## BEFORE THE JUDICIAL PANEL ON MULTIDISTRICT LITIGATION

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In re:

INFANTS BORN OPIOID-DEPENDENT PRODCUTS LIABILITY LITIGATION MDL No. 2872

## BRIEF BY AMERISOURCEBERGEN CORP., CARDINAL HEALTH, INC., AND MCKESSON CORP. IN OPPOSITION TO NAS PLAINTIFFS' MOTION FOR <u>COORDINATED OR CONSOLIDATED PROCEEDINGS</u>

No reason exists to establish a separate opioid-related MDL based solely on the identity of the plaintiffs, when those plaintiffs' liability claims are identical to claims already consolidated in the opioid litigation MDL in the Northern District of Ohio, *In re National Prescription Opiate Litigation*, MDL No. 2804 ("Opioid MDL"). Thus, pursuant to Rule 6.1(c) of the Rules of Procedure for the United States Judicial Panel on Multidistrict Litigation, AmerisourceBergen Corp., Cardinal Health, Inc., and McKesson Corp. ("Distributors") oppose Movants' motion to coordinate or consolidate proceedings in a new MDL, *In re: Infants Born Opioid-Dependent Products Liability Litigation*, MDL No. 2872.

A group of plaintiffs representing classes of children born with Neonatal Abstinence Syndrome ("NAS Plaintiffs") have moved to separate themselves from the Opioid MDL. The Opioid MDL, which is not yet even a year old, contains more than 1,300 actions. Although initially most of those cases involved claims brought by local governments, the Opioid MDL currently includes claims from many other categories of plaintiffs—including Indian tribes, third-party payors, hospitals and medical providers, insurance policyholders, and NAS Plaintiffs themselves. Though these different plaintiffs may present some varying legal and factual issues, a common thread unites them: each case presents "common factual questions about, *inter alia*,

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the manufacturing and distributor defendants' knowledge of and conduct regarding the alleged diversion of these prescription opiates, as well as the manufacturers' alleged improper marketing of such drugs." *In re Nat'l Prescription Opiate Litig.*, 290 F. Supp. 3d 1375, 1378 (J.P.M.L. 2017).

The attorneys representing the NAS Plaintiffs have twice moved to establish a separate track within the Opioid MDL for their cases. The Opioid MDL Court denied their first motion, and their second motion remains pending. Not content to await that court's decision, or perhaps to make an end run around it, these attorneys now have moved to create a separate MDL. But "[t]he Panel does not aspire to the role of an appellate court for disaffected MDL litigants." In re Oil Spill by the Oil Rig "Deepwater Horizon" in the Gulf of Mexico, 961 F. Supp. 2d 1355, 1357 (J.P.M.L. 2013). The NAS Plaintiffs' arguments are fundamentally about case management concerns, although they dress them up in constitutional garb. And the Panel has "long left the degree of coordination of involved actions to the sound discretion of the transferee judge." In re: Walgreens Herbal Supplements Mktg. and Sales Practices Litig., 109 F. Supp. 3d 1373, 1376 (J.P.M.L. 2015). Indeed, in its initial transfer order in the Opioid MDL, the Panel recognized that concerns could arise in the future over whether the claims of certain types of plaintiffs should be or remain in that MDL. The Panel's response, "[a]s always," was to "trust such matters to the sound judgment of the transferee judge." In re Nat'l Prescription Opiate Litig., 290 F. Supp. 3d at 1379.

The NAS Plaintiffs' motion to consolidate should be denied.

# I. NAS PLAINTIFFS' CASES ARE ALREADY, OR SHOULD BE, IN THE OPIOID MDL.

The cases in the Opioid MDL are built around "common factual questions about, inter alia, the manufacturing and distributor defendants' knowledge of and conduct regarding the

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alleged diversion of these prescription opiates, as well as the manufacturers' alleged improper marketing of such drugs." *In re Nat'l Prescription Opiate Litig.*, 290 F. Supp. 3d at 1378. Although they downplay this fact in their motion, NAS Plaintiffs do not truly deny that their cases focus upon these common factual questions. As one of their complaints (*Flanagan v. Purdue Pharma, L.P., et al.*) summarizes it, "Plaintiffs bring this class action to eliminate the hazard to public health and safety caused by the opioid epidemic and to abate the nuisance caused by *Defendants' false, negligent and unfair marketing and/or unlawful diversion of prescription opioids*." ECF No. 1-6, ¶ 5 (emphasis added). That statement is true of essentially every complaint in the Opioid MDL. Moreover, the schedule attached to the NAS Plaintiffs' motion includes seven actions, all but one of which are *already in* the Opioid MDL. These cases therefore fit directly in the scope of the current Opioid MDL.

NAS Plaintiffs suggest that their cases espouse different theories, seek different damages, and may need some unique discovery. Br. in Supp. of Mot. for Transfer, ECF No. 1-1 at 3 ("NAS Br."). This is in large part not true, however. NAS Plaintiffs bring nuisance, negligence, and civil conspiracy claims, like most plaintiffs in the Opioid MDL. *See* ECF No. 1-6 ¶¶ 172–186, 187–204, 212–218. These claims allege the same wrongdoing—and will require the same discovery of defendants—as others in the Opioid MDL. True, the NAS Plaintiffs' cases would have unique discovery on the plaintiff's side, but so does every other case. And even here, NAS Plaintiffs are less unique than they suggest—other complaints in the Opioid MDL discuss the problem of NAS and seek damages for costs stemming from the condition. *See, e.g.*, Fourth Amended Complaint, *City of Chicago v. Purdue Pharma, L.P.*, No. 17-md-2804 (N.D. Ohio), ECF No. 511, ¶ 789(d) (alleging harm to "[i]nfants born to mothers who abuse opioids [and] have suffered neonatal abstinence syndrome"); *id.* ¶ 854 (alleging that "City's health plans" have

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paid for costs such as "intensive care for infants born addicted to opioids"); Second Amended Complaint, *City of Cleveland v. Purdue Pharma, L.P., et al.*, No. 17-md-2804 (N.D. Ohio), ECF No. 508, ¶ 682 (alleging "a dramatic rise in the number of infants who are born addicted to opioids"); *id.* ¶ 862(g) (alleging injury in the form of "[c]osts for providing treatment of infants ... born dependent on opioids").

In any event, the Panel has long recognized that "Section 1407 does not require a complete identity of common factual issues or parties as a prerequisite to transfer, and the presence of additional facts is not significant where the actions arise from a common factual core." *In re Walgreens Herbal Supplements*, 109 F. Supp. 3d at 1376. That "common factual core"—the nationwide marketing, sales, and distribution practices of defendants—exists here. Indeed, the parties in the Opioid MDL are in the early stages of discovery regarding that "common factual core." NAS Plaintiffs have no justification for moving out of the Opioid MDL at this early point. It is "quite impossible to see" how a new opioid MDL created now "would not result in duplicative discovery and pretrial motion practice, as well as other redundant pretrial proceedings." *In re Oil Spill*, 961 F. Supp. 2d at 1356. In addition, the factual overlap between these cases and the others in the Opioid MDL makes "inconsistent pretrial rulings" a distinct concern. *In re Yahoo! Inc. Customer Data Security Breach Litig.*, 223 F. Supp. 3d 1353, 1354 (J.P.M.L. 2016).

*In re Oil Spill* is instructive. In that case, a set of plaintiffs moved to carve their claims out of a pre-existing MDL that was much more advanced than this one—it had been proceeding for three years, and large classes of plaintiffs already had entered into settlements with a major defendant. 961 F. Supp. 2d at 1356. The Panel found the motion to carve plaintiffs' claims out "an extraordinary request" with "little to recommend it." *Id.* As here, the movants' cases shared

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"multiple factual and legal issues" with those in the MDL, and proceedings were ongoing that "involve[d] issues central to *all* related actions." *Id.* at 1356–57 (emphasis added). Creating a new MDL over those same issues, the panel recognized, would not "serve Section 1407's purposes" but "would subvert them." *Id.* at 1357. If a separate MDL was not appropriate for those plaintiffs in a mature, 3-year-old MDL, then a new opioid MDL is not warranted here.

# II. NAS PLAINTIFFS ARE INAPPROPRIATELY ATTEMPTING TO RELITIGATE OR APPEAL CASE MANAGEMENT ISSUES.

NAS Plaintiffs' counsel recently opposed transfer to MDL No. 2804 in one of their cases, *Doyle v. Actavis LLC, et al. See* Br. in Supp. of Mot. to Vacate, MDL No. 2804, ECF No. 2398-1 ("Doyle Br."). As that opposition demonstrates, their complaints stem from management disputes. First, they complain that the Opioid MDL Court denied their initial motion to create a separate NAS Plaintiff track in the Opioid MDL. Doyle Br. at 6. Second, NAS Plaintiffs' counsel have "sought to monitor discovery and offer suggested topics and questions" in the MDL, but they allege that the Plaintiffs' Executive Committee have not included them. *Id.* at 7. These complaints provide a wholly inadequate basis for creating a new MDL. Airing them here is an improper end-run around the traditional freedom given to transferee judges to shape the MDLs they manage.

Within an MDL, there frequently are separate "tracks" of different categories of cases in order that the MDL court may better manage discovery and motions practice. The number and nature of those tracks has always been up to the transferee judge to determine. *See In re Hyundai and Kia Fuel Economy Litig.*, MDL No. 2424, 923 F. Supp. 2d 1364 (J.P.M.L. Feb. 5, 2013) ("If the transferee judge views establishing separate tracks for the different companies appropriate, then he can do so, but that is also a matter dedicated to his discretion."). Accordingly, parties in an MDL should direct concerns about track-related case management

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issues to the transferee judge. *In re Medical Waste Servs. Antitrust Litig.*, 277 F. Supp. 2d 1382, 1383 (J.P.M.L. 2003) ("The concerns of the objecting plaintiff that Section 1407 centralization ... will somehow retard the pace at which his claims are litigated should be addressed to the transferee judge ...."). NAS Plaintiffs did exactly that—they sought their own separate track from the Opioid MDL Court, which thus far, in its discretion, has not created such a track. NAS Plaintiffs may be unhappy with that decision, but the Panel is not an "appellate court" in which they can seek review of that decision. *In re Oil Spill*, 961 F. Supp. 2d at 1357; *see also In re Wells Fargo Inspection Fee Litig.*, 158 F. Supp. 3d 1366, 1367 (J.P.M.L. 2016) ("The Panel has neither the statutory authority nor the inclination to review decisions of district courts, whether they are transferor or transferee courts.").

The use of Executive Committees is another traditional tool that transferee judges can employ to achieve the efficiencies that Section 1407 seeks. *In re Tribune Company Fraudulent Conveyance Litig.*, MDL No. 2296, 831 F. Supp. 2d 1371 (J.P.M.L. Dec. 19, 2011) (recognizing that "[t]he use of liaison counsel, lead counsel and steering committees" can help smaller litigants and "lead[s] to an overall savings in transaction costs" from centralization). Necessarily, however, the existence of an Executive Committee means that not every counsel may serve on it or may have as much input as they may wish. These issues, too, are for the transferee judge to assess and manage. *See* Transfer Order, *In re Oil Spill*, MDL No. 2179, ECF No. 1561 (Aug. 9, 2013) at 2 (complaint that "Plaintiffs' Steering Committee cannot adequately or ethically represent" movants "is properly directed to [the transferee judge] and not to [the Panel]"). Indeed, the Panel earlier dismissed an argument in the Opioid MDL that a plaintiff would lose its right to choose its own counsel by being included in the MDL. As the Panel recognized, "[p]laintiff's counsel can ask to join the MDL leadership and, of course, plaintiff

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may keep its own lawyers throughout the proceeding." Transfer Order, MDL No. 2804, ECF No. 1134 (Apr. 5, 2018) at 2.

NAS Plaintiffs suggest that their interests are in conflict with those of the Executive Committee's clients. Motion at 2. As is noted above, this is a question for the transferee court to resolve. But it also bears noting that this conflict is overstated. NAS Plaintiffs have not identified any actual conflict of interest aside from the competition between their attorneys for common benefit fund money, a concern of internal case management. *See* Doyle Br. at 8. Their other complaints address either legal issues specifically pertaining to the bellwether cases currently prioritized in the MDL or the fact that NAS Plaintiffs may have different causes of action. These do not constitute conflicts in any actionable sense; they are simply the inevitable result of the well-recognized, uncontroversial process of using bellwether cases. No bellwether can be perfectly representative of every legal issue.

Moreover, one main focus of discovery in the Opioid MDL at this stage is the general practices with respect to marketing and distribution of the manufacturer and distributor defendants. On this issue, NAS Plaintiffs have pled the same facts and the same theories as the other plaintiffs, and each plaintiff has the same interest—to attempt to develop facts suggesting that the manufacturers and distributors have engaged in wrongdoing related to these business practices. On the issues that are the current focus of the Opioid MDL, therefore, the Plaintiffs' Executive Committee and NAS Plaintiffs are aligned. This is only further reason not to disturb the current organization of the Opioid MDL.

#### III. NAS PLAINTIFFS' DUE PROCESS ARGUMENTS ARE MERITLESS.

In an effort to elevate their otherwise quotidian case management complaints, NAS Plaintiffs suggest that their "due process rights" are at stake. Motion at 2. This argument is

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"unsupported by any authority" and "amounts to little more than a makeweight." Transfer Order, *In re Oil Spill*, MDL No. 2179, ECF No. 1561 (Aug. 9, 2013) at 3. In the *Doyle* brief, NAS Plaintiffs argued that the Supreme Court's class settlement jurisprudence is instructive. *See* Doyle Br. at 8–11 (citing *Amchem Prods., Inc. v. Windsor*, 521 U.S. 591 (1997), and *Ortiz v. Fibreboard Corp.*, 527 U.S. 815 (1999)). Such cases arguably might be relevant if someone were purporting to settle on the NAS Plaintiffs' behalf without their input, but nothing of the sort is occurring. The Plaintiffs Executive Committee is litigating and conducting discovery as the transferee judge has directed, and, as noted above, its interests are aligned with NAS Plaintiffs on the relevant factual and legal questions. Once the central purpose of the MDL has been met (coordinated discovery and centralized legal rulings on common issues), the NAS Plaintiffs' cases will be remanded, and they will be free to try their cases however they wish.<sup>1</sup> *See* 14 U.S.C. § 1407(a) (requiring that actions transferred under section 1407 "shall be remanded by the panel at or before the conclusion of such pretrial proceedings to the district from which it was transferred unless it shall have been previously terminated").

NAS Plaintiffs suggest that they deserve special treatment because of "the protection owed to children under the law." Br. at 2; *see also* Doyle Br. at 12–14. But no case cited by NAS Plaintiffs suggests that child plaintiffs are entitled to their own MDL or that they can ignore the clear factual and legal reasons supporting the inclusion of their cases in the Opioid MDL.

<sup>&</sup>lt;sup>1</sup> Similarly, the brief of amici organizations in support of the *Doyle* plaintiffs' motion to vacate is irrelevant to the motion before the Panel. Br. on Behalf of *Amici* in Supp. Pls.' Mem. in Supp. of Mot. to Vacate, MDL No. 2804, ECF No. 2452 (Sept. 6, 2018). Amici express concern about the administration of a possible settlement award through state governments rather than through a separate NAS trust. How any future settlements or damages awards are administered is a concern for all of the parties to address at the appropriate time. Insofar as NAS Plaintiffs have their own counsel and own lawsuits, they may negotiate as they so choose. But settlement administration issues certainly do not bear on whether proceedings should be centralized for pre-trial purposes like discovery.

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#### CONCLUSION

For these reasons, the Panel should decline NAS Plaintiffs' motion to consolidate their

cases into a new, separate MDL No. 2872.

Respectfully submitted,

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<sup>&</sup>lt;sup>2</sup> In joining this response, AmerisourceBergen Corporation does not concede that it is a proper party to any of the cases listed on NAS Plaintiffs' Schedule A, ECF No. 1-2.

# BEFORE THE UNITED STATES JUDICIAL PANEL ON MULTIDISTRICT LITIGATION

In re: Children Born Opioid-Dependent

MDL No. 2872

# PROOF OF SERVICE

In compliance with Rule 4.1(a) of the Rules of Procedure for the United States Judicial

Panel on Multidistrict Litigation, I hereby certify that copies of the foregoing Brief in Opposition

to NAS Plaintiffs' Motion for Coordinated or Consolidated Proceedings were served on the

following parties electronically via CM/ECF, or as indicated below, on October 12, 2018.

# Ambrosio v. Purdue Pharma L.P., et al., Case No. 1:18-op-45375 (N.D. Ohio)

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# Flanagan v. Purdue Pharma L.P., et al., Case No. 1:18-op-45405 (N.D. Ohio)

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## Hunt v. Purdue Pharma L.P., et al., Case No. 1:18-op-45681 (N.D. Ohio.)

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## Moore v. Purdue Pharma L.P., et al., Case No. 2:18-cv- 01231 (S.D. W. Va.)

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# Rees v. McKesson Corporation, et al., Case No. 1:18-op-45252 (N.D. Ohio)

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