

County joins fight against big pharma

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CATSKILL — Greene County added its clout to a dozen New York counties in a nationwide class action lawsuit against pharmaceutical companies accused of price fixing.

The suit is before U.S. Judge Cynthia M. Rufe in the Eastern District Court of Pennsylvania. Forty-four states in all are combining in the class action suit, according to the New York Association of Counties. Their opponents are 20 pharmaceutical companies and 15 generic prescription drugs, according to the resolution passed last month by the Greene County Legislature.

Greene County is represented by Napoli Shkolnik, a law firm based in New York.

“We have a contingency agreement,” Greene County Attorney Ed Kaplan said. “We pay nothing unless there is a recovery.”

If there is a recovery, the firm is entitled to 25% of the amount, Kaplan said.

Named as defendants in the lawsuit are Actavis Holdco U.S. Inc.; Actavis Pharma, Inc.; Apotex Corp.; Ascend Laboratories, LLC; Aurobindo Pharma, USA, Inc.; Citron Pharma, LLC; Dr. Reddy's Laboratories Ltd.; Emcure Pharmaceuticals Ltd.; Glenmark Pharmaceuticals Inc. USA; Heritage Pharmaceuticals Inc.; Lannett Company Inc.; Fougera Pharmaceuticals, Inc.; Mayne Pharma Inc.; Myland Pharmaceuticals, Inc.; Par Pharmaceutical, Inc.; Sandoz, Inc.; Sun Pharmaceutical Industries, Inc.; Teva Pharmaceuticals USA, Inc.; and Zydus Pharmaceuticals USA Inc, Kaplan said.

The county learned of the lawsuit through correspondence from the state Association of Counties, Kaplan said.

Columbia County has not joined the lawsuit, Board of Supervisors Chairman Matt Murell said.

State leaders on both sides of the aisle agree that making prescriptions affordable is a priority.

“One of the biggest issues I hear about from seniors is prescription drugs,” state Sen. George Amedore Jr., R-43, said. “They depend on them for their health care and quality of life, but costs continue to rise, and accessibility seems to be going down. Like most things, prescription drug costs in New York are higher than the national average. Each year, I support measures to try to keep costs down by fully funding the EPIC program in the budget, or prohibiting formulary changes midyear. And I oppose harmful measures, such as the opioid surcharge, that does nothing but drive costs up and harm seniors living on fixed incomes that are already struggling to afford their prescription drugs.”

Residents should not have to choose between their health care and other basic needs, Assemblywoman Didi Barrett, D-106, said.

“Too often, the rising costs of prescription drugs is forcing New Yorkers to make impossible choices between necessary medical care and basic needs like food and shelter,” Barrett said. “To ensure our families can access lifesaving medication, I helped pass legislation to prohibit insurers from changing their prescription drug coverage during the enrollment year and ensure pharmacy benefit managers are acting in the consumer’s best interest. In addition, our 2019-20 state budget reaffirms that no one can be denied coverage due to a pre-existing condition, and requires insurers provide an up-to-date formulary drug list and a process for seeking a formulary exception. These measures represent important steps, but there’s still more to do. I’ll work with my colleagues during the 2020 session to find new and innovative ways to ensure all New Yorkers can access affordable prescription medication.”

Rural areas present unique challenges for healthcare, Assemblyman Chris Tague said.

“I am always searching for ways to make my constituents lives easier, and helping lower the cost of medications and prescriptions is very high on my radar,” Tague said. “I co-sponsored a bill that would increase transparency and create a standard of practice for pharmacy benefit managers”

Making sure seniors and those living on fixed incomes have access to the care they need is a priority, state Sen. Daphne Jordan, R-46, said.

“Assisting with rising prescription medicine costs is important, especially for senior citizens on fixed incomes and families who struggle to afford life-saving medicine,” Jordan said. “That’s why I co-sponsored and voted for Senate Bill S.2849A that provides that health plans can’t drop certain drugs during a contract year, or add higher cost-sharing or new review requirements unless they are adding a generic alternative. I also co-sponsored and voted for Senate Bill S.3539A, which allows pharmacists to substitute alternative epinephrine devices when a name brand EpiPen has been prescribed, saving families hundreds of dollars. Name brand EpiPens are \$600 or more and alternatives can be acquired for as low as \$140.”

The cost of EpiPens hits close to home for Jordan, whose son has a severe allergy, she said.

“For several years, I had to carry an EpiPen for one of my sons in the event he experienced an allergic reaction, so I understand the burdensome costs associated with this,” Jordan said. “Both of these bills passed the state Senate during our recent session. I’ll keep working for these measures to be enacted into law to help more senior citizens and families afford their prescription medicines. “Additionally, like so many New Yorkers, I’m dismayed that thanks to the Senate Democratic Majority we have a new tax on prescription drugs that can be passed onto customers at a cost of approximately \$100 million annually.”

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