The Opioid Crisis -Legal Issues and Recent Developments

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THE OPICISIS

- Everyday, more than 90 Americans die from opioid overdose
- Misuse of and addiction to opioids including prescription pain medications, heroin, and synthetic opioids such as fentanyl - is a serious public health crisis that threatens our social and economic welfare
- The CDC estimates the "economic burden" of prescription opioid misuse in the U.S in \$75.5 billion, a year, including the costs of healthcare, lost productivity, addiction treatment, and criminal justice involvement
- How did this happen? In the late 1990's, pharmaceutical companies reassured the medical community that prescription opioid pain relievers were rarely addictive and prescriptions for these substances increased

THE OPICISIS

- Over time, diversion and misuse of these medications became rampant before it became clear that these medications could be highly addictive
- o Opioid overdose rates increased dramatically

OPIOID CCISIS STATISTICS

- In 2015, more than 33.,000 Americans died as a result of an opioid overdose, including prescription opioids, heroin, and illicit fentanyl
- In 2015, 2 million people in the U.S suffered from substance use disorder related to prescription opioid pain relievers, and 591,000 suffered from heroin use disorder
- 21 to 29 percent of patients prescribed opioids for chronic pain misuse them
- Between 8 and 12 percent develop an opioid use disorder
- An estimated 4 to 6 percent who misuse prescription opioids transition to heroin
- About 80 percent who use heroin first misused prescription opioids

Source: National Institute on Drug Abuse, June 2017

MISSOURI AND KANSAS REGULATION OF CONTROLLED SUBSTANCES

- In Missouri, a controlled substance is a drug or other substance that comes under the jurisdiction of the Federal Controlled Substances Act of 1970
- Regulated substances include narcotics, depressants, stimulants, hallucinogens and anabolic steroids
- Schedules I thru V vary based upon potential for abuse and medical usefulness. Schedule I substances have a high potential for abuse and no accepted medical use in the U.S Schedules II-V have an FDA – approved therapeutic use and decreasing levels of abuse potential
- In Missouri, the Comprehensive Drug Control Act of 1989, administered by the Bureau of Narcotics and Dangerous Drugs in the Missouri Department of Heath and Senior Services, closely parallels federal law
- The statutes are in Chapter 195 RSMO; state regulations are in 19 CSR 30 1.00 through 1.078

MISSOURI AND KANSAS REGULATION OF CONTROLLED SUBSTANCES

- Controlled substance list is at RSMO Sec. 195.017 and listed by schedule; can also be found at www.health.mo.gov/BNDD
- In Missouri, controlled substance offense statutes are in Chapter
 579 RSMO
- In Kansas, the state controlled substances authority is the Kansas Board of Pharmacy. The Kansas controlled substance statute is at K.S.A 65 4101 et seq. and the controlled substance rules are at K.A.R 68-20-1 et seq.

KANSAS CONTROLLED SUBSTANCE TRACKING

- Kansas does have a prescription drug monitoring program in operation since October 2010
- The Kansas prescription monitoring program statute is at K.S.A 65-1681 through 65-1694
- The program, called K TRACS, also has a detailed website and dispenser's guide at www.pharmace.ks.gov/k-tracs
- K-TRACS regulations are at K.A.R 68-21-1

MISSOURI CONTROLLED SUBSTANCE TRACKING

- Missouri does not have a state-wide monitoring program. However, St.Louis county has adopted a prescription drug monitoring program, CPDMP, by ordinance. To date, 34 of Missouri's 114 counties have joined the program by adopting a similar ordinance
- The Missouri legislate has tried for years to pass a statewide PDMP

THE WEST VIRGINIA LITICATION

- Cabell Country Commission v. AmerisourceBergen Drug Corporation, et al.
- Us.s District Court for the Southern District of West Virginia, Case 2:17 cv
 11111, filed March 9, 2017
- Cabell County Commission is a public corporation and political subdivision; not an agency or agent of the state
- Suit names ten defendants, collectively referred to as "Defendant Wholesale Distributors" that comprise the chain of distribution of prescription opiates, primarily hydrocodone and oxycodone, and known to have sold 40 million doses to Cabell County between 2007 and 2012
- Alleges a duty under 21 U.S.C. 823 to monitor, detect, refuse and report suspicious orders of prescription opiates
- Alleges foreseeable harm of breach of this duty is diversion of the prescription opiates for nonmusical purposes

THE WEST VIRGINIA LITICATION

- Claims damages in the form of significant rates of "drug poisoning", opiate abuse, addiction, morbidity and mortality that is a temporary public nuisance and hazard to public health and safety
- Seeks economic, noneconomic and punitive damages to eliminate the public health hazard and to abate the public nuisance caused by the opioid epidemic

THE CHIO LITICATION

- State of Ohio, ex rel. Mike DeWine, Ohio Attorney General v Purdue Pharma L.P., et al
- In the common Pleas court of Ross County, Ohio, Civil Division
- Suit names 18 defendant pharmaceutical manufacturers including Purdue, tera, Cephalon, Johnson & Johnson, Janssen, Endo, Allergan and Watson
- Complaint includes extensive factual allegations regarding defendants' marketing strategies, use of independent third parties including key opinion leaders and front groups
- Defendants alleged to have misrepresented risks and benefits of opioids, targeted vulnerable prescribers and patients and engaged in a false and deceptive marketing scheme

THE CHIC LITICATION

- · Six specific causes of action
 - Statutory Public Nuisance
 - Common Law Public Nuisance
 - Unlawful Consumer Sales Practices
 - Medical Fraud
 - Common Law Fraud
 - Violations of Ohio Corrupt Practices Act (Pattern of Racketeering Activity)

Broad Damage Allegations

- State Medical and Bureau of Workers' Compensation suffered financial harm due to unnecessary opioid prescriptions
- Ohio consumers paid for unnecessary prescriptions
- seek abatement of public nuisance
- seeks compensatory, punitive, and treble damages and attorneys' fees

THE MISSOURI LITICATION

- The State of Missouri, ex red. Joshua D. Hawley, in his official capacity as
 Missouri Attorney General v. Purdue Pharma, L.P., et al.
- Filed June 21, 2017 in the Circuit Court of St. Louis City
- · Purdue, Endo, Janssen and Johnson & Johnson named as defendants
- "Missouri faces an urgent public health crisis."
- In 2014, nearly half of all opioid related hospitalizations and ER visits in Missouri occurred in the St.Louis area, and the State of Missouri paid for approximately one-third of those visits
- Court I Violations of Missouri Merchandising Practices Act Deception
- Court II MMPA Fraud and Fraudulent Misrepresentation
- · Court III MMPA False Pretense
- · Court IV MMPA Misrepresentation

THE MISSOURI LITICATION

- Court V MMPA Lack of Reasonable Basis for claims of Performance
- · Court VI MMPA Unfair Practices
- Court VII MMPA Concealment, Suppression, and Omission of Material Facts
- · Court VIII MMPA Unlawful "Half-Truths"
- Court IX Violations of Sec. 191,900 191,194 False claims to
 Mo HealthNet Program

IMPORTANT REGULATORY GUIDANCE AFFECTING CLINICAL PRACTICE

- CDC Guideline for Prescribed Opioids for Chronic Pain United
 States, 2016
 - "This guideline provides recommendations for primary care clinicians who are prescribing opioids for chronic pain outside of active cancer treatment, palliative care, and end-of-life care."
 - Also see CDC checklist for prescribing opioids for chronic pain as well as website (http:/cdc.gov/drugoverdose/ prescribingresources.html)
- o 35 page guideline with 223 references
- Represents a significant change in views regarding use of opioids for chronic pain

KANSAS IMPORTANT REGULATORY GUIDANCE AFFECTING CLINICAL PRACTICE

- Joint Policy Statement of the Kansas Boards of Healing Arts, Nursing and Pharmacy on the use of controlled substances the the treatment of chronic pain
- Important principles for treating chronic pain:
 - Patient Assessment
 - Treatment Plan
 - Informed Consent and Agreement for Controlled Substance Treatment
 - Periodic Review
 - Consultation
 - Medical Records
 - Compliance with Controlled Substances Laws and Regulations
 - Important Definitions of Terms

FDA POLICY INITIATIVES ON THE OPIOID EPIDEMIC

- See statement by FDA commissioner Scott Gottleib, M.D F.D>A. taking new steps to help assess opioid drugs with abuse - deterrent properties
- o FDA Opioid Action Plan
 - Expand use of advisory committees
 - Develop warnings and safety information for immediate release (IR) opioid labeling
 - Strengthen post market requirements
 - Update Rise Evaluation and Mitigation Strategies (REMS) Program
 - Expand access to abuse-deterrent formulations (ADFS) to discourage abuse
 - Support better treatment including access to Narcan (Naloxone)
 - Reassess the risk benefit approval framework for opioid use

FDA POLICY INITIATIVES ON THE OPIOID EPIDEMIC

- See. Califf, A Proactive Response t. Prescription Opioid Abuse, N
 Eng J Med 2106; 374: 1480 1485
- FDA on June 8, 20017 request removal of Opana ER for risks related to abuse
- IMPORTANT FDA Education Blueprint for Heath Care Providers
 Involved in the Management or Support of Patients with Pain (May 2017)