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UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA

UNITED STATES OF AMERICA, ex rel.  
FRANK SOLIS,

Plaintiffs,

v.

MILLENNIUM PHARMACEUTICALS,  
INC., SCHERING-PLOUGH CORP.,  
and MERCK & CO.,

Defendants.

No. 2:09-cv-03010-MCE-EFB

**MEMORANDUM AND ORDER**

This lawsuit was originally filed under seal on November 4, 2009, pursuant to the qui tam provisions of the Federal False Claims Act, 31 U.S.C. § 3729, et seq. ("FCA"), against Defendants, who are pharmaceutical companies, include Millennium Pharmaceuticals, Inc., Schering-Plough Corp., and Merck and Co. ("Defendants" unless otherwise indicated). The so-called "Relator" Plaintiff, Frank Solis, a former sales employee who at various points worked for all three Defendants ("Relator" or "Plaintiff") claims that the companies fraudulently marketed and/or promoted the use of two drugs, Integrilin and Avelox, for so called "off label" uses not approved by the Food and Drug

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1 Administration.<sup>1</sup> In so doing, according to Relator, Defendants “caused” physicians to  
2 improperly prescribe the drugs and, consequently, to submit false claims to Medicare,  
3 Medicaid and TRICARE (United States Military Healthcare) for federal reimbursement,  
4 which the government allegedly paid without knowing the claims were ineligible.  
5 Following a three-year investigation, the United States and all twenty-four states named  
6 in the initial complaint chose not to intervene, and Relator’s Complaint was subsequently  
7 unsealed on December 20, 2012.

8 In response to Motions to Dismiss previously filed on behalf of each of the  
9 Defendants, Relator filed a First Amended Complaint (“FAC”) on June 27, 2013. The  
10 viability of Plaintiff’s FAC was then attacked through three separate motions.  
11 Defendants Schering-Plough Corp. (“Schering-Plough”) and Merck & Co. (“Merck”) filed  
12 a joint Motion to Dismiss for lack of subject matter jurisdiction under Federal Rule of Civil  
13 Procedure 12(b)(1)<sup>2</sup> on grounds that Relator’s complaint was barred by the FCA’s  
14 so-called “public disclosure” bar. Defendant Millenium Pharmaceuticals, Inc.  
15 (“Millenium”) subsequently joined in that motion. Additionally, two other motions, one  
16 filed jointly by Schering-Plough and Merck and the other by Millenium, argued that the  
17 various causes of action pled in the FAC are substantively deficient in contravention of  
18 Rule 12(b)(6). By Memorandum and Order filed March 26, 2014, this Court granted  
19 Defendants’ Rule 12(b)(1) motion on grounds that Relator’s “combination use”  
20 allegations were precluded under the FCA’s so-called “public disclosure” bar precluding  
21 suits whose allegations have already been disclosed. Because Relator’s FAC contained  
22 other allegations beyond combination use, however, including assertions pertaining to a  
23 completely different drug, Avelox, as well as allegations of fraud, improper billing, and

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26 <sup>1</sup> Off-label use of a drug occurs when it is used either for a purpose not approved by the FDA, or  
where non-indicated dosing regimens for the drug are promoted.

27 <sup>2</sup> All further references to “Rule” or “Rules” are to the Federal Rules of Civil Procedure unless  
28 noted otherwise.

1 impermissible kickbacks, the Court permitted Relator to file a Second Amended  
2 Complaint (“SAC”) omitting the combination use allegations.

3 Relator’s SAC was filed on April 5, 2014. Presently before the Court is a Motion  
4 to Dismiss pursuant to Rule 12(b)(6) filed on behalf of Defendants Schering-Plough and  
5 Merck (hereinafter referred to collectively as “Moving Defendants”). Moving Defendants  
6 further seek dismissal of Relator’s FCA claims under Rule 9(b) for failure to plead fraud  
7 with particularity. As set forth below, Moving Defendants’ Motion is DENIED.

### 8 9 **BACKGROUND**

10  
11 Integrilin is a drug that helps reduce blood clots and thereby helps to prevent  
12 heart attacks and death in patients suffering from acute coronary syndrome (“ACS”).  
13 ACS is an umbrella term covering a variety of diseases related to clotting in the coronary  
14 arteries that supply blood to the heart muscle, including unstable angina (“UA”), mild  
15 heart attacks known as non-ST–segment elevation myocardial infarctions (“NSTEMI”),  
16 and more severe heart attacks called ST-segment elevation myocardial infarctions  
17 (“STEMI”). Avelox, on the other hand, is an antibiotic approved by the Food and Drug  
18 Administration (“FDA”) for treating adult patients with infections caused by a few  
19 susceptible strains of microorganisms.

20 With respect to Integrilin, FDA approval was first obtained in May 1998 by a  
21 company named COR Therapeutics, Inc. (“COR”), which thereafter promoted the drug  
22 along with Defendant Schering-Plough. In February of 2002, Defendant Millennium  
23 acquired COR and thereby obtained the right to co-promote Integrilin. In September of  
24 2005, Defendant Millennium transferred its right to market Integrilin within the United  
25 States to Defendant Schering-Plough, thereby relinquishing any responsibility for the  
26 drug after a period of less than four years. Schering-Plough later merged with Merck in  
27 November of 2009 to form a new company, also known as Merck. In addition to

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1 Integrilin, Schering-Plough and Merck (but not Millenium) also market, sell and distribute  
2 Avelox. SAC, ¶ 2.

3 The allegations incorporated within Relator's initial complaint included contentions  
4 that Moving Defendants facilitated the presentation of false reimbursement claims by  
5 doctors and hospitals. According to Relator, Defendants promoted the prescription of  
6 Integrilin in particular, in combination with other drugs, without properly disclosing the  
7 dangers implicit in such combinations. As already stated, those allegations have already  
8 been adjudicated in Moving Defendants' previous Rule 12(b)(1) Motion to Dismiss.

9 Relator's SAC, however, also alleges other allegedly improper uses of Integrilin,  
10 including its off-label early use for STEMI patients, despite the fact that such early use is  
11 "extremely dangerous, off-label and fraudulent." SAC, ¶ 5, 11. Relator further claims  
12 that Defendants violated the so-called Anti-Kickback Statute ("AKS"), which prohibits a  
13 drug company from knowingly and willfully offering or paying remuneration to purchase  
14 goods or services for which payment may be made by a federal healthcare program.  
15 See 42 U.S.C. § 1320a-7b(b). Relator alleges that Defendants violated the AKS by  
16 "funnel[ing] millions of dollars" in grants, honoraria, and meals to physicians in order to  
17 induce Integrilin prescriptions and to drive "off label" sales, all in violation of the AKS.  
18 See SAC, ¶¶ 6-7, 151-55.

19 Relator Solis was a pharmaceutical sales representative for Millennium covering  
20 the Los Angeles area between July 2003 and September of 2005, and as part of his  
21 duties he promoted the sale of Integrilin. After Schering-Plough acquired the exclusive  
22 U.S. marketing rights for Integrilin from Millenium in late 2005, he transitioned to  
23 employment for Schering-Plough, where he also promoted Integrilin. Then, in November  
24 of 2009, after the Schering/Merck merger, he became a Merck sales representative.  
25 Relator was terminated by Merck on March 9, 2010.

26 Plaintiff's 144-page SAC alleges causes of action for federal false claims based  
27 on the AKS (Counts One and Two), false claims for causing the submission of off-label  
28 billings (Count Three and Four), and false claims for the fraudulent promotion of Integrilin

1 (Count Five). Plaintiff's claims are all rooted in the federal FCA, but additional causes of  
2 action based on corresponding state law statutory provisions are also made on behalf of  
3 both California (Count Seven) and 27 other states (Counts Eight through Thirty Four).

4 In now requesting dismissal under Rule 12(b)(6), Moving Defendants argue that  
5 Relator has failed to adequately allege the submission of any false claim under the FCA,  
6 either with respect to alleged "off-label" promotion of Integrilin or with regard to any FCA  
7 violation predicated on the AKS.

## 8 9 STANDARD

### 10 11 A. Motion to Dismiss Under Rule 12(b)(6)

12 On a motion to dismiss for failure to state a claim under Federal Rule of Civil  
13 Procedure 12(b)(6), all allegations of material fact must be accepted as true and  
14 construed in the light most favorable to the nonmoving party. Cahill v. Liberty Mut. Ins.  
15 Co., 80 F.3d 336, 337–38 (9th Cir. 1996). Rule 8(a)(2) "requires only 'a short and plain  
16 statement of the claim showing that the pleader is entitled to relief' in order to 'give the  
17 defendant fair notice of what the . . . claim is and the grounds upon which it rests.'" Bell  
18 Atl. Corp. v. Twombly, 550 U.S. 544, 555 (2007) (quoting Conley v. Gibson, 355 U.S. 41,  
19 47 (1957)). A complaint attacked by a Rule 12(b)(6) motion to dismiss does not require  
20 detailed factual allegations. However, "a plaintiff's obligation to provide the grounds of  
21 his entitlement to relief requires more than labels and conclusions, and a formulaic  
22 recitation of the elements of a cause of action will not do." Id. (internal citations and  
23 quotations omitted). A court is not required to accept as true a "legal conclusion  
24 couched as a factual allegation." Ashcroft v. Iqbal, 556 U.S. 662, 678 (2009) (quoting  
25 Twombly, 550 U.S. at 555). "Factual allegations must be enough to raise a right to relief  
26 above the speculative level." Twombly, 550 U.S. at 555 (citing 5 Charles Alan Wright &  
27 Arthur R. Miller, Federal Practice and Procedure § 1216 (3d ed. 2004) (stating that the

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1 pleading must contain something more than “a statement of facts that merely creates a  
2 suspicion [of] a legally cognizable right of action.”)).

3 Furthermore, “Rule 8(a)(2) . . . requires a showing, rather than a blanket  
4 assertion, of entitlement to relief.” Twombly, 550 U.S. at 555 n.3 (internal citations and  
5 quotations omitted). Thus, “[w]ithout some factual allegation in the complaint, it is hard  
6 to see how a claimant could satisfy the requirements of providing not only ‘fair notice’ of  
7 the nature of the claim, but also ‘grounds’ on which the claim rests.” Id. (citing 5 Charles  
8 Alan Wright & Arthur R. Miller § 1202, supra, at 94, 95). A pleading must contain “only  
9 enough facts to state a claim to relief that is plausible on its face.” Id. at 570. If the  
10 “plaintiffs . . . have not nudged their claims across the line from conceivable to plausible,  
11 their complaint must be dismissed.” Id. However, “[a] well-pleaded complaint may  
12 proceed even if it strikes a savvy judge that actual proof of those facts is improbable,  
13 and ‘that a recovery is very remote and unlikely.’” Id. at 556 (quoting Scheuer v.  
14 Rhodes, 416 U.S. 232, 236 (1974)).

### 15 **B. Pleading Fraud Claims**

16 Rule 9(b) requires that “in all averments of fraud or mistake, the circumstances  
17 constituting fraud or mistake shall be stated with particularity.” To meet the requisite  
18 particularity standards on a case like the present one, which asserts claims under the  
19 federal FCA, Relator’s allegations must be accompanied by the “who, what, when,  
20 where, and how of the misconduct charged.” Ebeid ex rel. U.S. v. Lungwitz, 616 F.3d  
21 993, 998 (9th Cir. 2010) (quoting Vess v. Ciba-Geigy Corp., U.S., 317 F.3d 1097, 1106  
22 (9th Cir. 2003)). In the Ninth Circuit, “it is sufficient to allege ‘particular’ details of a  
23 scheme to submit false claims paired with reliable indicia that lead to a strong inference  
24 that claims were also submitted.” Ebeid, 616 F.3d 998-99.

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## ANALYSIS

### A. FCA Claims

To state a false certification claim giving rise to FCA liability, a relator must establish four elements: 1) a false statement or fraudulent course of conduct; 2) made knowingly; 3) causing; 4) the government to pay out money. Hendow v. University of Phoenix, 461 F.3d 1166, 1174 (9th Cir. 2006). Under this framework, an FCA claim can be based on the allegation that a party “has falsely certifie[d] compliance with a statute or regulation as a condition to government payment.” Id. at 1171. Under the terms of the FCA statute, however, a defendant need only “cause to be presented” a false claim. 31 U.S.C. § 3729(a)(1) (2006). Under Ninth Circuit precedent, this extends to any third person or entity, even if that party was not the one who actually submitted the claims, as long as the party “knowingly assisted in causing the government to pay claims grounded in fraud.” United States v. Mackby, 261 F.3d 821, 827 (9th Cir. 2001). FCA liability requires only “some degree of participation in the claims process.” United States v. President & Fellows of Harvard College, 323 F. Supp. 2d 151, 186-87 (D. Mass. 2004) (citing Mackby). Whether or not a defendant’s conduct is a substantial factor in causing the presentation of false claims is a question of fact. United States ex rel. Franklin v. Parke-Davis, 2003 WL 22048255 at \*5 (D. Mass. 2003).

As indicated above, Relator herein argues that Moving Defendants had the requisite involvement in the submission of claims they knew were false in two different ways: 1) improper marketing of Integrilin for off-label uses; and 2) using kickbacks, bribes and other remuneration in contravention of the AKS to influence doctors to prescribe Integrilin. The sufficiency of Relator’s SAC with respect to both of those contentions will now be addressed.

### B. Relator’s Off-Label Allegations

Relator alleges that Moving Defendants caused the submission of false claims by “presenting physicians with false information about off-label uses of Integrilin and

1 encouraging physicians to prescribe Integrilin for such uses and procure the drug for  
2 such uses which were not approved by the FDA or any relevant drug compendium.”  
3 SAC, ¶ 157. According to Relator, such improper promotion “caused physicians and  
4 facilities to submit numerous bills for Integrilin that were ineligible for reimbursement  
5 under Medicaid, Medicare, and TRICARE because the drug [was] used for an off-label  
6 use.” *Id.*; see also *id.* at ¶ 163 (Defendants made “false and fraudulent representations  
7 “to physicians that Integrilin was safe and effective for use in off-label patient  
8 populations.”). Relator claims that the off-label uses advocated by Moving Defendants  
9 “threatens patient safety.” *Id.* at ¶ 8.

10 The FDA has approved Integrilin for the treatment of ACS in two different ways.  
11 First, it is approved as a drug therapy for UA and NSTEMI patients “who are to be  
12 managed medically or with percutaneous coronary intervention (‘PCI”), a procedure  
13 through which blocked coronary arteries are opened or widened by inflating a tiny  
14 balloon inserted into the artery by using a catheter. Second, Integrilin is approved “for  
15 the treatment of patients undergoing PCE.” *Id.* at ¶ 3.

16 The SAC goes on to allege that Moving Defendants intentionally promoted the  
17 early, off-label use of Integrilin for STEMI patients before undergoing PCI, and for  
18 treating other cardiovascular problems not approved by the FDA. *Id.* at ¶¶ 5, 11, 43-44.  
19 Relator pleads facts which purport to show that Moving Defendants systematically  
20 worked to convince doctors to prescribe Integrilin off-label. *Id.* at ¶¶ 56, 60. Relator  
21 alleges, for example, that, based on his own personal information and knowledge,  
22 Defendants trained their representatives to induce physicians to ask about off-label uses  
23 of Integrilin and to provide off-label information to physicians even if they did not request  
24 such information. *Id.* at ¶¶ 29, 48-49, 62. Moving Defendants went so far as to identify  
25 and cultivate “key opinion leader” physicians (“KOLs”) who frequently used Integrilin for  
26 off-label uses and could induce other doctors to do so. *Id.* at ¶ 63. The SAC specifically  
27 identifies KOLs who were so targeted. *Id.* at ¶¶ 64-71. Moving Defendants thereby  
28 promoted prescriptions written for off-label uses that were both inappropriate and



1 “extremely dangerous”. *Id.* at ¶ 5. Relator claims that Moving Defendants did this  
2 despite several studies showing that the off-label uses were associated with a risk of  
3 major bleeding. *Id.* at ¶¶ 58-59. Therefore, according to Relator, many of the  
4 prescriptions Moving Defendants promoted were ineligible for reimbursement and were  
5 therefore false when submitted to the government for payment. Significantly, too,  
6 Relator cites figures indicating that Moving Defendants’ allegedly improper promotional  
7 activities were successful. According to Relator, for example, Integrilin outpatient use  
8 substantially increased by the end of 2009, with this increase being “entirely attributable  
9 to an increase in patients receiving Integrilin for off-label purposes.” *Id.* at ¶ 148.

10 Moving Defendants correctly point out that “off-label marketing of an approved  
11 drug is itself not inherently fraudulent.” *See, e.g., In re Actimmune Mktg Litig*, 614 F.  
12 Supp. 2d 1037, 1051 n.6 (N.D. 2009). “Merely alleging off-label marketing . . . is not  
13 sufficient, without more, to plead a false claims act violation.” *U.S. ex rel. Rost v. Pfizer,*  
14 *Inc.*, 253 F.R.D. 11, 16-17 (D. Mass. 2008). Nonetheless, examination of the SAC  
15 reveals allegations that Moving Defendants promoted Integrilin for uses they knew were  
16 inappropriate and dangerous. SAC, ¶¶ 5, 157. For purposes of a motion to dismiss,  
17 such allegations must be taken as true. *Twombly*, 550 U.S. at 556. Relator’s allegations  
18 are therefore sufficient to survive scrutiny at the pleadings stage of this litigation.  
19 Moreover, given the considerable detail provided in the SAC about Defendants’ allegedly  
20 fraudulent marketing of Integrilin, the Court finds that the particularity requirements of  
21 Rule 9(b) are also satisfied.

22 In advocating dismissal, Moving Defendants contend that Medicare pays a flat fee  
23 for inpatient hospital care based on broad diagnostic categories. Moving Defendants  
24 consequently argue that such single-price billing based on the condition at issue,  
25 regardless of the actual treatment being provided, makes Integrilin use irrelevant to the  
26 medical services being invoiced. This factual defense, however, does not change the  
27 viability of Relator’s pleadings. It presents factual issues not proper for determination as  
28 a matter of law in the context of a motion to dismiss.

1 Similarly, while Moving Defendants also claim that a physician's independent  
2 decision to prescribe Integrilin trumps any promotional activities that may have preceded  
3 that decision, that fact also does not obviate Moving Defendants' potential liability, given  
4 the allegations in the SAC as described above. As discussed above, to incur FCA  
5 liability Defendants need only play some role in submitting a false claim; they need not  
6 play the only role.

7 For all of these reasons, Relator's SAC sufficiently alleges actionable FCA activity  
8 with respect to off-label use to survive Moving Defendants' Motion to Dismiss.

### 9 **C. Relator's Kickback Allegations**

10 To state a viable FCA violation based on kickback claims in contravention of the  
11 AKS, Relator must show that Moving Defendants: 1) knowingly and willfully, 2) offered or  
12 paid remuneration, 3) to induce another to purchase a good or service, 4) for which  
13 payment may be made by a federal healthcare program. 42 U.S.C. § 1320a-7b(b)(2)(B).  
14 Claims influenced by kickbacks are false because "courts, without exception, agree that  
15 compliance with the Anti-Kickback Statute is a precondition of Medicare payment, such  
16 that liability under the False claims Act can be predicated on a violation of the Anti-  
17 Kickback Statute." U.S. ex rel. Westmoreland v. Amgen, Inc., 812 F. Supp. 2d 39, 54  
18 (D. Mass. 2010); see also United States ex rel. Hutcheson v. Blackstone Medical, Inc.,  
19 647 F.3d 377, 392 (1st Cir. 2011) (claims seeking payment for services induced by  
20 kickbacks are false, and the FCA imposes liability when a defendant knowingly causes  
21 such a claim to be presented).

22 As Moving Defendants point out, however, the FCA does not prohibit all business  
23 transactions between physicians and drug companies. See, e.g., United States v. Ctr.  
24 for Diagnostic Imaging, Inc., 787 F. Supp. 2d 1213, 1223 (W.D. Wash. 2011) (explaining  
25 that the "remuneration" element of an AKS claim must be assessed in light of the fair  
26 market value for the service rendered). Moving Defendants accordingly argue that  
27 because any remuneration they provided was reasonable and not excessive, Relator's  
28 kickback claims necessarily fail. The Court disagrees.

1           The SAC describes, in detail, Moving Defendants’ alleged actions between 2002  
2 and 2009 to convince physicians to write prescriptions of Integrilin for off-label uses.  
3 Those purported “kickback” activities included funding grants (SAC, ¶¶ 6,7), paying  
4 excessive speaker fees (Id. at ¶¶ 6, 7, 82-86, 99, 102, 104, 121, 133-34), providing  
5 honoraria (Id. at ¶¶ 7, 82, 104-106), furnishing meals (Id. at ¶¶ 7, 14, 82, 100, 102,  
6 104-106, 114-16, 133-34), paying for attendance at Continuing Medical Education  
7 (“CME”) seminars while retaining control of virtually every aspect of the events so as  
8 justify off-label use (Id. at ¶¶ 79-81) and funding preceptorships and advisory boards (Id.  
9 at ¶ 99). The SAC provides both dates and details of these alleged kickback activities,  
10 including separate and specific meals, which Relator alleges that these activities violated  
11 both the FCA and the AKS. Id. at ¶¶ 114-116, 117, 123, 125-29. The SAC further  
12 provides examples of rewarding high-prescribing doctors with excessive speaker fees.  
13 Id. at ¶¶ 83-86, 122, and alleges that certain hospitals were tracked in order to determine  
14 which “to target for expensive meals.” Id. at ¶¶ 118-121. According to Relator, Moving  
15 Defendant’s sale representatives were also instructed to send “invitations to lavish meals  
16 exclusively to targeted high volume prescribers or referral sources.” Id. at ¶ 121. In light  
17 of all these activities, Relator alleges that the submissions of prescriptions for  
18 reimbursement were false because Defendants’ illegal activities had influenced them.  
19 Id. at ¶¶ 22-23.

20           Again, while Moving Defendants deny these allegations and claim Relator has  
21 shown no excessive remuneration that would run afoul of the AKS, the facts of the SAC  
22 as alleged by Relator must be deemed true for purposes of ruling on a motion to  
23 dismiss. Additionally, as also enumerated above, the SAC need only show that Moving  
24 Defendants’ alleged illegal promotional activity was a “substantial factor” in the  
25 submitting of false claims. Parke-Davis, 2003 WL 22048255 at \*4-5. To state a viable  
26 FCA claim, Relator simply has to show that “one purpose” of the kickbacks is to induce  
27 prescriptions—it need not be the only purpose of the kickbacks. U.S. v. McClatchey,  
28 217 F.3d 823, 835 (10th Cir. 2000). Nor is the fact that Moving Defendants failed to

1 directly present claims for payment an impediment to liability. Mackby, 261 F.3d at 827  
2 (“a person need not be the one who actually submitted the claims forms in order to be  
3 liable”).

4 The SAC plainly makes averments that survive a pleadings challenge, either with  
5 respect to Rule 12(b)(6) or Rule 9(b). Consequently, Moving Defendants’ motion to  
6 dismiss the kickback allegations levied against them also fails.

7 **D. State Law Claims**

8 Moving Defendants argue that Relator’s state FCA claims fail for the same  
9 reasons that his federal FCA claims cannot be sustained. Pl.’s Mem. In Supp. of Mot. to  
10 Dismiss, 19:26-27. Given the Court’s finding, as enumerated above, that Relator’s  
11 federal FCA claims survive, the sole reason advanced by Moving Defendants for  
12 dismissing the state law claims necessarily fails.

13  
14 **CONCLUSION**

15  
16 For all the reasons stated above, Moving Defendants’ Motion to Dismiss, ECF  
17 No. 113, is DENIED.<sup>3</sup>

18 IT IS SO ORDERED.

19 Dated: March 27, 2015

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23 MORRISON C. ENGLAND, JR., CHIEF JUDGE  
24 UNITED STATES DISTRICT COURT

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26 \_\_\_\_\_  
27 <sup>3</sup> The Court notes that Moving Defendants make a request for dismissal under 12(b)(1) for the first  
28 time in their reply brief. Because it is improper to consider arguments not raised until the reply, with no  
opportunity for the opposing party to respond, the Court disregards Moving Defendants’ request in that  
regard. See Zamani v. Carnes, 491 F.3d 990, 997 (9th Cir.2007) (“district court need not consider  
arguments raised for the first time in a reply brief”).