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**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**

**COUNTY OF SAN MATEO,
CALIFORNIA,**

Plaintiff,

v.

MCKINSEY & COMPANY, INC., a New
York corporation;
**MCKINSEY & COMPANY, INC. UNITED
STATES**, a Delaware corporation; and
**MCKINSEY & COMPANY, INC.
WASHINGTON D.C.**, a Delaware
corporation

Defendants.

UNITED STATES DISTRICT COURT
CASE NO:

COMPLAINT

- (1) NEGLIGENCE;**
- (2) FRAUD AND
MISREPRESENTATION;**
- (3) PUBLIC NUISANCE;**
- (4) CIVIL CONSPIRACY;**
- (5) VIOLATION OF THE
CALIFORNIA UNFAIR
COMPETITION LAW;**
- (6) VIOLATION OF THE
CALIFORNIA FALSE
ADVERTISING LAW;**
- (7) NEGLIGENCE PER SE**

DEMAND FOR JURY TRIAL

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1 **I. PRELIMINARY STATEMENT**

2 1. San Mateo County has seen an incredible increase in deaths from opioids in the past
3 few years. Like other counties across the United States, San Mateo County now spends millions of
4 dollars each year dealing with the fallout of the opioid epidemic. San Mateo’s ongoing costs include
5 extra expenditures related to drug treatment, emergency room visits, law enforcement, and social
6 services (including for children born opioid-dependent and/or who have parents unable to care for
7 them because of their own respective addictions).

8 2. Between 2010 and 2014, opioids accounted for almost half of all filled scheduled
9 drug prescriptions. In 2015, there were hundreds of thousands of opioid prescriptions filled in San
10 Mateo County. County health officials estimate that thousands of residents are opioid dependent.

11 3. McKinsey is a global consulting firm with significant expertise in the pharmaceutical
12 industry. McKinsey has served for years as a marketing advisor for Purdue Pharma, L.P. (“Purdue”).
13 In this role, McKinsey has created and implemented marketing strategies and tactics to bolster the
14 sales of Oxycontin, which is a Schedule II drug that is widely recognized as among the most
15 frequently diverted and abused opioid. When Purdue faced scrutiny for its role in the opioid crisis,
16 McKinsey helped the company protect its public image and helped Purdue to continue to profit from
17 the market for illicit opioids that predictably developed, and for which McKinsey’s tactics helped to
18 promote and maintain.



1 4. McKinsey’s relationship with Purdue dates back to at least 2004, but the company
2 kept this partnership successfully under wraps for well over a decade.

3 5. Part of McKinsey’s work involved assessing the “underlying drivers” of OxyContin’s
4 (financial) performance. As described in this Complaint, these drivers boil down to two things: (1)
5 a widespread deceptive marketing campaign; and (2) fueling an illicit market for non-medical use.
6 Purdue entered into guilty pleas arising out of both types of conduct in 2007 and 2020, respectively.

7 6. McKinsey also delved into the “granular” aspects of Purdue’s sales and promotion.
8 Through the two companies’ long-term relationship, McKinsey understood Purdue’s business “both
9 in terms of content and culture,” as its own renewed consulting agreement in 2013. Following guilty
10 pleas by Purdue’s parent company and three Purdue officers for illegally marketing and promoting
11 Oxycontin to prescribers and consumers in May of 2007, McKinsey assisted Purdue in its sales
12 campaign and efforts to portray itself as a good corporate citizen desiring to do the right thing.

13 7. In this campaign following the convictions, McKinsey and Purdue devised ways to
14 counter “emotional messages from mothers with teenagers that overdosed [o]n OxyContin,”
15 including devising strategies for misinformation.

16 8. McKinsey also urged Purdue to capitalize on OxyContin’s extended-release
17 characteristics by marketing OxyContin’s 12-hour dosing as requiring fewer pills because users only
18 needed to take OxyContin twice a day. In reality, OxyContin was known to wear off after 8 to 10
19 hours in many patients. This marketing tactic perpetuated a vicious cycle that became, in the words
20 of one neuropharmacologist, “the perfect recipe for addiction.”¹ What McKinsey called
21 “convenient,” would later be called “a [d]escription of Hell.” This aspect of Purdue’s business efforts
22 played a key role in the opioid epidemic and was assisted by McKinsey.

23 9. For years, McKinsey advised Purdue on, and indeed helped to implement, various
24 strategies increasing sales of Oxycontin through high dose sales and deceptive messaging to
25 physicians that OxyContin would improve function and quality of life. McKinsey urged Purdue to
26 maximize its OxyContin sales by dictating, to a greater degree, which prescribers the sales
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28 ¹ Harriet Ryan et al., ‘*You Want a Description of Hell?*’ *OxyContin’s 12-Hour Problem*, L.A. Times, (May 5, 2016), <http://www.latimes.com/projects/oxycontin-part1/>.

1 representatives would target, exploring ways to increase the amount of time those sales
2 representatives spent in the field pushing opioid sales, and prioritizing OxyContin in Purdue's
3 incentive compensation targets.

4 10. In 2013, amidst concerns of declining sales due to Purdue's expired patent exclusivity
5 for the original formulation of OxyContin, McKinsey developed for Purdue an entire marketing
6 initiative, "Evolve to Excellence" or "E2E." This was ultimately implemented as **a plan to**
7 **"turbocharge" opioid sales and was also known as "Project Turbocharge."** McKinsey advised
8 that Purdue would see a greater return on its sales investment by focusing its attention on specific
9 targets, including aggressive marketing of OxyContin to doctors whose alarming prescribing
10 patterns raised red flags that their prescriptions were going towards non-medical use. McKinsey's
11 plan to boost sales of OxyContin by targeting the highest volume opioid prescribers willfully ignored
12 the fact that the expanded sales would be for an illicit market.

13 11. Purdue had a legal obligation not to target these prescribers; Purdue was, in fact,
14 required to report their conduct to law enforcement. Purdue later entered into a second criminal plea
15 agreement for, among other things, failing to report and provide complete information to the U.S.
16 Drug Enforcement Administration ("DEA") regarding prescribers that Purdue's internal anti-
17 diversion programs indicated should not have been targeted and which, in some cases, Purdue visited
18 to encourage them to prescribe opioids.

19 12. Only after Purdue faced mounting legal pressure and reduced its sales force, and
20 McKinsey's own reputation became tarnished, did McKinsey finally step away from its work for
21 Purdue and later cease "opioid-specific" work on behalf of other clients altogether. Belatedly,
22 McKinsey acknowledged what it described as the "implications of its work" on "the epidemic
23 unfolding in our communities or the terrible impact of opioid misuse and addiction on millions of
24 families across the country."²

25 13. As a direct and foreseeable result of McKinsey's conduct, the nation and Plaintiff's
26 communities are now swept up in what the CDC has called a "public health epidemic" and what the

27 ² *McKinsey Statement on Its Past Work with Purdue Pharma*, MCKINSEY & CO. (Dec, 5, 2020),
28 <https://www.mckinsey.com/about-us/media/mckinsey-statement-on-its-past-work-with-purdue-pharma>.

1 U.S. Surgeon General has deemed an “urgent health crisis.”³ In 2015, an estimated 2 million
2 Americans were addicted to prescription opioids and 591,000 to heroin. From 1999 to 2019, close
3 to 247,000 people died in the U.S. from overdoses related to opioids.⁴

4 14. Plaintiff provides essential services for its citizens and residents, including law
5 enforcement, emergency medical assistance, services for families and children, public assistance,
6 public welfare, and other care and services for the health, safety and welfare of their citizens and
7 residents. The rising numbers of people addicted to opioids have led to significantly increased costs,
8 as well as a dramatic increase of social problems, including, but not limited to, drug abuse and the
9 commission of criminal acts to obtain opioids.

10 15. Plaintiff brings this action to recover damages from McKinsey and to eliminate the
11 hazard to public health and safety caused by the opioid epidemic, to abate the nuisance caused
12 thereby, and to recoup monies that has been spent, or will be spent, because of McKinsey’s conduct
13 in fueling the epidemic. McKinsey knew of the dangers of opioids, and of Purdue’s misconduct, but
14 nonetheless advised and encouraged Purdue to improperly market and sell OxyContin.

15 **II. PROCEDURAL STATEMENT**

16 16. The headings contained in this Complaint are intended only to assist in reviewing the
17 statements and allegations contained herein. To avoid the unnecessary repetition in each section,
18 Plaintiff affirms and incorporates each paragraph in each section of this Complaint as though fully
19 set forth therein.

20 17. The factual allegations contained in this Complaint are not exhaustive and are
21 presented throughout this Complaint solely to provide McKinsey with the requisite notice of the
22 basis for the Plaintiff’s allegations and claims. Plaintiff expressly reserves the right to plead
23 additional facts where and as necessary to ensure complete relief.

24
25 ³ *Examining the Growing Problems of Prescription Drug and Heroin Abuse*, CDC (Apr. 29, 2014),
26 <http://www.cdc.gov/washington/testimony/2014/t20140429.htm>; Letter from Vivek H. Murthy,
27 United States Surgeon General, to Doctors (Aug. 2016),
<http://i2.cdn.turner.com/cnn/2016/images/08/25/sg.opioid.letter.pdf>.

28 ⁴ *Prescription Opioids, Overview*, CDC,
<https://www.cdc.gov/drugoverdose/deaths/prescription/overview.html> (last reviewed Mar. 17,
2021).

1 **III. PARTIES**

2 **a. Plaintiff**

3 18. Plaintiff County of San Mateo (“the County”) is a county and a political subdivision
4 of the State of California. San Mateo is the 14th most populous county in California, with a
5 population of more than 760,000 residents. San Mateo is home to several significant venues in
6 Northern California, including the San Mateo County Expo Center, the South San Francisco Expo
7 Center, the Cow Palace, and numerous Silicon Valley companies.

8 19. Plaintiff, acting by and through John C. Beiers, County Counsel for the County of
9 San Mateo, is authorized to bring the causes of action brought herein. The County is a body corporate
10 and politic of the State of California Cal. Gov’t Code § 23003 and is authorized to bring this action.
11 Cal. Gov’t Code § 23004(a).

12 20. The County of San Mateo has responsibility for the public health, safety and welfare
13 of its citizens.

14 21. Opioid abuse, addiction, morbidity and mortality have created a serious public health
15 and safety crisis, which is a public nuisance, in San Mateo County. Further, the diversion of legally
16 produced controlled substances into the illicit market contributes to this public nuisance.

17 22. The distribution and diversion of opioids into California, and into San Mateo County
18 and surrounding areas, created the foreseeable opioid epidemic and opioid public nuisance for which
19 Plaintiff seeks relief.

20 23. Defendants’ actions created the foreseeable opioid crisis and public nuisance for
21 which Plaintiff seeks relief.

22 24. Plaintiff directly and foreseeably sustained all economic damages alleged herein.
23 Categories of past and continuing sustained damages include, *inter alia*:

- 24 a. costs for providing medical care, additional therapeutic, and prescription drug
25 purchases, and other treatments for patients suffering from opioid-related addiction
26 or disease, including overdoses and deaths;
- 27 b. costs for providing treatment, counseling, and rehabilitation services;
- 28 c. costs for providing treatment of infants born with opioid-related medical conditions;

- 1 d. costs associated with law enforcement and public safety relating to the opioid
- 2 epidemic;
- 3 e. costs associated with providing care for children whose parents suffer from opioid-
- 4 related disability or incapacitation; and,
- 5 f. costs associated with the County having to repair and remake its infrastructure,
- 6 property and systems that have been damaged by Defendants' actions, including,
- 7 inter alia, its property and systems to treat addiction and abuse, to respond to and
- 8 manage an elevated level of crime, to treat injuries, and to investigate and process
- 9 deaths in San Mateo County.

10 These damages have been suffered and continue to be suffered directly by Plaintiff.

11 25. Plaintiff has standing to bring an action for the opioid epidemic nuisance created by
12 Defendants. Cal. Civ. Proc. Code § 731 (“A civil action may be brought in the name of the people
13 of the State of California to abate a public nuisance, as defined in Section 3480 of the Civil Code,
14 by the . . . county counsel of any county in which the nuisance exists.”).

15 26. The County has standing to bring an action for damages incurred to its property by
16 the public nuisance created by Defendants. Cal. Civ. Proc. Code § 731 (“An action may be brought
17 by any person whose property is injuriously affected, . . . and by the judgment in that action the
18 nuisance may be enjoined or abated as well as damages recovered therefor.”).

19 The County has standing to recover damages incurred as a result of Defendants' actions and
20 omissions. Cal. Gov't Code § 23004(a).

21 **b. Defendants**

22 27. Defendant McKinsey & Company, Inc. is a corporation organized under the laws of
23 the State of New York, whose principal place of business is located at 711 Third Avenue, New York,
24 NY 10017, and at all times relevant hereto was authorized to do business and was doing business in
25 California.

26 28. Defendant McKinsey & Company, Inc. United States is a corporation organized
27 under the laws of the State of Delaware, whose principal place of business is located at 55 E 52nd
28

1 Street, New York, NY 10022, and at all times relevant hereto was authorized to do business and was
2 doing business in California.

3 29. Defendant McKinsey & Company, Inc. Washington D.C. is a corporation organized
4 under the laws of the State of Delaware, whose principal place of business is located at 1200 19th
5 Street, NW, Suite 1100, Washington DC 20036, and at all times relevant hereto was authorized to
6 do business and was doing business in California.

7 30. McKinsey & Company, Inc., McKinsey & Company, Inc. United States and
8 McKinsey & Company, Inc. Washington D.C. are referred to collectively as “McKinsey.”

9 31. McKinsey is a worldwide management consultant company. From approximately
10 2004-2019, McKinsey provided consulting services to Purdue Pharma L.P., working to maximize
11 sales of OxyContin and knowingly perpetuating the opioid crisis. McKinsey has also provided
12 related consulting services to other manufacturers of opioids.

13 **IV. JURISDICTION AND VENUE**

14 32. Jurisdiction and venue are proper in the Northern District of California (“NDCA”).

15 33. Jurisdiction of this Court arises under the laws of the United States 28 U.S.C. § 1332.
16 The parties are citizens of different states and the amount in controversy exceeds \$75,000, exclusive
17 of interest and costs.

18 34. This Court has personal jurisdiction over Defendants because, at all relevant times,
19 Defendants have purposely availed themselves to the privilege of doing business in California,
20 including by engaging in the business of researching, designing, and implementing marketing and
21 promoting strategies for various opioid manufacturers, including Purdue, in support of their sales
22 and marketing of opioids in California. Further, Defendants do business by agent in California,
23 directly and through the purposeful direction of their actions towards California and have the
24 requisite minimum contacts with California necessary to constitutionally permit the exercise of
25 jurisdiction.

26 35. Venue is proper in the NDCA because a substantial part of the events or omissions
27 giving rise to the claims occurred in the NDCA, and all other related claims are also proper in the
28

1 NDCA as additional claims against the named Defendants. Further, Defendants have caused harm
2 to Plaintiff residing in the NDCA.

3 36. The Court also has supplemental jurisdiction over the Plaintiff's state law claims
4 pursuant to 28 U.S.C. § 1367 because the state law claims are part of the same case or controversy.

5 **V. TOLLING AND FRAUDULENT CONCEALMENT**

6 **a. Equitable Estoppel and Fraudulent Concealment**

7 37. Plaintiff continues to suffer harm from the unlawful actions by the Defendants.

8 38. The continued tortious and unlawful conduct by the Defendants causes a repeated
9 or continuous injury. The damages have not occurred all at once but have continued to occur and
10 have increased as time progresses. The harm is not completed nor have all the damages been
11 incurred until the wrongdoing ceases. The wrongdoing and unlawful activity by Defendants have
12 not ceased. The public nuisance remains unabated.

13 39. Defendants are equitably estopped from relying upon a statute of limitations
14 defense because, alongside Purdue, Defendants undertook active efforts to deceive Plaintiff and to
15 purposefully conceal their unlawful conduct. Defendants were aware that the opioid
16 manufacturers, such as Purdue, and the distributors were fraudulently assuring the public and
17 Plaintiff that they were undertaking efforts to comply with their obligations under the state and
18 federal controlled substances laws, all with the goal of protecting their registered manufacturer or
19 distributor status in the State and to continue generating profits. Notwithstanding the allegations
20 set forth above, McKinsey and Purdue affirmatively assured the public and Plaintiff that they were
21 working to curb the opioid epidemic.

22 40. McKinsey and Purdue were deliberate in taking steps to conceal their conspiratorial
23 behavior and active role in the deceptive marketing and the oversupply of opioids through
24 overprescribing and suspicious sales, all of which fueled the opioid epidemic.

25 41. McKinsey's consulting services were given confidentially, and both McKinsey and
26 Purdue concealed the content of those services from the public.

27 42. McKinsey and Purdue also concealed the existence of Plaintiff's claims by hiding
28 their lack of cooperation with law enforcement and affirmatively seeking to convince the public

1 that Purdue's legal duties to report suspicious sales had been satisfied through public assurances
2 that they were working to curb the opioid epidemic. They publicly portrayed themselves as
3 committed to working diligently with law enforcement and others to prevent diversion of these
4 dangerous drugs and curb the opioid epidemic, and they made broad promises to change their ways
5 insisting they were good corporate citizens. These repeated misrepresentations misled regulators,
6 prescribers, and the public, including Plaintiff, and deprived Plaintiff of actual or implied
7 knowledge of facts sufficient to put Plaintiff on notice of potential claims.

8 43. Plaintiff did not discover the nature, scope and magnitude of McKinsey's
9 misconduct, and its full impact on Plaintiff, and could not have acquired such knowledge earlier
10 through the exercise of reasonable diligence.

11 44. Purdue and McKinsey's campaign to misrepresent and conceal the truth about the
12 opioid drugs that they were aggressively pushing on Plaintiff deceived the medical community,
13 consumers, and Plaintiff.

14 45. McKinsey intended that their actions and omissions made with Purdue would be
15 relied upon, including by Plaintiff. Plaintiff did not know and did not have the means to know the
16 truth, due to McKinsey and Purdue's actions and omissions.

17 46. Plaintiff reasonably relied on McKinsey and Purdue's affirmative statements
18 regarding their purported compliance with their obligations under the law and consent orders.

19 47. The purpose of the statutes of limitations period is satisfied because Defendants
20 cannot claim prejudice due to late filing where the Plaintiff filed suit promptly upon discovering
21 the facts essential to its claims, described herein, which Defendants knowingly concealed.

22 **b. McKinsey Persisted in Its Scheme to Collaborate with Purdue Despite**
23 **Purdue's Guilty Plea and Large Fine**

24 48. In May 2007, Purdue and three of its executives pled guilty to federal charges of
25 misbranding OxyContin in what the company acknowledged was an attempt to mislead doctors
26 about the risk of addiction. Purdue was ordered to pay \$600 million in fines and fees. In its plea,
27 Purdue admitted that its promotion of OxyContin was misleading and inaccurate, misrepresented
28 the risk of addiction and was unsupported by science. Additionally, Michael Friedman, the

1 company's president, pled guilty to a misbranding charge and agreed to pay \$19 million in fines;
2 Howard R. Udell, Purdue's top lawyer, also pled guilty and agreed to pay \$8 million in fines; and
3 Paul D. Goldenheim, its former medical director, pled guilty as well and agreed to pay \$7.5 million
4 in fines.

5 49. Despite a guilty plea by Purdue, McKinsey continued to work with and assist
6 Purdue in its continuing to pay doctors on speakers' bureaus to promote the liberal prescribing of
7 OxyContin for chronic pain and fund seemingly neutral organizations to disseminate the message
8 that opioids were non-addictive as well as other misrepresentations. At least until early 2018,
9 McKinsey and Purdue continued to deceptively market the benefits of opioids for chronic pain
10 while diminishing the associated dangers of addiction. After Purdue made its guilty plea in 2007, it
11 assembled an army of lobbyists to fight any legislative actions that might encroach on its business.
12 Between 2006 and 2015, Purdue and other painkiller producers, along with their associated
13 nonprofits, spent nearly \$900 million dollars on lobbying and political contributions -- eight times
14 what the gun lobby spent during that period. McKinsey participated extensively in these actions
15 and provided Purdue with strategies and assistance to maximize sales as described in this
16 complaint.

17 50. As all of the government actions against the Purdue and McKinsey demonstrate,
18 McKinsey knew that the actions it took with Purdue were unlawful, and yet deliberately proceeded
19 in order to increase Purdue's sales and profits, and in turn to serve McKinsey's financial interests.

20 **VI. FACTUAL ALLEGATIONS COMMON TO ALL COUNTS**

21 **a. The Opioid Epidemic**

22 51. The past two decades in the United States have been characterized by increasing
23 abuse and diversion of prescription drugs, particularly opioid medications.

24 52. Before the 1990s, generally accepted standards of medical practice dictated that
25 opioids should only be used short-term for acute pain, pain relating to recovery from surgery, or for
26 cancer or palliative (end-of-life) care. Due to the lack of evidence that opioids improved patients'
27 ability to overcome pain and function, coupled with evidence of greater pain complaints as patients
28 developed tolerance to opioids over time and the serious risk of addiction and other side effects, the

1 use of opioids for chronic pain was discouraged or prohibited. As a result, doctors generally did not
2 prescribe opioids for chronic pain.

3 53. Opioid manufacturers such as Purdue, identified and took advantage of the much
4 larger and more lucrative market of chronic pain patients. Manufacturers developed a well-funded
5 marketing scheme to target susceptible prescribers and vulnerable patient populations.
6 Manufacturers funded seemingly independent third-parties (and used their own sales forces) to
7 spread false and misleading statements about the risks and benefits of long-term opioid use. These
8 statements were not only unsupported by or contrary to the scientific evidence, they were also
9 contrary to pronouncements by and guidance from the U.S. Food and Drug Administration (“FDA”)
10 and CDC based on that same evidence. California doctors, including doctors in San Mateo County,
11 confirm that Purdue Pharma L.P. and McKinsey began their marketing schemes decades ago and
12 they persist today.

13 54. Since Purdue and McKinsey’s targeted promotion of Purdue’s product to chronic
14 pain patients, prescription opioids have become widely prescribed. By 2010, enough prescription
15 opioids were sold to medicate every adult in the United States with a dose of 5 milligrams of
16 hydrocodone every 4 hours for 1 month.⁵

17 55. In 2012, the total number of prescriptions dispensed peaked at more than 255
18 million.⁶ As a result of the public’s increasing awareness on opioid addiction, the focus on opioid
19 use education, and numerous lawsuits filed for opioid-related matters, the number of prescriptions
20 has come down in 2019 to 153 million.⁷

21 56. Swathes of Americans are addicted to prescription opioids, and the number of deaths
22 due to prescription opioid overdose is staggering. From 1999 to 2019, nearly 247,000 people died in
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26 ⁵ Katherine M. Keyes et al., *Understanding the Rural-Urban Differences in Nonmedical*
27 *Prescription Opioids Use and Abuse in the United States*, 104 AM. J. PUB. HEALTH e52, e53 (2014).

28 ⁶ *U.S. Opioid Dispensing Rate Maps*, CDC, <https://www.cdc.gov/drugoverdose/rxrate-maps/index.html> (last reviewed Dec. 7, 2020).

⁷ *Id.*

1 the United States from overdoses involving prescription opioids.⁸ Overdose deaths involving
 2 prescription opioids more than quadrupled from 1999 to 2019.⁹

3 57. Because of the similar effects experienced by people using prescription opioids and
 4 heroin, the CDC has identified addiction to prescription opioid painkillers as the strongest risk factor
 5 contributing to heroin addiction. People who are addicted to prescription opioid painkillers are forty
 6 times more likely to be addicted to heroin.¹⁰

7 58. Across the nation, local governments like Plaintiff are struggling with the pernicious,
 8 ever-expanding epidemic of opioid addiction and abuse. In 2019, 14,139 overdose deaths were
 9 attributed to prescription opioids and 49,860 overdose deaths were attributed to any opioid.¹¹

10 59. The National Institute on Drug Abuse identifies misuse and addiction to opioids as
 11 “a serious national crisis that affects public health as well as social and economic welfare.”¹² The
 12 economic burden of prescription opioid misuse alone is \$78.5 billion a year, including the costs of
 13 healthcare, lost productivity, addiction treatment, and criminal justice expenditures.¹³

14 60. The U.S. opioid epidemic is continuing. The rate of death from opioid overdose has
 15 quadrupled during the past 15 years in the United States.¹⁴ Nonfatal opioid overdoses that require
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19 ⁸ *Prescription Opioids, Overview*, CDC,
 20 <https://www.cdc.gov/drugoverdose/deaths/prescription/overview.html> (last reviewed Mar. 17,
 2021).

21 ⁹ *Id.*

22 ¹⁰ *See Today’s Heroin Epidemic*, CDC, <https://www.cdc.gov/vitalsigns/heroin/index.html> (last
 22 reviewed July 7, 2015).

23 ¹¹ *Overdose Death Rates*, NAT’L INST. ON DRUG ABUSE (Jan. 29, 2021),
 23 <https://www.drugabuse.gov/drug-topics/trends-statistics/overdose-death-rates>.

24 ¹² *Opioid Overdose Crisis*, NAT’L INST. ON DRUG ABUSE (Mar. 11, 2021),
 24 <https://www.drugabuse.gov/drug-topics/opioids/opioid-overdose-crisis#:~:text=In%202019%2C%20nearly%2050%2C000%20people,died%20from%20opioid%2Dinvolved%20overdoses.&text=The%20misuse%20of%20and%20addiction,as%20social%20and%20economic%20welfare>.

25 ¹³ *Id.*

26 ¹⁴ Nora D. Volkow & A. Thomas McLellan, *Opioid Abuse in Chronic Pain – Misconceptions and
 27 Mitigation Strategies*, *The New England J. of Med.* (Mar. 16, 2016),
 28 [https://www.nejm.org/doi/full/10.1056/NEJMra1507771?query=paincmecollection#article_citing_](https://www.nejm.org/doi/full/10.1056/NEJMra1507771?query=paincmecollection#article_citing_articles)
 28 [articles](https://www.nejm.org/doi/full/10.1056/NEJMra1507771?query=paincmecollection#article_citing_articles).

1 medical care in a hospital or emergency department have increased by a factor of six in the past 15
2 years.¹⁵

3 61. The reach of prescription opioids are ubiquitous, indiscriminate, and deadly. Every
4 day brings a new revelation that unveils the depth of the opioid plague. The opioid epidemic, taking
5 at least 60,000 lives a year, now includes babies and toddlers amongst its victims.¹⁶ “Increasingly,
6 parents and the police are encountering toddlers and young children unconscious or dead after
7 consuming an adult’s opioids.”



17 62. While the epidemic of prescription pain medication and heroin deaths is ravaging
18 families and communities across the country, Defendants’ contributions helped the manufacturers
19 and distributors of prescription opioids extract billions of dollars of revenue from the addicted
20 American public while public entities experience tens of millions of dollars of injury caused by the
21 reasonably foreseeable consequences of the prescription opioid addiction epidemic.

22 63. Defendants have continued their wrongful, intentional, and unlawful conduct, despite
23 their knowledge that such conduct is causing and/or continuing to contribute to the national, state,
24 and local opioid epidemic.

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¹⁵ *Id.*

¹⁶ Julie Turkewitz, *‘The Pills are Everywhere’: How the Opioid Crisis Claims Its Youngest*, N.Y. TIMES, (Sep. 20, 2017), <https://www.nytimes.com/2017/09/20/us/opioid-deaths-children.html>.

1 64. The role of the opioid manufacturers, distributors and pharmacies in creating the
2 opioid epidemic has been widely publicized and is widely known. However, McKinsey’s role in
3 fueling the opioid epidemic has only recently been discovered.

4 **b. McKinsey’s Involvement with Purdue Pre-2007 Guilty Plea**

5 65. McKinsey was first hired by Purdue after OxyContin patents were held unenforceable
6 due to Purdue misleading the United States Patent Office. McKinsey’s role was to help Purdue
7 “protect [its] sales and to grow our business.”

8 66. On March 1, 2004, McKinsey entered into a “Master Consulting Agreement” with
9 Purdue for “services that would be defined from time to time.”

10 67. During this time, McKinsey advised Purdue on R&D, business development and
11 product licensing related to Purdue’s opioid products.

12 68. Purdue has recognized McKinsey for its “fine reputation and excellent experience
13 and relationships in our industry,” which Purdue relied upon to revitalize its opioid business.

14 **c. Purdue’s Corporate Integrity Agreement**

15 69. In May of 2007, Purdue Frederick Company, the parent company of Purdue Pharma
16 L.P. (“Purdue”) pleaded guilty to charges for misleading regulators, doctors, and the public
17 regarding Purdue’s opioid OxyContin. In pleading guilty, Purdue admitted to falsely marketing
18 OxyContin as a less addictive, safer alternative to other pain medications.

19 70. In the global settlement resolution, Purdue and its parent company paid over \$600
20 million and entered into a Corporate Integrity Agreement with the U.S. Department of Health and
21 Human Services, Office of Inspector General.¹⁷

22 71. Under the Corporate Integrity Agreement, for five years, Purdue was required to
23 refrain from making any deceptive or misleading claims about OxyContin and was obligated to
24 submit regular compliance reports regarding its sales and marketing practices. Purdue was also
25 required to monitor, report, and attempt to prevent inappropriate prescribing practices.

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28 ¹⁷ Letter from United States Department of Justice to Purdue Pharma, LP (Oct. 20, 2020),
<https://www.justice.gov/opa/press-release/file/1329576/download>.

1 **d. McKinsey's Role Following Purdue's Corporate Integrity Agreement**

2 **i. The Sacklers Seek to Divert Money to Themselves**

3 72. Following the guilty plea, the Sackler family, who controlled Purdue at all relevant
4 times and is one of the richest families in the United States, sought to insulate themselves from the
5 risk they perceived in Purdue.

6 73. Email threads between the Sacklers in early 2008 indicate that the Sacklers had
7 become concerned about personal liability regarding opioid-related misconduct.

8 74. The Sacklers considered selling Purdue or merging with another pharmaceutical
9 company as an option for limiting their risk. Mortimer Sackler Jr. advocated for a sale or merger in
10 a February 21, 2008 email to Dr. Richard Sackler (a former president and co-chairman of Purdue)
11 and several others, writing "[t]he pharmaceutical industry has become far too volatile and risky for
12 a family to hold 95% of its wealth in. It simply is not prudent for us to stay in the business given the
13 future risks we are sure to face and the impact they will have on the shareholder value of the business
14 and hence the family's wealth."¹⁸ The risk he referred to was, at least in significant part, further
15 liability related to misconduct in the marketing and sale of OxyContin.

16 75. Alternatively, the Sacklers considered extracting as much wealth as possible from
17 Purdue through distributions to themselves as shareholders. Such distributions would allow the
18 Sacklers to diversify their assets and make their wealth less vulnerable to judgments regarding
19 Purdue's sales and marketing of opioids, including OxyContin.

20 76. Either option -- a sale or significant distributions to shareholders -- would require
21 Purdue to increase profitability in the short term. Purdue turned to McKinsey, having already
22 developed a strong business relationship, for help maximizing sales of OxyContin given the
23 requirements of the Corporate Integrity Agreement and the scrutiny that came along with it.

24 //.

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27 ¹⁸ Jared S. Hopkins, *Sacklers Discussed Selling Purdue in 2000*, N.Y. TIMES,
28 <https://www.wsj.com/articles/sacklers-discussed-selling-purdue-in-2000-11557259128#:~:text=%E2%80%9CIt%20simply%20is%20not%20prudent,wealth%2C%E2%80%9D%20Mortimer%20Sackler%20wrote> (last updated May 7, 2019 6:21 PM)

1 84. In 2009, while permitting abuse-deterrent opioid formulations (“ADF”) labeling, the
2 FDA noted that “the tamper-resistant properties will have no effect on abuse by the oral route (the
3 most common mode of abuse).”

4 85. In approving the reformulated OxyContin, the FDA noted that the reformulation was
5 still not completely tamper resistant and those who intend on abusing the drug will likely find a
6 means to do so. In addition, the product can still be abused by simply ingesting larger than
7 recommended doses.

8 86. In April 2010, the FDA approved the reformulated ADF OxyContin. In August 2010,
9 Purdue discontinued its original formulation of OxyContin and began selling reformulated
10 OxyContin. The FDA did not permit Purdue to reference the abuse-deterrent properties in its label
11 until 2013. Purdue purposefully introduced the reformulated OxyContin as generic versions of the
12 OxyContin were becoming available, which threatened to erode Purdue’s market share and the price
13 it could charge. Purdue promoted its introduction of reformulated OxyContin and another ADF
14 opioid as evidence of its good corporate citizenship and commitment to public health and safety.
15 With McKinsey’s help in navigating the approval process, Purdue marketed the ADF version of
16 OxyContin as a means for doctors to continue safely prescribing their opioids while mitigating the
17 risk of opioid abuse.

18 87. McKinsey provided sales and marketing strategies designed to sell as much
19 OxyContin as possible, at one point in 2010 telling Purdue that the new strategies McKinsey had
20 developed could generate as much as \$400,000,000 in additional annual sales. McKinsey worked
21 with Purdue to implement the strategies, with McKinsey’s ongoing and extensive involvement.

22 88. Following McKinsey’s input, OxyContin sales grew dramatically, and the Sacklers
23 diverted the resulting profits into other holdings.

24 89. In a 2009 report, among other sales strategies, McKinsey advised Purdue sales
25 representatives to push the highest dosages of OxyContin, which were the most profitable for
26 Purdue. In order to maximize dosages and improve targeting of the coordinated marketing strategy,
27 McKinsey investigated the prescribing habits of individual physicians. McKinsey recommended an
28 approach that encouraged higher dose prescriptions by a smaller number of loyalist prescribers,

1 despite it being well-known that higher doses of opioids carry greater risk. Patients receiving high
2 doses of opioids (i.e., doses greater than 100 mg of morphine equivalent dose per day) as part of
3 long-term opioid therapy are three to nine times more likely to suffer from an overdose due to opioid-
4 related causes than those receiving low doses. The CDC also recognizes that higher doses of opioids
5 tend to increase overdose risks relative to any potential patient benefit.¹⁹

6 90. McKinsey's promotional efforts included claims that opioids could be taken in ever-
7 increasing strengths to obtain pain relief, which are misleading because such claims do not disclose
8 the increased risk of addiction and overdose associated with higher doses. Higher doses are inclined
9 to lead to addiction because patients on opioids for more than a brief period develop tolerance to the
10 opioid, requiring increasingly higher doses to achieve pain relief.

11 91. McKinsey also recommended a strategy to target those prescribers who did not
12 regularly prescribe OxyContin, referred to as physicians with "low comfort with extended release
13 opioids." McKinsey's strategy recommended that these prescribers use OxyContin earlier in a
14 patient's treatment for a longer period of time. McKinsey stated that by tailoring the dose to treat a
15 broad range of patients, "physicians can help their patients function better and lead a fuller and more
16 active life," even though this conclusion was not to be explicitly addressed. Claims that OxyContin
17 improved function and quality of life were not supported by substantial evidence, and federal
18 agencies, including the FDA, have made clear the lack of evidence to support claims that the use of
19 opioids for chronic pain improves patients' function and quality of life. McKinsey's carefully
20 crafted message indicates the culpability of its conduct, rather than innocent mistake.

21 92. McKinsey recommended promoting messages regarding the "convenience of q12h
22 dosing," even though it was well-known that OxyContin's analgesic effect wore off after eight to
23 ten hours in many patients. Additionally, in 2008, the FDA found that a substantial proportion of
24 chronic pain patients taking OxyContin experienced "end of dose failure," i.e., little or no pain relief
25 at the end of the dosing period. End of dose failure makes OxyContin even more dangerous because
26 patients will experience withdrawal symptoms, followed by a euphoric rush with their next dose,

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28 ¹⁹ Deborah Dowell et al., *CDC Guideline for Prescribing Opioids for Chronic Pain – United States, 2016*, CDC, <https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm> (last reviewed Mar. 18, 2016).

1 that fuels a need for OxyContin and thereby increasing the risk of addiction. Promoting twelve-hour
2 dosing without disclosing its limitations is deceptive and misleading because it implies that pain
3 relief supplied by each dose lasts twelve hours, rather than only eight to ten hours.

4 93. McKinsey helped shape Purdue's OxyContin marketing, which misleadingly
5 centered on freedom and peace of mind for users. The marketing was tailored to avoid running
6 directly afoul of the Corporate Integrity Agreement, but it remained misleading given what Purdue
7 and McKinsey knew about opioids. One advertisement said, “we sell hope in a bottle,” despite the
8 fact that both McKinsey and Purdue already understood the addiction problems associated with
9 opioid use and abuse. McKinsey encouraged Purdue to tell doctors that OxyContin would give their
10 patients “the best possible chance to live a full and active life.” McKinsey urged Purdue to train and
11 incentivize its sales representatives to increase sales across the market for opioids, even if sales went
12 to Purdue's competitors. This had the effect of worsening the opioid crisis even beyond the portion
13 of the crisis directly attributable to sales and use of OxyContin.

14 **e. Project Turbocharge**

15 94. Purdue's Corporate Integrity Agreement expired in 2012. With this restriction lifted,
16 McKinsey devised additional marketing and sales strategies for Purdue to further increase
17 OxyContin sales.

18 95. In the second half of 2013, McKinsey made recommendations to Purdue to increase
19 OxyContin revenue, including “Turbocharging Purdue's Sales Engine.”

20 96. McKinsey's “Project Turbocharge” recommendations included revising the existing
21 process for targeting high-prescribing physicians, with a shift from targeting solely on the basis of
22 prescription deciles to considering additional factors. Based on its analysis, McKinsey told Purdue
23 that “[t]here is significant opportunity to slow the decline of OxyContin by calling on more high-
24 value physicians” and that “[t]he revenue upside from sales re-targeting and adherence could be up
25 to \$250 million.”

26 97. Also, as part of the “Project Turbocharge” recommendations, McKinsey determined
27 and advised Purdue that the top half of prescribing physicians “write on average 25 times more
28 scripts per prescriber” than the lower half.

1 98. Despite knowing the recently expired Corporate Integrity Agreement required Purdue
2 to refrain from improperly incentivizing OxyContin sales, McKinsey also recommended increasing
3 incentive compensation for incremental OxyContin prescriptions, advising Purdue that “[r]evision
4 to incentive comp could better align reps to Purdue's economics.”

5 99. At the same time, McKinsey recommended decreasing training by six days a year in
6 order to allow employees more time to make sales calls. Meanwhile, McKinsey advised Purdue to
7 exercise closer control over its sales staff in order to generate more efficient physician targeting.

8 100. The physician targeting proved effective. McKinsey advised Purdue that visiting
9 high-prescribing doctors many times per year increased sales.

10 101. McKinsey recommended that Purdue circumvent pharmacies entirely with a mail
11 order program because enforcement by federal regulators was decreasing the dispensing of
12 OxyContin through Walgreens.

13 102. At the board level, McKinsey urged the Sacklers to impose a “revenue growth goal”
14 on management.

15 103. With McKinsey’s ongoing involvement and advice, Purdue implemented
16 McKinsey's recommendations discussed above, but rebranded the program from “Project
17 Turbocharge” to “Evolve to Excellence.”

18 104. McKinsey successfully accomplished what the Sacklers had asked it to achieve,
19 without any consideration for the societal implications of their actions.

20 105. Sales of OxyContin tripled in the years following the 2007 guilty plea, despite the
21 restrictions imposed by the Corporate Integrity Agreement. According to the U.S. Department of
22 Justice, “[f]rom 2010 to 2018, Purdue's profits were almost entirely driven by its success in selling
23 OxyContin.”

24 106. The Sacklers did not sell Purdue or enter into a merger, but their goal of extracting
25 wealth from the business was realized. The Sackler family has profited over \$10 billion from Purdue
26 since 2008, including \$1.7 billion in 2009 alone. These distributions were made possible by
27 McKinsey's services and came at the expense of a deepening national opioid crisis.

28

1 **f. McKinsey Knew About the Dangers of Opioids Through Their Work with**
 2 **Opioid Manufacturers and Purdue’s Misconduct, Yet Acted to Maximize**
 3 **OxyContin Prescriptions Anyways**

4 107. McKinsey has a long history of consulting in the pharmaceutical industry. In addition
 5 to its work with Purdue, McKinsey has performed “opioid-related work” for Johnson & Johnson,
 6 Endo International, and Mallinckrodt Pharmaceuticals. For instance, a McKinsey PowerPoint
 7 presentation prepared for Johnson & Johnson recommended that Johnson & Johnson aggressively
 8 target and influence doctors treating back pain in order to increase opioid sales.

9 108. Purdue’s 2007 guilty plea put McKinsey on notice of Purdue’s misconduct. By that
 10 time, McKinsey had access to public information indicating that OxyContin and other opioids pose
 11 significant risk of addiction and misuse.

12 109. McKinsey’s presentations to Purdue in 2013 included extensive discussion of
 13 doctors’ concerns about opioid misuse and side effects, demonstrating McKinsey’s awareness of the
 14 dangers of opioids. Rather than working to limit these harmful effects, McKinsey treated doctors’
 15 misgivings as obstacles to confront with new and targeted messaging.

16 110. McKinsey continued working with Purdue long after the severity of the opioid crisis
 17 came to light. In 2017, McKinsey proposed that Purdue pay CVS and other distributors of
 18 OxyContin rebates “for every OxyContin overdose attributable to pills they sold.”²⁰ In McKinsey’s
 19 presentation, McKinsey projected that in 2019, for example, 2,484 CVS customers would either
 20 have an overdose or develop an opioid use disorder. A rebate of \$14,810 per event meant that Purdue
 21 would pay CVS \$36.8 million that year.

22 111. A former McKinsey consultant described McKinsey’s work with Purdue as “the
 23 banality of evil, M.B.A. edition...They knew what was going on. And they found a way to look past
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 25

26 ²⁰ Walt Bogdanich & Michael Forsythe, *McKinsey Proposed Paying Pharmacy Companies*
 27 *Rebates for OxyContin Overdoses*, N.Y. TIMES,
 28 [https://www.nytimes.com/2020/11/27/business/mckinsey-purdue-oxycontin-](https://www.nytimes.com/2020/11/27/business/mckinsey-purdue-oxycontin-opioids.html?auth=link-dismiss-google1tap&fbclid=IwAR3xuNNLcWaG6T4sgsHo-GgsAABPIFJfKgzIweJoipSr9T99tAfU-niiBrc)
[opioids.html?auth=link-dismiss-google1tap&fbclid=IwAR3xuNNLcWaG6T4sgsHo-](https://www.nytimes.com/2020/11/27/business/mckinsey-purdue-oxycontin-opioids.html?auth=link-dismiss-google1tap&fbclid=IwAR3xuNNLcWaG6T4sgsHo-GgsAABPIFJfKgzIweJoipSr9T99tAfU-niiBrc)
[GgsAABPIFJfKgzIweJoipSr9T99tAfU-niiBrc](https://www.nytimes.com/2020/11/27/business/mckinsey-purdue-oxycontin-opioids.html?auth=link-dismiss-google1tap&fbclid=IwAR3xuNNLcWaG6T4sgsHo-GgsAABPIFJfKgzIweJoipSr9T99tAfU-niiBrc) (last updated Dec. 17, 2020).

1 it, through it, around it, so as to answer the only questions they cared about: how to make the client
2 money, and when the walls closed in, how to protect themselves.”²¹

3 112. In a 2018 email thread, apparently fearing consequences for McKinsey's work with
4 Purdue, two McKinsey senior partners who had participated in McKinsey's work advising Purdue
5 discussed deleting documents related to opioids.

6 **g. Purdue's 2020 Guilty Plea and McKinsey's Recent Statement**

7 113. In October of 2020, Purdue once again reached an agreement (the “2020 Settlement
8 Agreement”) with the U.S. Department of Justice to enter a guilty plea related to its marketing of
9 OxyContin. The agreement includes \$8.3 billion in penalties from Purdue and \$225 million from the
10 Sackler family.

11 114. In the 2020 Settlement Agreement, Purdue pleaded guilty to defrauding health
12 agencies, violating anti-kickback laws, paying illegal kickbacks to doctors, and “using aggressive
13 marketing tactics to convince doctors to unnecessarily prescribe opioids--frivolous prescriptions that
14 experts say helped fuel a drug addiction crisis that has ravaged America for decades.”

15 115. The 2020 Settlement Agreement was entered by Purdue and the United States
16 government. It explicitly states that it does not release Purdue of “[a]ny liability for claims of the
17 states or Indian tribes.”

18 116. The 2020 Settlement Agreement includes a provision specifically reserving claims
19 regarding “[a]ny liability of entities other than the [Purdue Bankruptcy] Debtors, including
20 consultants.”

21 117. On December 5, 2020, McKinsey issued the following statement regarding its work
22 with Purdue:

23 December 5, 2020—As we look back at our client service during the opioid crisis,
24 we recognize that we did not adequately acknowledge the epidemic unfolding in
25 our communities or the terrible impact of opioid misuse and addiction on millions
26 of families across the country. That is why last year we stopped doing any work on
opioid-specific business, anywhere in the world.

27 Our work with Purdue was designed to support the legal prescription and use of
28 opioids for patients with legitimate medical needs, and any suggestion that our work

²¹ *Id.*

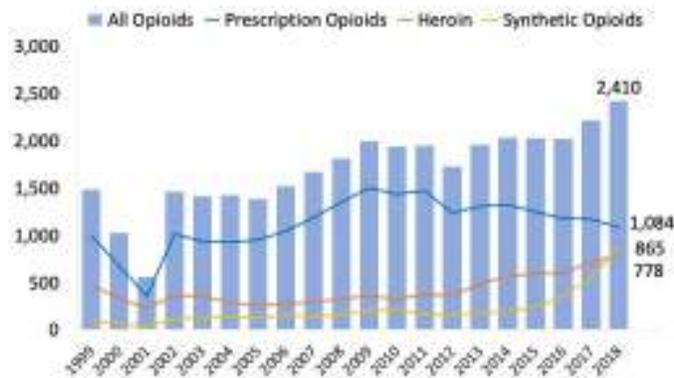
sought to increase overdoses or misuse and worsen a public health crisis is wrong. That said, we recognize that we have a responsibility to take into account the broader context and implications of the work that we do. Our work for Purdue fell short of that standard.

We have been undertaking a full review of the work in question, including into the 2018 email exchange which referenced potential deletion of documents. We continue to cooperate fully with the authorities investigating these matters.

118. On February 4, 2021, McKinsey settled opioid-related claims with 47 states, the District of Columbia, and five U.S. territories for approximately \$600 Million Dollars.

h. Impact of Opioid Abuse, Addiction and Diversion on Plaintiff

119. The State of California has been impacted severely by the national opioid crisis.



120. There is little doubt that each Defendants’ actions have precipitated this public health crisis in California, including in San Mateo County, by dramatically increasing opioid prescriptions and use. An unchecked supply of prescription opioids has provided a source for the illicit use or sale of opioids, while the widespread use of opioids has created a population of patients who are physically and psychologically dependent on them. When those patients can no longer afford or legitimately obtain opioids, they often turn to street-level dealers to buy prescription opioids or even heroin to satisfy their needs, resulting in detriments to both health (including through the potential ingestion of impure stock) and law enforcement (through crime related to street-level drug dealers and attempts to obtain illegal drugs).

121. California has an opioid prescription rate of 35.1 per 100 persons.²² In California, an estimated 45% of drug overdose deaths involved opioids in 2018; totaling more than 2,400 fatalities.

²² *California: Opioid-Involved Deaths and Related Harms*, NAT’L INST. ON DRUG ABUSE (Apr. 3, 2020), <https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/california-opioid-involved-deaths-related-harms>.

1 122. According to data from Rx Opioid Safe San Mateo, in just one year, over 24 million
2 opioid pills were prescribed and filled for San Mateo County residents. That's 43 pills for every
3 resident over the age of 18.²³ In 2015, nearly 350,000 opioid prescriptions were filled in San Mateo
4 County, with the average doctor writing 100 prescriptions. The top prescriber wrote more than 3,900
5 prescriptions, according to County health officials.⁸³ San Mateo County experienced 60 drug-
6 induced deaths in 2015, with approximately 20 tied directly to Opioids.

7 123. San Mateo County has seen a steady increase in deaths from opioids in recent years.
8 Like other counties, San Mateo County now spends millions of dollars each year dealing with the
9 fallout of the opioid epidemic. San Mateo County's ongoing costs include costs related to drug
10 treatment, emergency room visits, law enforcement, and social services (including for children born
11 opioid-dependent and/or have parents who are unable to care for them because of their own
12 addiction).

13 124. According to the data available, in 2017, 97 San Mateo County residents died from
14 drug related causes with 11 deaths directly tied to heroin use and another 26 deaths directly tied to
15 other opioids. In sum, 37 deaths in 2017 in San Mateo County were related to heroin or other opioids,
16 which is 38% of all drug-related deaths. If anything, these statistics are conservative because of the
17 complex nature of opioid abuse: the County is expected to directly attribute additional deaths,
18 currently attributed elsewhere, to opioids. In the prior year, 2016, 61 deaths were drug related, with
19 11 related to heroine and 16 related to other opioids.

20 125. These deaths represent the tip of the iceberg. According to 2009 data, for every
21 overdose death that year, there were nine abuse treatment admissions, 30 emergency department
22 visits for opioid abuse or misuse, 118 people with abuse or addiction problems, and 795 nonmedical
23 users. And as reported in May 2016, in California, opioid overdoses resulting in hospital visits
24 increased by 25% (accounting for population growth) from 2011 to 2014.

25 126. Between 2010 and 2014, opioids accounted for almost half of all filled scheduled
26 drug prescriptions. In 2015 there were an estimated hundreds of thousands of opioid prescriptions

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28 ²³ *Stay Rx Opioid Safe*, SAN MATEO COUNTY HEALTH,
https://www.smchealth.org/sites/main/files/file-attachments/rxopiod_safe_flyer.pdf (last
visited Aug. 3, 2021).

1 filled in San Mateo County, a figure that has gone up each year since. County health officials
2 estimate that thousands of residents are opioid dependent.

3 127. San Mateo County continues to suffer significant financial consequences as a result
4 of opioid over-prescription and addiction, including, but not limited to, increased law enforcement
5 and judicial expenditures, increased jail expenditures, increased substance abuse treatment and
6 diversion plan expenditures, increased emergency and medical care services, increased health
7 insurance costs and lost economic opportunity.

8 128. The seriousness of the Opioid Epidemic initially compelled the police department in
9 San Bruno, a city in San Mateo County, to issue kits with Naloxone to all sworn officers, to care for
10 victims of opioid overdoses—including addicts on the street—before paramedics can arrive at the
11 scene. But the problem became so severe and pervasive that the San Mateo County Sheriff’s Office,
12 through the San Mateo County Narcotics Task Force, has begun issuing Naloxone to its officers on
13 a countywide basis.²⁴

14 129. Through this litigation San Mateo County is doing its part to address the opioid
15 epidemic through the two tools available: injunctive relief and damages. However, it is important
16 not to lose sight of the human side of this tragedy – behind every death, and every dollar spent on
17 the epidemic there is a human life and a family that irreparably harmed.

18 **VII. CAUSES OF ACTION**

19 **COUNT I**

20 **NEGLIGENCE**

21 130. Plaintiff incorporates herein by reference all of the allegations in this complaint.

22 131. Negligence is established where the defendant owes the plaintiff a duty of care,
23 breaches that duty and the plaintiff sustains harm proximately caused by the defendant’s breach.

24 132. McKinsey, through its work with Purdue, owed Plaintiff duties, including but not
25 limited to, duty to not deceive, encourage, and facilitate the over-marketing and over-prescribing
26

27
28 ²⁴ News Release from San Mateo County Sherriff’s Office (Oct. 15, 2018),
<https://www.smsheriff.com/sites/default/files/articles/Narcan%20all.pdf>.

1 of a controlled substance known at the time to be addictive and known at the time to be a threat to
2 public health, safety, and welfare.

3 133. McKinsey breached this duty by, for years, devising and assisting Purdue with
4 implementing an aggressive sales and predatory marketing campaign, including *Project*
5 *Turbocharge*, that promoted misleading claims regarding OxyContin to significantly bolster the
6 amount of OxyContin prescribed and distributed throughout Plaintiff's community.

7 134. Plaintiff has suffered damages directly, proximately and foreseeably caused by
8 defendants' breaches of duties.

9 135. It was reasonably foreseeable that McKinsey's breaches of the duties set forth in
10 this Cause of Action would cause harm to Plaintiff in the form of higher costs related to opioid use
11 in San Mateo County, as well as opioid abuse, addiction and opioid related deaths—costs that
12 would not have been paid but for Defendants' wrongful conduct. Thus, Plaintiff has suffered
13 monetary costs incurred to abate the effects of the opioid epidemic proximately caused by
14 Defendants' breaches of their duties set forth in this Cause of Action.

15 136. McKinsey's breaches of the common-law duties that they owed to Plaintiff are the
16 proximate cause of Plaintiff's injuries, and Plaintiff is entitled to all damages allowable by law,
17 costs, and attorneys' fees, and any other relief the Court deems necessary and appropriate.

18 137. McKinsey's negligent acts as set forth herein were made with oppression, fraud or
19 malice entitling Plaintiff to exemplary damages.

20 **COUNT II**

21 **FRAUD AND MISREPRESENTATION**

22 138. Plaintiff re-alleges and incorporates by reference each of the allegations contained
23 in the preceding paragraphs of this Complaint as though fully alleged in this Cause of Action.

24 139. Fraud is established where the defendant makes a misrepresentation with
25 knowledge of its falsity and the intent to induce reliance and the plaintiff justifiably relies on the
26 misrepresentation and suffers damages. Negligent misrepresentation is established where the
27 defendant makes a misrepresentation of a material fact without reasonable ground for believing it
28

1 to be true and with intent to induce the plaintiff's reliance on the misrepresented fact. The plaintiff
2 must be ignorant of the truth and justifiably rely on the misrepresentation, resulting in damages.

3 140. McKinsey, through its business with Purdue, has committed misrepresentation by
4 concealing the following acts and information:

- 5 a. McKinsey's and Purdue's conspiratorial behavior and active role in deceptive
6 marketing and oversupply of opioids through overprescribing and suspicious sales,
7 all of which fueled the opioid epidemic.
- 8 b. McKinsey's consulting services and the scope and content of such services.
- 9 c. The existence of Plaintiff's claims and hiding McKinsey's lack of cooperation from
10 law enforcement and actively seeking to convince the public that Purdue's legal
11 duties to report suspicious sales had been satisfied through public assurances that
12 they were working to curb the opioid epidemic.
- 13 d. The high risk of addiction associated with opioid use and propensity of
14 OxyContin's 12-hour dosing to lead to end of dose failure and addiction.

15 141. McKinsey knew that OxyContin had the potential to be dangerously addictive and
16 that the false information they provided was material to healthcare providers' decision to prescribe
17 opioids to patients.

18 142. Despite such knowledge, McKinsey worked in concert with Purdue to create an
19 aggressive marketing campaign and intended that their misrepresentations be relied upon to
20 encourage additional opioid prescriptions to bolster Purdue's profits.

21 143. Healthcare providers working in Plaintiff's community did rely on false
22 representations made in Purdue's marketing plan that was created and implemented with
23 McKinsey's assistance. Plaintiff did not know and did not have the means to know the truth, due
24 to McKinsey's and Purdue's actions and omissions.

25 144. Plaintiff's reasonably and justifiably relied on McKinsey's and Purdue's affirmative
26 statements regarding their purported compliance with their obligations under the law and consent
27 orders.

28

1 fraudulent action would create or assist in the creation of the public nuisance – i.e., the opioid
2 epidemic.

3 154. McKinsey’s actions were, at the very least, a substantial factor in opioids becoming
4 widely available and widely used. McKinsey’s actions were, at the very least, a substantial factor
5 in deceiving doctors and patients about the risks and benefits of opioids for the treatment of
6 chronic pain. Without McKinsey’s marketing scheme, opioid use, misuse, abuse, and addiction
7 would not have become so widespread, and the opioid epidemic that now exists would have been
8 averted or much less severe. As Purdue’s management consulting company, McKinsey was in a
9 unique position to observe the flow of opioids and take action when orders were placed for
10 suspicious quantities and suspect intervals, among other things. Instead, McKinsey honed in on
11 these prescribers as cash cows for Purdue. McKinsey’s role in marketing opioids and facilitating
12 access to opioid drugs for long-term use contributed to a vast increase in opioid overuse and
13 addiction, as well as an increase in governmental entities, including San Mateo County.
14 McKinsey’s conduct thus directly caused a public health crisis, including costs for excessive
15 prescribing addiction related treatment costs, law enforcement costs, costs related to deaths, costs
16 related to lost productivity of the workforce, and costs related to caring for children born addicted
17 or with addicted parents.

18 155. The public nuisance – i.e., the opioid epidemic – created, perpetuated, and
19 maintained by McKinsey can be abated and further recurrence of such harm and inconvenience
20 can be abated.

21 156. Pursuant to Code of Civil Procedure § 731, Plaintiff requests an order providing for
22 abatement of the public nuisance that Defendants created or assisted in creating, Plaintiff, acting
23 on its own behalf and on behalf of its residents, seeks costs associated with the county’s efforts to
24 abate the public nuisance caused in whole or in part by McKinsey.

25 **COUNT IV**

26 **CIVIL CONSPIRACY**

27 157. Plaintiff re-alleges and incorporates by reference each of the allegations contained
28 in the preceding paragraphs of this Complaint as though fully alleged in this Cause of Action.

1 158. Civil conspiracy is established when there is an agreement to commit a wrongful
2 act, resulting in damage. Such agreement may be made orally or in writing or may be implied by
3 the conduct of the parties. A conspiracy may be inferred from the circumstances, including the
4 nature of the acts done, the relationships between parties, and the interests of the alleged
5 coconspirators.

6 159. McKinsey and Purdue, working together for decades, agreed to commit multiple
7 unlawful acts relating to the sales and marketing of Purdue's opioid products. McKinsey and
8 Purdue also agreed to use unlawful means to commit lawful acts as part of these marketing efforts
9 and sales.

10 160. McKinsey and Purdue agreed to unlawfully and knowingly misrepresent the
11 addictiveness of opioids in marketing OxyContin to healthcare providers within Plaintiff's
12 community.

13 161. McKinsey and Purdue employed unlawful means of evading Purdue's reporting and
14 compliance obligations to the Inspector General of the United States Department of Health and
15 Human Services for the five years in which Purdue was subject to a Corporate Integrity
16 Agreement, after Purdue pled guilty to criminal misbranding in 2007. McKinsey unlawfully
17 assisted Purdue with evading these reporting and compliance obligations to accomplish the lawful
18 act of maximizing Purdue's OxyContin revenue.

19 162. McKinsey and Purdue conspired to violate California law, including but not limited
20 public nuisance, unlawful business practices and false advertising through McKinsey's misleading
21 and predatory marketing campaign.

22 163. McKinsey and Purdue agreed to engage in deceptive trade practices, which
23 included concealing the addictiveness of opioids, overstating the efficacy of opioid use and the
24 ability to lead an active life.

25 164. McKinsey and Purdue agreed to engage in unfair trade practices, including
26 intentionally understating risks, overstating the benefits, and misrepresenting the medical necessity
27 of OxyContin and opioids generally, including for off-label uses. These practices are deceptive,
28 unethical, and immoral to consumers.

1 fuller, more active lives. This conduct likely deceived California doctors who prescribed opioid
2 medications, patients, and payors, who purchased or covered the purchase of opioids for chronic
3 pain, and Counties, such as San Mateo were burdened with the devastating effects of the opioid
4 epidemic.

5 174. McKinsey aided and abetted the actions of Purdue and knew or should have known
6 that false and misleading statements about opioids were being made and likely to mislead the
7 public. McKinsey made or disseminated false and misleading statements or caused false and
8 misleading statements to be made or disseminated.

9 175. The misrepresentations and omissions alleged herein are fraudulent, and thus
10 amount to unfair competition as set forth by the Unfair Competition Law, in that McKinsey
11 pioneered a deceptive marketing campaign to understate the addictiveness of opioids and
12 circumvent the Corporate Integrity Agreement.

13 176. The misrepresentations and omissions alleged herein are unlawful, and thus amount
14 to unfair competition as set forth by the Unfair Competition Law, in that they violate, among other
15 things, California Civil Code §§ 3479 and 3480, California Business and Professions Code §
16 17500, and several other common law violations, including negligence, fraud and
17 misrepresentation, and civil conspiracy. As set forth above, McKinsey misrepresented the dangers
18 of OxyContin. McKinsey disseminated these untrue and misleading misrepresentations with the
19 intent to boost sales and profits for Purdue.

20 177. The misrepresentations and omissions alleged herein are unfair, and thus amount to
21 unfair competition as set forth by the Unfair Competition Law, in that they are immoral,
22 oppressive, unscrupulous and substantially injurious to consumers and Plaintiff's community. The
23 injury to Plaintiff and Plaintiff's community caused by the opioid epidemic, fueled by McKinsey's
24 actions, greatly outweighs any benefit to consumers or competition under all of the circumstances.

25 178. As a direct and proximate cause of McKinsey's violations of the Unfair
26 Competition Law, Plaintiff suffered an injury and monetary harm, in the form of money expended
27 to abate the opioid epidemic.

28 //.

COUNT VI

VIOLATION OF THE CALIFORNIA FALSE ADVERTISING LAW

Ca. Bus. & Prof. Code § 17500, *et seq.*

179. Plaintiff re-alleges and incorporates by reference each of the allegations contained in the preceding paragraphs of this Complaint as though fully alleged in this Cause of Action.

180. Business and Professions Code Section 17500 makes it unlawful for a business to make, disseminate, or cause to be made or disseminated to the public “any statement, concerning . . . real or personal property . . . which is untrue or misleading, and which is known, or which by the exercise of reasonable care should be known, to be untrue or misleading.”

181. As alleged above, McKinsey violated Section 17500 by making and disseminating false or misleading statements about the use of opioids to treat chronic pain, or by causing false or misleading statements about opioids to be made or disseminated to the public.

182. McKinsey’s marketing scheme, set forth in this Complaint, are false deceptive and violate Section 17500 because McKinsey, in furtherance of the scheme, made misrepresentations and omissions regarding the addictiveness, safety, and efficacy of OxyContin to deceive consumers in Plaintiff’s community.

183. McKinsey understated the limitations of 12-hour dosing (including end of dosage failure), the risks of addiction, and other side effects of opioids.

184. McKinsey overstated the effectiveness, usefulness, necessity, and safety of opioids by marketing Purdue’s OxyContin for off-label uses (e.g., osteoarthritis) and claiming that opioid use can lead patients to live fuller, active lives, despite knowing that such representations were false.

185. McKinsey engaged in the predatory targeting of high-prescribing physicians to fuel the opioid epidemic and marketed OxyContin as an efficient drug that could lead patients to live fuller, more active lives. This conduct likely deceived California doctors who prescribed opioid medications, patients, and payors, who purchased or covered the purchase of opioids for chronic pain, and Counties, such as San Mateo were burdened with the devastating effects of the opioid epidemic.

1 186. At the time it made or disseminated its false and misleading statements or caused
2 these statements to be made or disseminated, McKinsey knew or should have known that the
3 statements were false and misleading and therefore likely to deceive the public. In addition,
4 McKinsey knew and should have known that their false and misleading advertising created a false
5 or misleading impression of the risks and benefits of long-term opioid use and would result in
6 unnecessary and improper opioid prescriptions and use.

7 **COUNT VII**

8 **NEGLIGENCE PER SE**

9 187. Plaintiff re-alleges and incorporates by reference each of the allegations contained
10 in the preceding paragraphs of this Complaint as though fully alleged in this Cause of Action.

11 188. A presumption of negligence (negligence *per se*) is established where McKinsey's
12 negligence involves the violation of a statute or regulation, where plaintiff is within the class of
13 persons that the statute or regulation was designed to protect, and the violation is a substantial
14 factor in the plaintiff's harm.

15 189. McKinsey's violation of the California Business and Professions Code have caused
16 and exacerbated the opioid epidemic.

17 190. Plaintiff is the class of persons the statute was designed to protect. The California
18 Business Professions Code is intended to protect consumers from McKinsey's harmful practices,
19 and Plaintiff is asserting suit to recover damages on behalf of the consumers in reside its
20 community.

21 191. As a result of McKinsey's statutory violations, Plaintiff has incurred monumental
22 costs to abate the crisis in the form of public health resources, healthcare, treatment facilities, and
23 law enforcement, Plaintiff seeks to recover all damages caused by McKinsey's negligence per se
24 unlawful and deceptive marketing and sale of opioids.

25 **VIII. JURY TRIAL DEMAND**

26 192. Plaintiff requests a trial by jury on all issues so triable.

27 //.

28 //.

1 **IX. RELIEF REQUESTED**

2 WHEREFORE, in consideration of the claims stated above, the Plaintiff in this case
3 respectfully submits that upon a full hearing of the evidence that this Honorable Court, and the jury
4 hearing this case, grant the following relief:

5 193. Judgment in favor of the Plaintiff against each Defendant separately and severally,
6 based on joint and several liability, against each and every Defendant in this case;

7 194. An entry of equitable relief and Order of Abatement against the Defendants, jointly
8 and severally, along with all those acting in concert with the Defendants including all agents,
9 subsidiaries and all other persons acting in concert or participation with the Defendants from
10 continuing the conduct made the subject of this Complaint;

11 195. An Order of Injunction against the Defendants on a permanent basis along with
12 accompanying restitution;

13 196. An Order from this Court against the Defendants that they fully compensate Plaintiff
14 for past and future expenses required to abate the nuisance caused by the opioid epidemic;

15 197. A judgement and award of compensatory damages, including without limitation, all
16 damages previously outlined in this Complaint;

17 198. An award of punitive damages;

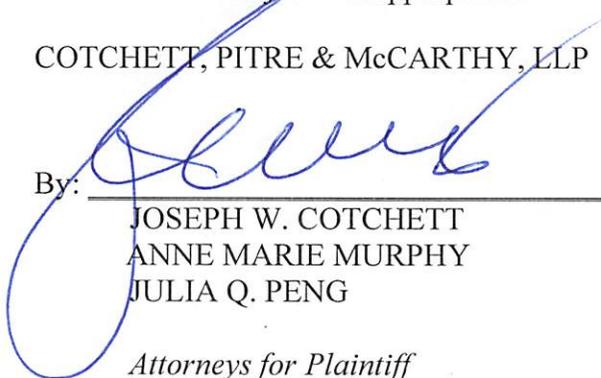
18 199. An award of pre-judgment and post-judgment interests;

19 200. In addition to the damages outlined herein, Plaintiff demands that Defendants pay
20 court costs, including attorneys' fees, applicable interest and all other relief as allowed under
21 California law and as this Court deems appropriate and just; and

22 201. Such other and further relief as the Court deems just and appropriate.

23 Dated: August 03, 2021

COTCHETT, PITRE & McCARTHY, LLP

24
25 By: 

26 JOSEPH W. COTCHETT
27 ANNE MARIE MURPHY
28 JULIA Q. PENG

Attorneys for Plaintiff