



Peter J. Valeta

Of Counsel

Chicago

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Peter J. Valeta has been practicing since 1980 in complex commercial and corporate business litigation. He has handled matters in both state and federal courts nationwide, and has regularly argued matters in appellate courts on both levels. He has extensive experience in class actions.

Pete's career has emphasized insurance, representing major personal lines carriers, including matters concerning policy interpretation, coverage determinations, statutory interpretation and compliance, and claims handling issues, including bad faith. These have involved a wide range of policies and coverage, including automobile (liability, uninsured and underinsured motorist, no-fault and other coverages), homeowners and other property and liability policies, and umbrella and other excess coverages. They have also involved issues pertaining to life insurance and financial products (e.g., annuities).

He has often been engaged to develop and implement strategies to coordinate litigation of both class actions and individual cases on particular topics in order to promote the development of cohesive and consistent case law, as well as to ensure complimentary litigation strategies. He has also represented insurers in litigation pertaining to their business activities, such as contracts, and arising from relationships with independent contractor agents (both disputes with agents and with customers arising from such agents' activities).

Experience

Secured a ruling by the Florida Supreme Court that under personal injury protection coverage ("PIP") for reasonable medical expenses arising from an auto accident, when a provider bills less than the applicable statutory fee schedule payment limitation for a particular service, our insurance company client was not required to pay the provider's charges at the higher statutory fee schedule payment amount, because the state's statutory PIP fee schedule payment limitation sets a "ceiling", not a "floor", so that the policy's language that allows payment of bill amounts less than the statutory fee schedule limitation at the billed rate was valid.

Won summary judgment on behalf of an insurance company client alleged to have violated the Employee Retirement Income Security Act (ERISA) when it refused to pay the plaintiff a portion of his deceased wife's life insurance benefit, and instead made the payout to the primary beneficiaries she had designated. In granting our motion for summary judgment, and denying the plaintiff's cross-motion, the court reasoned that the plaintiff's speculation that a conspiracy existed to cover up an internal change to the plan documents removing him as a primary beneficiary did not create a genuine issue of material fact, and held that the company's practices and procedures in administering its employee benefit plan satisfied its duties under ERISA and were properly followed.

Removed a putative declaratory judgment class action to federal court under CAFA, and successfully obtained reversal of a remand order on appeal, on the grounds that the underlying substantive issue (the sufficiency of language in personal injury protection policies electing to limit reimbursement as per statutorily authorized fee schedules) defined an actual amount in controversy (the difference between billed amounts and the reimbursement limitations). Subsequently obtained summary judgment that the policy language clearly and unambiguously informed insureds that the insurance company had elected to use the statutory fee schedules.

Practice Areas

- Insurance Coverage
- Casualty & Specialty Lines Coverage
- Appellate & Supreme Court
- Class Actions

Education

- University of Miami School of Law, J.D., *cum laude*, 1980
- University of Pittsburgh, B.A., 1974

Bar Admissions

- Illinois
- Florida

Court Admissions

- U.S. Court of Appeals for the Fourth Circuit
- U.S. Court of Appeals for the Fifth Circuit
- U.S. Court of Appeals for the Sixth Circuit
- U.S. Court of Appeals for the Seventh Circuit
- U.S. Court of Appeals for the Eleventh Circuit
- U.S. District Court -- Northern District of Illinois
- U.S. District Court -- Colorado
- U.S. District Court -- Western District of Michigan
- U.S. District Court -- Northern District of Florida
- U.S. District Court -- Southern District of Florida
- U.S. District Court -- Middle District of Florida
- U.S. Tax Court

Affiliations

- Chicago Bar Association
- American Bar Association, Litigation Section
- Chicago Counsel of Lawyers

Awards & Honors

- Leading Lawyers Network, Top Illinois Practitioner
- Martindale-Hubbell- AV rated
- Top Civil Defense-Related Lawyer in Illinois-Chicago Lawyer

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Supervised and coordinated the defense of more than 35,000 individual cases, as well as several class actions, challenging the sufficiency of language in personal injury protection policies electing to limit reimbursement per statutorily authorized fee schedules, with the overall goal of developing favorable appellate resolution of the issue. Briefed, argued and secured unanimous affirmance in three appellate districts in Florida that the policy language clearly and unambiguously informed insureds that the insurance company had elected to use the statutory fee schedules. Appealed one unfavorable decision to the Florida Supreme Court, and secured a final favorable determination that the policy language unambiguously stated the client's election to limit reimbursement to the statutory fee schedules. Pursued other appeals in related proceedings to establish uniform application of this decision, including its application to matters in which petitions for certiorari to intermediate appellate courts are pending.

Secured a jury verdict in favor of an insurance company client sued for alleged fraud and unfair trade practices in connection with the plaintiff's purchase of an agency branch, for which the plaintiff sought nearly \$2 million in damages. At the conclusion of a week-long trial, the jury deliberated for only two hours before finding in the client's favor on both claims.