an ambiguity in an earlier  
10 provision. An example of that would be Justice  
11 Scalia's opinion for the Court in United States  
12 against Fausto.

13 JUSTICE SOTOMAYOR: Now --

14 JUSTICE KAGAN: And, Mister --

15 JUSTICE SOTOMAYOR: Go ahead, Justice  
16 Kagan.

17 JUSTICE KAGAN: Mr. Suri, is there any  
18 argument here that k is more relevant than (H)  
19 or that (H) is more relevant than k? Or do we  
20 just have to deal with the whole ball of wax  
21 together somehow?

22 MR. SURI: I'm afraid you have to deal  
23 with all of them together, Justice Kagan. We  
24 don't think -- we don't agree with the  
25 arguments that suggest that k is applicable but

1 not (H) or that (H) is applicable but not k.

2 JUSTICE KAGAN: And -- and why is  
3 that?

4 MR. SURI: The reason is, first, that  
5 the Court said in Ahlborn that these provisions  
6 echo and reiterate each other. And, second, k  
7 has some features in it that would have to  
8 apply regardless of whether the government is  
9 proceeding under (H) or k, or else the  
10 statutory scheme would not make sense.

11 For example, there's a duty to  
12 cooperate in k that's not repeated in (H). And  
13 if you treat these as two completely  
14 freestanding, unrelated provisions, then that  
15 would suggest that the beneficiary has no duty  
16 to cooperate under (H).

17 Similarly, k says that the federal  
18 government gets a share of the recovery.  
19 That's not repeated in (H) either. And I think  
20 we'd be quite worried if states could say we're  
21 proceeding under (H) and we don't have to turn  
22 over any money to the federal government.

23 JUSTICE BARRETT: Mr. Suri, I'd like  
24 to ask you a question about the lifetime  
25 assignment absurdity. In your example, you

1 talked about a tort settlement that came many  
2 years later and the state still retaining a  
3 right and an obligation, indeed, to get money  
4 from that settlement to pay.

5 Does that only work if the recipient  
6 is still on Medicaid?

7 MR. SURI: Not necessarily, Justice  
8 Barrett, because the assignment in this  
9 hypothetical would have been made at -- at the  
10 outset when the Medicaid assistance were being  
11 received for the first time, when Medicaid is  
12 paying for Ms. Gallardo's injuries the first  
13 time. And, presumably, the assistance would  
14 last for the rest of Ms. Gallardo's life  
15 because Florida says there's no limiting  
16 language in k(a)(1)(A).

17 JUSTICE SOTOMAYOR: Counsel, in your  
18 list of what states could do to protect  
19 themselves, you didn't mention the fact that  
20 the state at all times has a right to challenge  
21 the allocation of a settlement. If it believes  
22 the allocation with respect to past medical  
23 payments was unfair, it can judicially or  
24 administratively challenge that allocation,  
25 correct?

1           MR. SURI: I agree, Justice Sotomayor.  
2           That is an additional tool at the state's  
3           disposal that prevents these harms that the  
4           state is talking about here.

5           Indeed, in this very case, the  
6           Eleventh Circuit took Petitioner to be arguing  
7           that the state was bound by the settlement  
8           allocation that the parties had privately  
9           agreed to, and the Eleventh Circuit rejected  
10          that argument.

11          We agree with the Eleventh Circuit  
12          that to the extent Petitioner was making that  
13          argument, that argument would have been  
14          incorrect. The state is entitled to challenge  
15          the allocation. And, again, the state doesn't  
16          have to limit itself just to the allocation.  
17          It can always sue the tortfeasor.

18          JUSTICE ALITO: To what extent does  
19          this issue implicate important interests of the  
20          federal government in the operation of the  
21          Medicaid statute?

22          MR. SURI: It does to some extent,  
23          Justice Alito, in the following ways.

24          First, the federal government has an  
25          interest in recovering money. It gets a share

1 of the state's recovery.

2 But, on the other hand, it also has a  
3 competing interest in protecting beneficiaries.  
4 As Mr. Gowdy said, Medicaid is not a loan.  
5 It's a benefit meant to be paid out. And the  
6 federal government has an interest in ensuring  
7 that states aren't, as it were, converting  
8 Medicaid into a loan that the beneficiary is  
9 then saddled with for the rest of her life.

10 JUSTICE ALITO: No, I -- I understand  
11 that. I guess what I'm thinking about is why  
12 the federal government hasn't itself taken  
13 actions against Florida and any other states  
14 that have laws like this?

15 MR. SURI: For two reasons, Justice  
16 Alito, both textual.

17 The first is, if you look at (A) and  
18 (B), they have the word "reasonable" in them.  
19 They provide that the state or local agency  
20 must take reasonable measures to ascertain the  
21 legal liability of third parties and that the  
22 state must pursue recovery when the  
23 reimbursement that the state reasonably expects  
24 to recover exceeds the cost of the recovery.  
25 So we think that leaves states with some wiggle



1 room.

2           And then the provision about  
3 withholding funds has, I think, the term  
4 "substantial compliance." So it's not just  
5 that any foot fault by a state would allow the  
6 federal government to come in and cut off  
7 funds. Rather, the state has to be not in  
8 substantial compliance with the statute.

9           Finally, we -- we wouldn't want to  
10 punish the innocent beneficiaries in Florida by  
11 cutting off the state's Medicaid's fund --  
12 Medicaid funds if that can be avoided.

13           JUSTICE GORSUCH: Why would an  
14 individual have a right to then sue for any,  
15 what you call foot fault, but the federal  
16 government can only intervene when there is  
17 substantial non-compliance?

18           MR. SURI: The statute uses the term  
19 "substantial" in the provision authorizing the  
20 -- the Secretary to deny approval. It doesn't  
21 use the word "substantial" in this context.

22           JUSTICE GORSUCH: Isn't it awkward to  
23 think that the individual right would be  
24 broader than the federal government's?

25           MR. SURI: No, Justice Gorsuch. It

1 may be that the federal government could itself  
2 have brought a lawsuit. It may not have been  
3 able to --

4 JUSTICE GORSUCH: Well, I thought you  
5 just told us it probably couldn't have.

6 MR. SURI: Couldn't have cut off  
7 funds. That doesn't --

8 JUSTICE GORSUCH: Okay.

9 MR. SURI: -- necessarily mean that it  
10 couldn't have brought its own lawsuit.

11 JUSTICE GORSUCH: Okay. Thank you.

12 CHIEF JUSTICE ROBERTS: Justice  
13 Thomas?

14 JUSTICE THOMAS: Just one brief  
15 question, Mr. Suri, addressing the preemption  
16 issue. Normally, when we have a preemption  
17 case, the federal government says do something  
18 one way. A state says do it another way. And  
19 there's a conflict.

20 In this context, the Spending Clause  
21 context, this is -- we normally analogize that  
22 to an agreement between the state and the  
23 federal government.

24 Do you see that there's any  
25 difference? I -- I -- I'm -- it -- I don't see

1 how you could say the laws are in conflict when  
2 it is embodied in an agreement, as opposed to  
3 two conflicting laws mandating certain conduct.

4 MR. SURI: Justice Thomas, the fact  
5 that a law is an agreement doesn't prevent it  
6 from also being a law with preemptive effect.  
7 Treaties, for example, are agreements, but they  
8 still have preemptive effect under the  
9 Supremacy Clause. Interstate compacts are  
10 agreements, but they have preemptive effect.

11 And, similarly, Spending Clause  
12 legislation, although it has been termed in the  
13 nature of a contract, they also have preemptive  
14 effect, as this Court has recognized many  
15 times. An example, if you'd like to look at a  
16 case, is Dalton against Little Rock Family  
17 Planning Services.

18 JUSTICE THOMAS: I don't think  
19 treaties do you much good, but I -- I see your  
20 point.

21 CHIEF JUSTICE ROBERTS: Justice  
22 Breyer?

23 JUSTICE BREYER: For one minute I'd  
24 like to go back to Justice Barrett's question.  
25 Everybody agrees we're talking about Medicaid

1 has paid \$25,000 medical expenses. We're only  
2 talking about what they paid.

3 And if we're only talking about when  
4 the victim sues the tortfeasor, there's a  
5 settlement, what can they collect that past  
6 expense from, and I think that she suggested  
7 that once upon a time it was possible to  
8 collect it from the whole settlement. You  
9 could collect it from the television part, from  
10 the house destruction part, the car,  
11 everything.

12 And then Congress narrowed it. And  
13 now you say they narrowed it to you can only  
14 collect from the part earmarked where that's  
15 fair, from past expenses. But the language  
16 says they've limited it down to anything in  
17 that settlement that has to do with medical  
18 expenses. And so what's wrong with that?

19 Now you made one point about future  
20 accidents and so forth. Forget that one. I  
21 understand it. I think you could get rid of  
22 that by saying it has to be this accident, but  
23 that's a -- that's a -- I've got that point.  
24 Anything else?

25 MR. SURI: Yes, Justice Breyer.

1           First, your question assumes that  
2 we're looking at k alone. But k shouldn't be  
3 looked at alone. It should be looked at in the  
4 context of (A) and (B), which it's  
5 implementing, and in the context of (H), which  
6 the Court in Ahlborn said it echoes.

7           In addition, if you look at  
8 k(a)(1)(C), it refers to a third party who may  
9 be liable to pay for care and services  
10 available under the plan. So there's, again,  
11 that same limiting language that's already in  
12 (A), available under the plan. The same  
13 language is in k.

14           I grant it's not in the assignment  
15 provision specifically. It's in a different --  
16 it's in a different part of k. But it really  
17 wouldn't have made sense for Congress to say:  
18 Beneficiary, you must assign the state your  
19 rights with respect to all medical care, but  
20 then you only have to cooperate with the state  
21 with respect to the subset of that medical care  
22 that relates to the services provided by  
23 Medicaid.

24           It's more reasonable to infer that  
25 Congress meant those provisions to be

1 harmonious and to have a similar scope.

2 CHIEF JUSTICE ROBERTS: Justice Alito?

3 Justice Sotomayor?

4 JUSTICE SOTOMAYOR: Counsel, is there

5 any way to accept Respondent, Florida's

6 reading, without overruling essentially

7 Ahlborn, the reasoning of Ahlborn?

8 MR. SURI: Justice Sotomayor, I don't

9 wish to overclaim the relevance of Ahlborn. We

10 think Ahlborn supports us in at least two

11 respects.

12 First, the bottom-line result in

13 Ahlborn. There was a settlement in that case

14 where there was a portion, \$35,000, that

15 represented past medical expenses that the

16 state had paid for. There was also an

17 additional portion that represented future

18 medical expenses that the state hadn't paid

19 for. And the Court's bottom-line judgment in

20 Ahlborn was the state gets the 35,000, not the

21 35,000 plus the additional portion

22 corresponding to the future medical expenses.

23 Second, there's a footnote in Ahlborn,

24 Footnote 19, where the Court reasons that it

25 would be unfair, unjust, to allow the state to

1 obtain a portion of the recovery that it didn't  
2 compensate for. And we think that same  
3 unfairness arises in this context.

4 But, again, I don't wish to claim more  
5 of Ahlborn than -- than would be reasonable.  
6 The issue that's presented in this case was not  
7 squarely before the Court in Ahlborn, so we  
8 wouldn't go so far as to say that it's a  
9 binding holding on that point. We just think  
10 its reasoning supports us.

11 JUSTICE SOTOMAYOR: Thank you.

12 CHIEF JUSTICE ROBERTS: Justice Kagan?

13 JUSTICE KAGAN: Mr. Suri, I -- I'd  
14 like to ask you about an argument you didn't  
15 make, and it seems to me a good argument, the  
16 kind that I might ask General Whitaker about.  
17 But you didn't make it, and that makes me think  
18 it's a bad argument.

19 So here's the argument: It's from  
20 1396a(25)(I), and that provision is sort of the  
21 mirror image of k because it's where -- it's  
22 the requirement that insurers accept an  
23 assignment of rights. And -- and that  
24 provision speaks very clearly about items or  
25 services for which payment has been made under

1 the state plan. In other words, that provision  
2 seems to support your understanding of made  
3 payments.

4 And -- and -- and as I say, it seems  
5 as though (I) should be the mirror image of k,  
6 but then, again, you didn't make that argument.  
7 So why not?

8 MR. SURI: Justice Kagan, we made the  
9 argument at pages 18 and 19 of our brief. It's  
10 true I didn't repeat the argument at the podium  
11 today, but that's not because we don't think  
12 it's a good argument.

13 It -- it -- it is just as strong for  
14 us as (H), but I will note it was enacted after  
15 k, and so you'd have the same questions about  
16 whether (H) and (I) should be interpreted as  
17 narrowing a previously enacted provision, but  
18 we do agree it is very strong for us.

19 CHIEF JUSTICE ROBERTS: Justice  
20 Gorsuch?

21 Justice Kavanaugh?

22 JUSTICE KAVANAUGH: I think you said a  
23 minute ago that Florida's position would lead  
24 to an unfair or unjust scheme. But, again, I  
25 want to compare then the Medicare scheme is --



1 is even broader in terms of the state's ability  
2 to recover than what Florida is proposing for  
3 the Medicaid regime.

4 Is that regime similarly unfair and  
5 unjust, or what -- what's the explanation  
6 there?

7 MR. SURI: That regime sacrifices a  
8 perfect fairness for administrative efficiency.  
9 That scheme allows Congress to say: We don't  
10 want to bother with these allocation hearings.  
11 We'll just let the state -- we'll just let the  
12 federal government take the full amount of the  
13 settlement.

14 Now Florida's scheme here that it  
15 proposes in this case wouldn't achieve that  
16 offsetting administrative advantage because you  
17 would still have to have the allocation  
18 hearings to determine whether a portion of the  
19 settlement is attributable to medical expenses  
20 or to something like pain and suffering, which  
21 even they concede they can't recover.

22 JUSTICE KAVANAUGH: I think earlier  
23 you said that that would be the worst of all  
24 worlds, but in some sense, it gives the  
25 beneficiary a little more than the beneficiary

1 gets under the Medicare regime but gives the  
2 state a little more than it would get under  
3 Petitioner's and your proposal. So why is that  
4 the worst of all worlds?

5 MR. SURI: It's the worst of all  
6 worlds because it neither achieves the  
7 administrative efficiency benefits of not  
8 having these allocation hearings nor achieves  
9 fairness.

10 Now I suppose you could defend that  
11 system by saying it -- it's a compromise, it's  
12 a little unfair to the beneficiary and a little  
13 unfair to the state.

14 Yes, I accept that in theory Congress  
15 could enact that system, but we just don't  
16 think that's the system Congress enacted here.

17 JUSTICE KAVANAUGH: And -- and last  
18 question. How is this operating in practice  
19 right now throughout the 50 states, and what  
20 implications would occur if we adopt Florida's  
21 position and, by contrast, your position?

22 MR. SURI: In the 50-state survey we  
23 conducted before this argument, we uncovered  
24 nine states that --

25 JUSTICE KAVANAUGH: Glad I asked then.

1           MR. SURI: -- by judicial decision or  
2           express legislation do things the way that  
3           Petitioner would like. We identified six  
4           states that -- in addition to Florida itself,  
5           that do things the way Florida would like,  
6           again, either by legislation or judicial  
7           decision.

8           And most states were difficult to  
9           classify either because they said we will go to  
10          the maximum extent permitted by federal law or  
11          they parrot the federal provisions and so you'd  
12          have the same interpretive dispute under the  
13          state law that you're currently having under  
14          the federal law, or they're otherwise ambiguous  
15          or they haven't updated their statutes since  
16          Ahlborn, so it isn't clear from the face of the  
17          statute what they would do now.

18          I would note, however, that the vast  
19          majority of lower courts have come out in  
20          Petitioner's direction, not in Respondent's  
21          direction. So, to the extent that's any guide,  
22          ruling for Petitioner would preserve the status  
23          quo in this -- in this area.

24                    JUSTICE KAVANAUGH: Thank you.

25                    CHIEF JUSTICE ROBERTS: Justice

1 Barrett?

2 Thank you, counsel.

3 General Whitaker?

4 ORAL ARGUMENT OF HENRY C. WHITAKER

5 ON BEHALF OF THE RESPONDENT

6 MR. WHITAKER: Mr. Chief Justice, and  
7 may it please the Court:

8 Medicaid is an important and expensive  
9 part of the social safety net. To help keep  
10 Medicaid solvent, Congress made Medicaid the  
11 payer of last resort, meaning that other  
12 available resources should pay medical expenses  
13 before Medicaid pays. As part of that role,  
14 Medicaid recovers money from tortfeasors who  
15 injure Medicaid beneficiaries. When it does  
16 so, Medicaid can never be reimbursed for more  
17 than it paid out in benefits.

18 The question here is whether the  
19 program may seek that reimbursement from a tort  
20 settlement, not only out of medical damages or  
21 medical expenses paid in the past but also for  
22 medical expenses that will be paid in the  
23 future.

24 Section 1396k of the statute answers  
25 that question. It provides for Medicaid

1 beneficiaries to assign to the program rights  
2 to payment for "medical care," not past medical  
3 care, not some complicated subset of medical  
4 care. Medical care, period, including payments  
5 for medical care that may be necessary in the  
6 future.

7           That reading is confirmed by  
8 subsection (B) of Section 1396k, the remainder  
9 provision. Medical expenses may include  
10 expenses that Medicaid paid and expenses that  
11 the beneficiary paid. The remainder provision  
12 says that if Medicaid recovers all of those  
13 medical expenses, Medicaid is reimbursed for  
14 its expenses and the remaining amount goes to  
15 the beneficiary.

16           But, if there isn't enough money to  
17 reimburse both Medicaid and the beneficiary,  
18 the remainder provision says that Medicaid gets  
19 paid first. In other words, far from  
20 prohibiting Medicaid from recovering out of all  
21 medical damages, Section 1396k gives Medicaid's  
22 reimbursement claim priority over other claims  
23 to medical expenses.

24           The result is neither untoward nor  
25 surprising. Medicaid can never be reimbursed

1 for more than it paid out in benefits.  
2 Medicaid can also never receive any non-medical  
3 damages, but because it is the payer of last  
4 resort for medical expenses, it may recover  
5 from all medical damages.

6 I welcome the Court's questions.

7 JUSTICE THOMAS: General Whitaker,  
8 Petitioner says that if we accept your  
9 interpretation of 1396, that you will be able  
10 to get or benefit from a lifetime assignment  
11 that covers third-party payments for future  
12 medical needs.

13 What do you think of that?

14 MR. WHITAKER: Well, I think it's --  
15 it's not correct. It's not an -- it's not an  
16 implication of our position. It's not how  
17 Florida has implemented the statute. And I  
18 think that Florida's implementation of the  
19 statute is correct.

20 Florida -- in Florida, the lien can  
21 attach only to an injury for which Medicaid at  
22 least provided some payment. And that, I  
23 think, is a natural reading of the statute,  
24 because the statute provides -- for a different  
25 reading, I think -- for a different reason, I

1 think, than -- than -- than some of the -- of  
2 the things we've been discussing today. I  
3 think the reason is it's natural to think of an  
4 assignment of a right that is being made in  
5 exchange for a medical payment to be related in  
6 some way to that medical payment. And so I  
7 don't think that would be within the scope of  
8 the assignment.

9 Here, however, what we have is what  
10 everybody agrees is a valid assignment, and the  
11 only question is, does the state's payment for  
12 medical care extend to all medical care or only  
13 some medical care?

14 JUSTICE THOMAS: But what about future  
15 medical care? He's -- they -- he suggests that  
16 your reading would result in all future medical  
17 care --

18 MR. WHITAKER: No, Your Honor --

19 JUSTICE THOMAS: -- being covered.

20 MR. WHITAKER: -- it does not result  
21 in all future medical care -- consistent with  
22 Florida's -- result in the state being able to  
23 recover from all future medical care.

24 What has to happen is, if -- if the  
25 beneficiary -- if a Medicaid beneficiary is

1 injured and Medicaid pays for it, Medicaid  
2 first seeks reimbursement out of the past  
3 medical expenses portion of the recovery. But,  
4 if that amount is not sufficient to satisfy  
5 Medicaid's claim, then it may, if necessary,  
6 get the remaining part of the future medical  
7 expenses part of the recovery, what --

8 JUSTICE THOMAS: And, finally, the  
9 distinction that the Petitioner made between  
10 child support and medical care, what do you  
11 make of that?

12 MR. WHITAKER: I don't think it makes  
13 any sense. The statute says that the Medicaid  
14 program is assigned rights to support that are  
15 for the purpose of medical care. If that -- if  
16 that -- if that payment happened in a lump-sum  
17 amount that was for the purpose of medical  
18 care, the program would absolutely have a right  
19 to -- to use that money to reimburse its costs.

20 So I think -- I think that is actually  
21 a quite strong textual indication that  
22 Section 1396k is not limited in the way that  
23 the other side suggests, because the only  
24 example of a payment for medical care that we  
25 have in the statute does not fit their



1 description of how payments for medical care  
2 that come from tort recoveries should work.

3 JUSTICE THOMAS: Thank you.

4 MR. WHITAKER: So the -- the --

5 CHIEF JUSTICE ROBERTS: Counsel, does  
6 the state par -- ever participate in the  
7 underlying litigation that gives rise to the  
8 judgment or the settlement?

9 MR. WHITAKER: Well, certainly,  
10 Florida's statute allows us that authority. In  
11 terms of our practice right now, my  
12 understanding is that we don't do that just --  
13 just because we -- it's not cost-effective for  
14 it to do it that way, for us to --

15 CHIEF JUSTICE ROBERTS: Well, maybe  
16 not in every one, but if you have sort of ones  
17 where the amounts will be significant, that  
18 would avoid the allocation hearings after the  
19 fact, and you could address those things in the  
20 structuring of the -- of the settlement or the  
21 judgment, right?

22 MR. WHITAKER: Well, I'm not sure it  
23 would necessarily -- well -- well, I guess we  
24 would have an assignment for payment for -- for  
25 medical expenses. That's presumably what we

1 would be pursuing in that -- in that instance.

2 Yes, Mr. Chief Justice, I think that's  
3 right. I mean, certainly, we could bring these  
4 claims ourselves. I do think that, in general,  
5 it's more cost-effective for the beneficiary to  
6 bring these claims because, of course, after  
7 Ahlborn, the state -- the state's assigned  
8 rights doesn't even extend to pain and  
9 suffering. So, in most instances, the  
10 beneficiary is going to be suing anyway.

11 CHIEF JUSTICE ROBERTS: Well, you  
12 don't have to bring the actions yourself. You  
13 could have a provision in the state regulations  
14 or law that you need to get notice of  
15 particular settlements or judgments that  
16 implicate your rights to recovery, and then you  
17 could at the -- at the outset, you know,  
18 protect your interests in recovery of future  
19 expenses.

20 MR. WHITAKER: Well, that's right,  
21 Your Honor, and, indeed, our statute does  
22 require the beneficiary to provide notice. If  
23 we lose this case, though, there's a -- there's  
24 a limited amount we can do to protect our  
25 rights because no matter -- no matter how well

1 we protect our right to the medical expense  
2 portion of the recovery, it's -- it's -- it's  
3 in no event going to include the -- allow us to  
4 recover from future medical expenses.

5 And, again, we're only ever talking  
6 about recovering what Medicaid paid for in the  
7 past. Medicaid's -- Medicaid's claim is always  
8 limited to no more than what it paid for in the  
9 past.

10 And with respect, my -- the -- the --  
11 the theme that my other side -- the other side  
12 paints about, well, Medicaid can only get what  
13 it paid for, it just does not square with the  
14 language of the remainder provision, which  
15 express -- expressly contemplates that the  
16 state can recover out of -- out -- for expenses  
17 that it did not pay for.

18 And this Court made that quite clear  
19 in Ahlborn itself, and this is what this Court  
20 had to say in Ahlborn about the remainder  
21 provision.

22 JUSTICE SOTOMAYOR: Counsel, if that's  
23 true, and you've just conceded that k -- the  
24 lien created by k is a lien on the -- on past  
25 medical expenses that have been paid, correct?

1           MR. WHITAKER: That is absolutely  
2 true, Justice Sotomayor, but that --

3           JUSTICE SOTOMAYOR: All right. So I  
4 believe that the argument that the opposite  
5 side is making is, if that's the amount of your  
6 lien and you're saying that you are entitled to  
7 payment for -- from any medical source,  
8 correct, from -- for medical care from any  
9 third party, they're saying, if you read that  
10 as broadly as you're claiming, that means that  
11 you're entitled to collect for that past  
12 payment from any medical care from any third  
13 party, payment for medical care from any third  
14 party in the future, whether it's related to  
15 this injury or not.

16           MR. WHITAKER: No, no, Justice  
17 Sotomayor, that does not follow, as I was  
18 explaining --

19           JUSTICE SOTOMAYOR: I know. But the  
20 only way to not follow it is to break your lien  
21 from the source of the payment, meaning here --

22           MR. WHITAKER: No, no --

23           JUSTICE SOTOMAYOR: -- the payment  
24 that was assigned to you, you're saying,  
25 included an assignment for future medical care.

1 MR. WHITAKER: No, Justice --

2 JUSTICE SOTOMAYOR: And what -- and  
3 what the government is saying is the payment  
4 that you're assigned is the payment for past  
5 medical care, period.

6 MR. WHITAKER: Well, as I -- as I said  
7 earlier, I think there is -- there would be a  
8 question in other cases, not present --  
9 presented here, about what kinds of rights are  
10 within the scope of the assignment in the first  
11 place. And Florida has implemented its statute  
12 to say that an unrelated tort recovery would  
13 not be within the scope of the state's assigned  
14 rights in terms of whether the state has a  
15 right to payment at all.

16 JUSTICE KAGAN: But put --

17 MR. WHITAKER: Here --

18 JUSTICE KAGAN: -- put Florida's  
19 statute aside, because I -- I think that the  
20 question that Justice Thomas and Justice  
21 Sotomayor are asking is, what in your  
22 understanding of the Medicaid provisions would  
23 prevent a state from going that far?

24 MR. WHITAKER: I -- I guess I think  
25 the way I read the statute, Justice Kagan, is

1 that let's say that a Medicaid beneficiary gets  
2 injured and -- and has to -- and has to incur  
3 medical expenses, and the beneficiary knows  
4 there's a tort recovery.

5 I suppose, I think that in theory, and  
6 I -- I admit that this seems kind of  
7 unrealistic, the beneficiary could just say, I  
8 don't want to accept these medical expense  
9 payments, I want to take my chances and go  
10 after the tortfeasor myself and use that to pay  
11 the medical expenses.

12 And that actually happened in a case  
13 not with regard to a beneficiary but with a  
14 hospital that declined Medicaid -- Medicaid  
15 reimbursement and actually decided to seek the  
16 third-party recovery itself.

17 So I do think that in the statute  
18 there is a notion that the assignment concerns,  
19 when it's -- when you're talking about  
20 assignment of a tort claim -- and this is a --  
21 a common way of reasoning when you have  
22 conditions on the receipt of government  
23 funds -- I do think that there is a germaneness  
24 requirement, that when you're assigning a right  
25 to the state for -- specifically a right to a

1 tort recovery, that it's not anything. It's  
2 something that is related to that payment. But  
3 --

4 JUSTICE KAGAN: And -- and that's not  
5 in any particular provision that you're seeing  
6 that. You're just seeing that in the very idea  
7 of what an assignment is?

8 MR. WHITAKER: Yes. I think that's  
9 fair to say. And also just from the fact that  
10 it's a -- it's a spending program.

11 But, look, all those -- all that --  
12 all that, I think, is quite orthogonal to the  
13 issue we have here because what we have here is  
14 what everybody agrees is a right that the state  
15 has to payment for medical care.

16 The other side agrees that we can  
17 recover medical expenses, payments for medical  
18 care. And the only question is, does medical  
19 care also include future medical care? And it  
20 does.

21 JUSTICE KAGAN: Right, but --

22 JUSTICE BREYER: Future -- well,  
23 future -- here, it only involves recovery for  
24 past medical care. The question is what money  
25 can you collect it from. Am I right about

1 that?

2 MR. WHITAKER: Absolutely, Justice  
3 Breyer.

4 JUSTICE BREYER: Okay. So forget  
5 about collecting from the future. We're not  
6 talking about that. We're talking about  
7 collecting money earmarked for future payment  
8 in order to reimburse the state for past  
9 payment.

10 MR. WHITAKER: That's absolutely  
11 correct.

12 JUSTICE BREYER: Okay. So, as I read  
13 these together -- and please don't let me go  
14 off on some incorrect reading because they're  
15 complicated, all right?

16 One, first rule, in two provisions we  
17 haven't much talked about, hey, the victim has  
18 got some money. You can't touch it.

19 There's a no-lien provision. There is  
20 a no -- whatever the other one's called. No,  
21 you can't touch it, no recovery, no adjustment,  
22 no recovery, that's -- you can't touch it,  
23 State. I don't care how he got it. It's his.  
24 I overstate a little.

25 But exception, exception. Now the



1 first thing that talks about exception is  
2 there's an exception for our past money, you  
3 know, Medicaid's paid already, and you can get  
4 back what it says is where that victim has a  
5 right to payment for that thing you've spent by  
6 any other party for such -- such health care  
7 items or services. That "such" clearly refers  
8 to you have a right from the tortfeasor to  
9 payment for past.

10 That's no more about payment -- right  
11 to payment for future than it is to a right  
12 about for payment for balloons, for a right for  
13 payment in that part.

14 Then you have the next part, which is  
15 yours, and the next part says: Ah, but you  
16 should take an assignment, you can take an  
17 assignment, State, for payment for medical care  
18 from any third party.

19 Here, it doesn't say such. And so,  
20 literally, you've got your case right in that  
21 language. And the only difficulty there is it  
22 certainly seems to conflict with the language I  
23 read just before it because we have a system  
24 that says don't take any of their money. Then  
25 it says take some of the money for the past

1 stuff you paid, but take it only from, they  
2 have money coming from a future guy, a victim,  
3 a tortfeasor for that, and then you have  
4 something say take an assignment.

5 So it seems to me you're asking us to  
6 read these two provisions, higgledy-piggledy,  
7 slightly in conflict -- if not direct conflict,  
8 at least hard to make consistent -- and they're  
9 asking you, the government, to read them  
10 consistently with the whole spirit of the  
11 thing, which is leave the money with the  
12 Medicaid victim.

13 That's a long question, and I'm really  
14 interested if I got the analysis right, not the  
15 conclusion necessarily.

16 MR. WHITAKER: There is no conflict,  
17 Justice Breyer, between those two provisions.  
18 Subparagraph (H), which is the provision that  
19 you started out with about furnishing health  
20 care items or services, plays a different but  
21 complementary role in the scheme from 1396k.

22 Congress added subparagraph (H) to the  
23 statute in 1993 to give Medicaid additional  
24 payment rights, operating principally as  
25 against insurers, who were evading the

1 assignment provision in various respects.

2 So 1396a, sub -- subsection (a),  
3 paragraph (25), subparagraph (H), and that's --  
4 that's the provision you're referring to, is --  
5 is not in any way limiting the state's rights  
6 under an assignment. It is broadening it to  
7 make sure that Medicaid has an automatic right  
8 of subrogation when Medicaid makes payments,  
9 just like, Justice Kavanaugh, the -- the way  
10 that the -- the -- the Medicare -- the  
11 structure of the Medicare statute is exactly  
12 the same thing because what you have in  
13 Medicare is you have a broad provision, 26 --  
14 42 U.S.C. 2651, that gives the state broad  
15 authority to recover damages from tortfeasors.

16 But the most important point is that  
17 the Medicare secondary payer statute in 1395y,  
18 42 U.S.C. 1395y, similarly talks about  
19 providing Medicare an automatic right of  
20 subrogation when it comes to -- when -- when  
21 Medicaid makes certain payments and a private  
22 insurer may also be on the hook for those  
23 particular items or services.

24 And, indeed, in the government report,  
25 which -- which the United States cites as

1 reflecting the reason that Congress added  
2 subparagraph (H) to the statute in 1993, they  
3 explicitly modeled it on the Medicare secondary  
4 payer provision. So there's no conflict.

5 And, Justice Breyer, you mentioned  
6 four statutes. Well, I do think that we only  
7 need one statute to have authority here. So  
8 one is good enough.

9 And -- but the most important point is  
10 that in all the other provisions, apart from  
11 1396k, that my friends rely on, the language  
12 they rely on is simply not present in 1396k.

13 JUSTICE KAVANAUGH: Can I --

14 MR. WHITAKER: Nor --

15 JUSTICE KAVANAUGH: -- can I follow up  
16 on 1396k and follow up on Justice Kagan's  
17 question, because it seems that you're  
18 taking -- and I don't mean to load it by saying  
19 this word -- but a literal reading of 1396k,  
20 and the other side is saying, no, you have to  
21 read it in context with the other provisions  
22 and have it all make sense. And you say no.

23 But then you're presented with a  
24 hypothetical, maybe the absurd hypothetical,  
25 but it is a hypothetical that's been raised,

1 and you say, oh, well, there, don't read it  
2 literally. Actually, there, there's a  
3 germaneness requirement. And Justice Kagan  
4 asked you where that came from.

5 So aren't you at least acknowledging  
6 that you get to context rather than just within  
7 the four corners of 1396k?

8 MR. WHITAKER: Justice Kavanaugh, I'm  
9 happy to -- to -- to read it in context, and I  
10 have no quarrel with that, but whether or not  
11 that that contextual limitation that I was  
12 discussing from Justice Kagan is or is not in  
13 the statute, I think the important point is  
14 that the particular limitations that the other  
15 side would have you read into k cannot be right  
16 because there are various other explicit  
17 indications in the statute that that is not  
18 what k means.

19 And, again, I spoke of this. You have  
20 the statute's remainder provision. You have  
21 the right to spousal support, which doesn't fit  
22 their theory at all. Again, rights to spousal  
23 support that are for the purpose of medical  
24 care does -- does -- does -- does not fit --  
25 fit their theory.

1                   And -- and I think that the -- so --  
2                   so I think --

3                   JUSTICE KAVANAUGH: Well, some of what  
4                   you're just saying there answers another  
5                   question I have and I want to get more, which  
6                   is suppose -- and I know you disagree with this  
7                   -- but suppose we think (H) points one way and  
8                   -- against you, and k points a little bit in  
9                   favor of you.

10                   How would you suggest we go about  
11                   thinking about the resolution of that  
12                   discrepancy or conflict?

13                   MR. WHITAKER: Well, I -- I guess I do  
14                   -- I do think that -- that --

15                   JUSTICE KAVANAUGH: I think you're  
16                   saying you don't agree with the premise.

17                   MR. WHITAKER: Well, I -- I don't  
18                   agree with the premise, but I do think that --  
19                   you know, the government talked about  
20                   subparagraph (A) in paragraph (25) as being the  
21                   anchor provision. I actually think that, in  
22                   this context, it is very much that 1396k is the  
23                   anchor provision.

24                   And if you look at this Court's  
25                   decision in Ahlborn, this Court's analysis of

1 all of the third-party liability provisions was  
2 keyed off this key language in 1396k.

3 So I think it's fair to say that this  
4 Court in Ahlborn actually treated 1396k as the  
5 anchor provision, which --

6 JUSTICE KAVANAUGH: So prioritize k is  
7 what you would say?

8 MR. WHITAKER: I would say that. And  
9 I think that's supported by the fact that for  
10 16 years, before subparagraph (H) even existed  
11 in the statute, the only provision in the  
12 statute that spoke to the Medicaid program's  
13 payment rights was k. And it would be quite  
14 odd, I think, to say that Congress had just  
15 sort of forgotten for all this time to -- to  
16 put this explicit limit into k or, worse still,  
17 to say that actually Congress sort of impliedly  
18 repealed k when -- silently when it enacted  
19 (H), not to restrict Medicaid's payment rights  
20 but, rather, to take care of a specific problem  
21 that was -- that it was having with private  
22 insurers.

23 And that, I think, Justice Breyer, is  
24 the explanation for why subparagraph (H) is  
25 worded slightly differently than k, because it

1 is directed at -- primarily at insurers, who  
2 pay medical expenses for particular items and  
3 services, just like the Medicare secondary  
4 payer statute.

5 JUSTICE KAVANAUGH: What -- what about  
6 the idea that no one was even thinking about  
7 this until Ahlborn? Do you want to contest  
8 that? In other words, we're parsing language  
9 from a '77 and an '83 and -- but -- but,  
10 actually, until Ahlborn, the other side said no  
11 one was really --

12 MR. WHITAKER: Well --

13 JUSTICE KAVANAUGH: -- contemplating  
14 this precise issue.

15 MR. WHITAKER: -- well -- well, I  
16 think that actually probably -- that -- that --  
17 that supports my position, actually, I think,  
18 quite strongly because, consistent with Justice  
19 Barrett's question, I think counsel's answer  
20 was: Well, before Ahlborn, many states just  
21 assumed that they could get actually all med --  
22 all damages -- they could recover from all  
23 damages, even the TV, as Justice Breyer said.

24 And -- and Congress no doubt enacted  
25 Section -- subparagraph (H) against that



1 backdrop, knowing that the states had been  
2 administering the provision more broadly.

3 And I think that -- that's -- that  
4 supports quite strongly that Congress did not  
5 in subparagraph (H) silently overthrow --

6 JUSTICE KAVANAUGH: What's your best  
7 support for the idea that that was the baseline  
8 against which Congress was operating when it --  
9 in 1993?

10 MR. WHITAKER: Well, I don't have a  
11 specific case on me, Your Honor, but I do know  
12 that -- that that was -- I do -- I do -- I do  
13 think it's correct, counsel's statement. I  
14 can't point to a specific case right now, but I  
15 do think counsel's statement is correct.

16 JUSTICE KAVANAUGH: But you agree that  
17 that's the -- that was the understanding at the  
18 time?

19 MR. WHITAKER: Well, it may not have  
20 --

21 JUSTICE KAVANAUGH: And, obviously,  
22 that helps you, but I'll -- he can address it.

23 MR. WHITAKER: -- it may not have been  
24 the uniform understanding. It certainly was  
25 the understanding of the Department of Health

1 and Human Services, which, as this -- as this  
2 Court noted in Ahlborn, had two administrative  
3 adjudications that dated from the mid-'90s that  
4 basically interpreted the statute more or less  
5 to allow, indeed, require, states to recover  
6 third-party liabilities out of all medical  
7 damages.

8           And -- and, certainly, I -- I also  
9 think that there are -- so, yeah. So I think  
10 that there were -- there were a variety of  
11 reasons why Congress enacted that. And if you  
12 look at the enactment of subparagraph (H), it's  
13 very clear on the face of the amendment that --  
14 that created subparagraph (H) that Congress was  
15 intensely concerned with the -- with insurers  
16 because there are a variety of other amendments  
17 that Congress enacted at the same time  
18 specifically directed at insurers.

19           Now --

20           JUSTICE KAGAN: General, can we --  
21 let's take a case which meets your germaneness  
22 requirement, that the -- the future payments  
23 are -- you know, arise from the same injury or  
24 accident, all right? But let's say that the  
25 future payments are ones that the Medicaid

1 program would not pay for. In other words,  
2 let's say the Medicaid program does not pay for  
3 certain kinds of home health aides or something  
4 like that.

5 Are you saying that the state can also  
6 recover money for those services, services  
7 that, you know, to use the language of (a)(B),  
8 are really not available under the plan?

9 MR. WHITAKER: Not only could we do  
10 that, we could also do that clearly with  
11 respect to any past medical expenses that  
12 Medicaid had covered. Again, the remainder  
13 provision, I think, reflects that -- clearly a  
14 recognition, I think, that certainly as to past  
15 medical expenses, even if the beneficiary has  
16 incurred expenses out of pocket, Medicaid has  
17 priority over the recovery from those damages  
18 for all of its -- all -- all the medical  
19 expenses, not just expenses --

20 JUSTICE KAGAN: So -- but where do you  
21 get that? Because (a)(B) really does say  
22 available under the plan. If these -- if -- if  
23 this money is for care and services that are  
24 not available under the plan, how is it that  
25 the state can -- can get that?

1           I mean, then -- then k is not only  
2 fighting (H); then k is very much fighting  
3 (a)(B) and not only the provision of (a)(B)  
4 that, you know -- not only (B) but also (A), I  
5 guess is -- is the way I would say it.

6           MR. WHITAKER: Sure. And I -- I want  
7 to get to the point about where I get it from,  
8 which is the remainder provision, but to answer  
9 your question about (A) and (B) first --

10           JUSTICE KAGAN: And the reason I say  
11 it's important, right, because (a)(B) comes  
12 first, right? (H) might be this weird  
13 tag-along thing, but (a)(B) is first and --

14           MR. WHITAKER: I think, as the  
15 Petitioner in the opening brief noted at page  
16 48, subparagraph (A) does not speak to what the  
17 state can recover in any -- when it imposes a  
18 lien of this kind.

19           All (A) says, as I read it, is  
20 Medicaid plans, go out and find people who may  
21 owe money to the plan. It is not limiting in  
22 any way the scope of the state's recovery  
23 rights.

24           Ditto for (B), which -- which simply,  
25 as this Court noted in Ahlborn,

1 cross-references the liability that  
2 subparagraph (A) establishes. So this notion  
3 that those provisions somehow limited the pool  
4 of -- the state's pool of recovery all along  
5 since 1968, even though state Medicaid programs  
6 were merrily, apparently, administering their  
7 programs all this time to allow recovery for  
8 all damages --

9 JUSTICE KAGAN: Yeah. So I read you  
10 then as saying basically this is only a k case,  
11 you know? And this is very different from, I  
12 think, the -- the government's reading. Well,  
13 obviously, it is. But this is only a k case.  
14 We -- we should put aside (H) and we should  
15 also put aside (a)(B).

16 MR. WHITAKER: I don't think you  
17 should put them aside. I should -- I think you  
18 should read them to not derogate from the  
19 state's recovery rights under k. And I do want  
20 to address one thing because --

21 JUSTICE KAGAN: Well, I guess what I'm  
22 saying when I say "put aside" is because the  
23 way I read not -- (a)(B) and -- and not just  
24 (B), which Mr. Suri says is stronger for his  
25 position than (A), but really (A), to pay for

1 care and services available under the plan.  
2 And you're saying you can recover money even  
3 for care and services that are not available  
4 under the plan. And -- and so you're saying k  
5 just stands independent of (A), as well as of  
6 (H), and we should just put everything else in  
7 this statute out of our heads and just think  
8 about k?

9 MR. WHITAKER: Not at all. The  
10 language that you mentioned in subparagraph (A)  
11 does not speak to this issue. And I think the  
12 operative words in that provision are not so  
13 much "care and services available under the  
14 plan" but "liability to pay for."

15 And if you have, for example, a right  
16 of spousal support, which I think everyone  
17 would agree is a type of third-party liability  
18 covered by the statute, that right of spousal  
19 support for the purpose of medical care is  
20 available to pay for care and services  
21 available under the plan, even though the pool  
22 of money may have nothing to do whatsoever with  
23 any particular services Medicaid covered in the  
24 past. It's just money that is available to pay  
25 Medicaid's costs. That's what (B) -- that's

1 what (A) says. And that's what (B) says too.

2           And Mr. Suri cited the -- the language  
3 in subparagraph (B) that talks about in any  
4 case in which a legal liability is found to  
5 exist after medical assistance has been made --  
6 made available on behalf of the individual.  
7 That's just saying that somebody who Medicaid  
8 provided medical assistance for. It's not  
9 limiting the state's pool of recovery in any  
10 way. And -- and the -- the only --

11           JUSTICE KAVANAUGH: What about the  
12 language at the end of (B), right?

13           MR. WHITAKER: Well, it says "to the  
14 extent of such legal liability," which, as this  
15 Court noted in Ahlborn, is a reference to  
16 subparagraph (A), which I was -- as I was  
17 discussing with Justice Kagan, does not itself  
18 limit the pool of funds.

19           All -- all (A) and (B) are saying is  
20 go out and identify third parties, state  
21 Medicaid plans, and once you find them, recover  
22 to the extent they are liable. If you have a  
23 deadbeat spouse that owes child support, go out  
24 and -- and get that money to recover for  
25 Medicaid's costs. That's all that provision --

1 JUSTICE BARRETT: General Whitaker,  
2 all of the money? And I guess this just  
3 reflects that I'm not sure that I fully  
4 understand how it works in the context of  
5 spousal support or child support, because child  
6 support obviously isn't just for medical  
7 expenses. It's for clothing and -- and maybe  
8 schooling and all kinds of expenses, feeding  
9 the child.

10 So are you saying that the state can  
11 just go after the pool in an undifferentiated  
12 way?

13 MR. WHITAKER: Certainly not. And  
14 that's because the assignment right applies to  
15 rights to support that are "specified as  
16 support for the purpose of medical care by a  
17 court or administrative order."

18 So there is this -- so -- so we could  
19 definitely not get all of the support. We can  
20 get the support to the extent it is for medical  
21 expenses.

22 JUSTICE BARRETT: So would there be an  
23 administrative hearing to allocate it in a  
24 similar way that there would be in a tort  
25 settlement?



1           MR. WHITAKER: I'm not aware of -- of  
2 -- of that happening, Your -- Your Honor. I  
3 think it would have to be sort of a separate  
4 court order in order --

5           JUSTICE BARRETT: It just seems very  
6 odd since that's not how -- you know, you don't  
7 have child support, I -- I would think, in the  
8 normal course, earmarked. This is solely for  
9 medical expenses.

10          MR. WHITAKER: Right. But it does  
11 happen sometimes, as I understand it. I mean,  
12 most of the time what happens is that the  
13 spouse is ordered to just buy health insurance,  
14 but it can happen in other ways too, as I  
15 understand it.

16                 So -- but -- but it does happen.  
17 Florida does treat rights of spousal support  
18 somewhat differently from unallocated tort  
19 recoveries, to which the administrative  
20 proceeding applies.

21                 But I did want to address a little --

22           JUSTICE SOTOMAYOR: Counsel, I -- I'm  
23 afraid that I keep reading the child support  
24 section of this and it doesn't work any kind of  
25 assignment. All it says is that a state plan

1 for medical assistance shall provide that the  
2 person you're covering be required to cooperate  
3 with the state to establish paternity and -- to  
4 establish paternity and get child support.  
5 There's no assignment in it at all.

6 MR. WHITAKER: Well, the assign --  
7 JUSTICE SOTOMAYOR: But putting that  
8 aside, I'm a very simplistic person, okay?  
9 Under A, you say that the person is required to  
10 assign to you their entitlement to payment for  
11 past services only. They're -- you're not  
12 claiming that they have to assign to you  
13 payments for future care. So you -- that's  
14 correct, right?

15 MR. WHITAKER: Well -- well, no, Your  
16 Honor, that's not quite correct because I think  
17 that if Medicaid paid for an injury from --  
18 that -- from which the -- a tort recovery  
19 arose, then, yes, the assignment would  
20 encompass the right to payment for all medical  
21 expenses out of that.

22 JUSTICE SOTOMAYOR: That has -- that  
23 have been paid by you?

24 MR. WHITAKER: Well, we could -- we  
25 could -- we could only recover --

1 JUSTICE SOTOMAYOR: So are you saying  
2 that -- are you saying that if you sued the --  
3 the tortfeasor, that you would be obligated to  
4 sue for past and future expenses, whether  
5 you're paying for them or not?

6 MR. WHITAKER: Yes. But we obviously  
7 would always in any -- in any case be limited  
8 to recovering no more than we paid out in  
9 benefits. And, again --

10 JUSTICE SOTOMAYOR: Exactly. So, at  
11 the point of your suit, you could only recover  
12 from the tortfeasor that which you paid,  
13 correct?

14 MR. WHITAKER: No more than what we  
15 paid, but that -- that wouldn't --

16 JUSTICE SOTOMAYOR: Now then let me  
17 stop. But you're also arguing then that you  
18 could sue also for future expenses that you  
19 don't pay?

20 MR. WHITAKER: I think we could sue  
21 for all medical damages, which could include  
22 both medical expenses that Medicaid paid. It  
23 could include past expenses that Medicaid did  
24 not pay. And it could also include future  
25 medical expenses, which, as was noted in the

1 opening --

2 JUSTICE SOTOMAYOR: That's quite --  
3 that really then undoes (A), (B), (H), and all  
4 of the provisions of the Act, correct?

5 MR. WHITAKER: Oh, I don't think it  
6 undoes it -- undoes them at all. And just to  
7 answer your initial question, though, about the  
8 assignment, the assignment of support occurs in  
9 1396, subsection (a), paragraph (1),  
10 subparagraph (A), which does separately from  
11 subparagraph (C) provide for an assignment of  
12 the right to spousal support.

13 JUSTICE SOTOMAYOR: That seems  
14 extraordinary, that what you're reading into  
15 the statute, an anti-lien statute, that permits  
16 you only to get an assignment of what you have  
17 paid for.

18 Now you're saying the assignment under  
19 k is incredibly broader than that, whether you  
20 paid for it or not, whether you were required  
21 to pay for it or not, and future, that you're  
22 assigned the individual's entire rights.  
23 That's what you're telling me?

24 MR. WHITAKER: Justice Sotomayor, the  
25 assignment is always limited by the maximum

1 amount that Medicaid paid. If Medicaid pays  
2 all -- if Medicaid successfully recovers all of  
3 the medical expenses, then Medicaid will get  
4 its claim for past medical expenses fully paid.

5 And if there are any -- also any  
6 future medical expenses, the beneficiary will  
7 get the remainder. Likewise, if the  
8 beneficiary paid any past medical expenses, the  
9 remainder provision says that the beneficiary  
10 will get those as a remainder. But -- but if  
11 --

12 JUSTICE SOTOMAYOR: Does a beneficiary  
13 have to sue at all for past -- I don't see  
14 anywhere in here -- there's an assignment to  
15 the state, there's a subrogation by the state,  
16 but why should Medi- -- why should any of the  
17 recipients bother to sue for what you're going  
18 to be paid --

19 MR. WHITAKER: Well --

20 JUSTICE SOTOMAYOR: -- if you're going  
21 to take it all anyway?

22 MR. WHITAKER: -- we can't take it all  
23 under Ahlborn, Your Honor.

24 JUSTICE SOTOMAYOR: Well, no, because  
25 you're saying to me that if the pot is -- if

1 the pot exceeds what you paid, there's no pro  
2 rata that's required at all, so why bother?

3 MR. WHITAKER: I think that  
4 beneficiaries, even -- even if we were able to  
5 recover from future medical expenses, would  
6 also have substantial incentives to still bring  
7 suit. And even as to --

8 JUSTICE SOTOMAYOR: Oh, yes, for pain  
9 and suffering, for everything else. But why  
10 bother suing for past medical expenses at all?  
11 They should just sue for future.

12 MR. WHITAKER: Well, I think it's  
13 because, under the remainder provision, they  
14 would, in essence, have the upside. So -- so I  
15 think that they -- they have -- but -- you  
16 know, so they have an incentive both on the  
17 non-medical damages side and on the non-medical  
18 -- on the medical damages side certainly to  
19 bring suit.

20 CHIEF JUSTICE ROBERTS: Thank you,  
21 counsel.

22 Justice Thomas?

23 JUSTICE THOMAS: Just briefly, General  
24 Whitaker. I think I have this on.

25 The -- I asked Mr. Suri about

1     preemption, and you heard his answer. Just a  
2     brief comment from you on what you think about  
3     preemption in the context of Spending Clause  
4     cases like this.

5             MR. WHITAKER: Well, I think that  
6     there is a strong presumption against  
7     preemption and as well in Spending Clause cases  
8     that -- to -- to -- to read -- read Spending  
9     Clause statutes to impose obligations on the  
10    states that are not clear.

11            But I -- I think it's quite  
12    extraordinary for the federal government to  
13    read all -- apparently all of the state Medi --  
14    all 87 paragraphs of the state Medicaid plan  
15    requirements in 1396 subsection a to sort of  
16    permit any beneficiary to argue that state law  
17    is ipso facto preempted, which -- which I would  
18    have thought the United States would have  
19    thought is inconsistent with the Secretary's  
20    enforcement authority.

21            So -- so it's an extraordinary  
22    position that they're -- that -- that they're  
23    taking. And I can't imagine that those laws  
24    are preempt -- are preemption, that all of  
25    those provisions are preempted. And this Court

1 did not so hold in Ahlborn or Wos. This Court  
2 only held that the anti-lien provision has  
3 preemptive effect.

4 It certainly doesn't follow from that  
5 that any state law that doesn't comply with any  
6 state -- any of the many state Medicaid plan  
7 requirements in -- in subsection (A) of 1396a  
8 are preempted.

9 JUSTICE THOMAS: Thank you, Chief.

10 CHIEF JUSTICE ROBERTS: Justice  
11 Breyer, anything further?

12 Justice Alito?

13 Justice Sotomayor?

14 JUSTICE SOTOMAYOR: No, thank you.

15 CHIEF JUSTICE ROBERTS: Justice Kagan?

16 JUSTICE KAGAN: I would -- I would  
17 like to ask you, General Whitaker, about (I),  
18 because (I) does seem as though it's the mirror  
19 -- it should be the mirror image of k. k is  
20 talking about an individual being required to  
21 make an assignment, and then (I) is talking  
22 about an insurer being required to accept the  
23 assignment.

24 So you would think that the two would  
25 -- would be phrased the same way, but they're



1 not. (I) is phrased in a way that's very  
2 favorable to the other side because it talks  
3 about an item or service for which payment has  
4 been made under the plan.

5 So what are we to make of the fact  
6 that what is -- what should be a mirror image  
7 of k reads exactly the way you don't want it  
8 to?

9 MR. WHITAKER: I don't agree that it  
10 reads exactly the way I don't want it. I think  
11 it actually supports our idea that the two  
12 payment rights in 1396k and subparagraph (H)  
13 are independent.

14 And if you look at Romanette ii in  
15 subparagraph (I) -- and this is at page 3A of  
16 the government's appendix -- before the mention  
17 of the assignment provision, it says "except  
18 the state's right of recovery and the  
19 assignment to the state of any right of an  
20 individual or other entity to payment from any  
21 other party."

22 And I think that -- so I think that  
23 recognizes that there are two different payment  
24 rights that are at work here, one established  
25 by k -- because, otherwise, Congress wouldn't

1 have talked about two different rights of  
2 recoveries, one stemming from, I think,  
3 subparagraph (H) and the other stemming from  
4 1396k.

5           And it's not the mirror image at all,  
6 Your Honor, because subparagraph (I), as I read  
7 it, clearly only applies to insurers. There's  
8 a question about whether (H) does, but,  
9 clearly, (I) applies only to insurers because  
10 Romanette i talks about -- imposes on insurance  
11 companies obligations to identify -- to -- to  
12 -- to bring to Medicaid's attention when  
13 Medicaid beneficiaries have insurance coverage  
14 and the like, which would be nonsense as  
15 applied to anybody who is a potential  
16 tortfeasor because -- unless we're all insurers  
17 to everyone in the world.

18           So -- so I think that it is limited.  
19 And Mr. Suri said: Oh, well, it doesn't make  
20 -- (H) has no duty of cooperation. But I think  
21 the reason for that is because insurers have  
22 other applicable provisions that require them  
23 to cooperate with state Medicaid programs to  
24 help identify these liabilities, and Roman --  
25 and (I) is a very good example of that.

1           And I think it reflects, just like the  
2 story I was trying to tell with regard to (H),  
3 that these provisions are directed at a  
4 different problem. And -- and subparagraph (I)  
5 was enacted in 2005 because, even after the  
6 enactment of subparagraph (H), apparently,  
7 insurers were still -- as it turns out, they  
8 don't like paying money to Medicaid too much,  
9 and so they were doing other things to evade  
10 Medicaid's rights. And so Congress come along  
11 -- came along and enacted subparagraph (I).  
12 But it didn't do any more than it did when it  
13 enacted subparagraph (H), limit or enact -- or  
14 -- or -- or enact something that was  
15 declarative of an existing limit in -- in 1396k  
16 itself.

17           JUSTICE KAGAN: Thank you.

18           CHIEF JUSTICE ROBERTS: Justice  
19 Gorsuch?

20           Justice Kavanaugh?

21           JUSTICE KAVANAUGH: In your brief,  
22 General, you note that Florida spends about 28  
23 billion per year on Medicaid services, which is  
24 30 percent of the budget. How much would you  
25 save, roughly, if you prevailed in this case?

1           MR. WHITAKER: I've tried to get good  
2 numbers on that, Justice Kavanaugh.  
3 Unfortunately, I haven't been -- been able to.  
4 It's certainly something that's important to --  
5 to my agency. And -- and -- and I know that it  
6 can result in a substantial difference in  
7 individual cases, as noted by the multi-state  
8 amicus brief, which -- which touches on -- on  
9 this issue.

10           But, unfortunately, I don't have great  
11 numbers on that. But it is important to -- to  
12 Florida's Medicaid program.

13           JUSTICE KAVANAUGH: And, second,  
14 Mr. Suri helpfully said that nine states do it  
15 Petitioner's way and six states, I think he  
16 said, do it your way, and it was hard to tell  
17 with other states. Do you want to give your  
18 view on how the practices in the states --

19           MR. WHITAKER: Well, I'd be interested  
20 to know how he came up with nine. That's --  
21 that's different from the count we came up -- I  
22 guess we couldn't compare notes before the  
23 argument, but -- but we counted it as fewer. I  
24 thought that there were only five that we could  
25 find that explicitly allowed the recovery of

1 future. And most of those were the result of  
2 the -- of states' high -- high -- judicial  
3 decisions that said that that they had to.

4 I only thought that it was at most  
5 California and Vermont that had actually  
6 arguably done this on their own without some  
7 kind of judicial prompting, on their own, but I  
8 have no reason to -- it's a little bit unclear,  
9 and, obviously, it's difficult to --

10 JUSTICE KAVANAUGH: Why -- and that's  
11 my question -- why is it unclear --

12 MR. WHITAKER: Well -- well, I mean --

13 JUSTICE KAVANAUGH: -- in these 35  
14 other states?

15 MR. WHITAKER: -- it's somewhat  
16 unclear because many of these -- many of these  
17 statutes kind of don't speak to the issue. And  
18 a lot of the statutes are -- have the following  
19 structure where they just say something like  
20 the state has a lien up to the amount of  
21 medical assistance paid, and it doesn't really  
22 specify in -- in detail how exactly the state  
23 can -- can recover on that lien and the like.

24 So -- so there are some states that  
25 have explicitly said that you can recover

1 future medical expenses. Massachusetts is one.  
2 Oklahoma is one. Obviously in Florida.  
3 Florida is one. But -- but I could only -- we  
4 -- so -- so I do think that, you know, this  
5 Court's decision is very much going to set the  
6 tone for the country on -- on this issue, and,  
7 you know, state Medicaid programs are going to  
8 have to, you know, have a policy now, I think.

9 JUSTICE KAVANAUGH: Yes.

10 MR. WHITAKER: So --

11 JUSTICE KAVANAUGH: Thank you.

12 CHIEF JUSTICE ROBERTS: Justice  
13 Barrett? No?

14 Thank you, counsel.

15 JUSTICE SOTOMAYOR: Counsel, just --  
16 I'm sorry, Chief, just one question?

17 CHIEF JUSTICE ROBERTS: Sure.

18 JUSTICE SOTOMAYOR: Counsel, you just  
19 said that this decision will -- will force  
20 states to change. Your reading will force  
21 states to do what you're doing, correct?

22 MR. WHITAKER: I --

23 JUSTICE SOTOMAYOR: Because they're  
24 obligated, you're saying, under the statute to  
25 collect from whatever sources they can, so what

1 you're saying is those states who have contrary  
2 laws to yours or explicit laws to the contrary,  
3 they would be preempted?

4 MR. WHITAKER: Well, I don't think the  
5 -- no, I don't think they would be preempted,  
6 Justice Sotomayor, because I don't believe that  
7 all of the state Medicaid plan requirements in  
8 subsection (A) of 1396a are preemptive.

9 I do think you're -- it's certainly  
10 true, Justice Sotomayor, that the states would  
11 have an obligation likely to recover those  
12 third-party liabilities, although I agree with  
13 Mr. Suri that the statute does build in some  
14 flexibility for state Medicaid programs in  
15 seeking those recoveries and allows state  
16 Medicaid programs to weigh costs and benefits  
17 and only requires the identification of  
18 liabilities to the extent that it is  
19 reasonable.

20 CHIEF JUSTICE ROBERTS: Thank you,  
21 counsel.

22 Rebuttal, Mr. Gowdy.

23 REBUTTAL ARGUMENT OF BRYAN S. GOWDY  
24 ON BEHALF OF THE PETITIONER

25 MR. GOWDY: 1396k, Justice Kagan, you

1 asked if it was inapplicable. We would say it  
2 is the least applicable, that this provision  
3 authorized states to directly pursue third  
4 parties for medical expenses paid by Medicaid,  
5 and in doing so, it abrogated the common law  
6 rules against claim splitting and against the  
7 assignment of personal injury actions. And  
8 Florida has not exercised those rights in this  
9 case.

10 Justice -- or the Chief Justice asked  
11 about is this ever used? It is occasionally in  
12 mass torts. You all may recall the tobacco  
13 settlements from the mid-1990s. Those were  
14 cases brought by states against tobacco  
15 companies for past medical expenses paid by  
16 Medicaid. Generally, the states don't jump  
17 into individual lawsuits. This provision gives  
18 them real force, but it's really the least  
19 applicable here compared to the other  
20 provisions we've been discussing today.

21 And, Justice Kagan, you brought up the  
22 -- the home healthcare, and, Justice Barrett,  
23 you brought up some questions about childcare,  
24 and I would like to try to tie them together.

25 The state's position here is a



1 hyper-literal reading of the words "any rights  
2 to payment for medical care." Reading that  
3 hyper-literally, it's not just a future tort;  
4 it's a future insurance policy, it's a future  
5 parent who's ordered to pay for some type of  
6 medical care.

7           And under the state's reading, even if  
8 that future insurance policy is paying for  
9 things or -- or the parent is ordered to pay  
10 for things not covered by medical care -- I'm  
11 sorry, by Medicaid, the state told you today  
12 they could take it.

13           So, for example, if Ms. Gallardo's  
14 father was ordered to pay for the special  
15 medical equipment that she needs to get to her  
16 appointments that is not covered by Medicaid,  
17 the state's position is that they could take  
18 that money.

19           And, finally, the state has talked --  
20 has danced around the other provisions, in  
21 particular, (H). You've been told repeatedly  
22 it was primarily for insurers.

23           The plain language says "third party."  
24 A third party includes a tortfeasor. And this  
25 Court applied that language in Ahlborn. So

1 it's not primarily for insurers. It's for this  
2 instance here and is directly applicable.

3 And (A) and (B), as we have indicated,  
4 which the state has not addressed in their  
5 brief, is for the legal liability of third  
6 parties to pay for care and services available  
7 under the plan.

8 And we did say -- we did point out at  
9 page 48 of our brief that there was certainly  
10 some confusion. We cite a case called White  
11 from New Mexico in 1974. There was some  
12 confusion about what that language meant by  
13 some courts. I see I'm -- could I just  
14 conclude? Just --

15 CHIEF JUSTICE ROBERTS: Certainly.

16 MR. GOWDY: Just -- and (H) clarifies  
17 that without a doubt in our view.

18 CHIEF JUSTICE ROBERTS: Thank you,  
19 counsel. The case is submitted.

20 (Whereupon, at 11:47 a.m., the case  
21 was submitted.)

22

23

24

25

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