UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF INDIANA INDIANAPOLIS DIVISION

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Before the Honorable SARAH EVANS BARKER, JUDGE

OFFICIAL REPORTER'S TRANSCRIPT OF TEMPORARY RESTRAINING ORDER

Court Reporter: Laura Howie-Walters, FCRR/RPR/CSR

Official Court Reporter

United States District Court

Room 217

46 East Ohio Street

Indianapolis, Indiana 46204

PROCEEDINGS TAKEN BY MACHINE SHORTHAND
TRANSCRIPT PRODUCED BY ECLIPSE NT COMPUTER-AIDED TRANSCRIPTION

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3 (Open court.) THE COURT: Good afternoon, all. MR. PAUL: Good afternoon. MR. O'QUINN: Good afternoon, Your Honor. MS. TALMOR: Good afternoon, Your Honor. THE COURT: Now, this says my volume is not on, but is it? COURT CLERK: You're speaking through the sound system. 10 THE COURT: Can you hear me all right? Let's just 11 make sure we're clicking here. 12 Mr. Paul, can you hear me okay? 13 MR. PAUL: Yes, Your Honor. 14 THE COURT: And Mr. O'Quinn? 15 MR. O'QUINN: Yes, Your Honor. Can you hear me? 16 THE COURT: Yes, I can hear you. 17 And Ms. -- say your last name again. 18 MS. TALMOR: Talmor. 19 THE COURT: Talmor? Tal-a-more (phonetic)? I'm 20 looking at it, but it's not spelled the same, is it? Is your 21 first name Kate? 22 MS. TALMOR: Yes, Your Honor. I think it's coming up 23 strangely on Zoom, but it's Kate Talmor. 24 THE COURT: Yeah, Talamore, is it?

MS. TALMOR: Yes, Your Honor.

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THE COURT: Okay. Well, I remember you from the prior hearing, but I was thrown off by the little caption there.

Are you ready for us to take up the matters at hand here? Everybody? Yes?

MR. O'QUINN: Yes for the plaintiff, Your Honor.

THE COURT: We have convened so that I can hear from each of you with respect to the requested TRO that Lilly has sought in its recent filings, but we find ourselves in sort of a procedural thicket here.

So I want to try to clarify a little bit, if I can, the procedural situation because it's quite convoluted and we're overlapping now on deadlines and schedules and so forth.

The reason I'm feeling a need to address this is because Lilly has filed -- sorry, the defendant, the government, has filed an unopposed motion for an extension of time to file a combined briefing. So I just want to talk about the schedule for a minute.

The primary litigation, the initial lawsuit, based on the December 30th, 2020 advisory opinion from — that was issued by the government was heard by the Court and I enjoined the ADR process basically finding procedural APA kinds of deficiencies.

That's the underlying lawsuit, and that has not been finally resolved beyond just the injunctive relief. So the government's brief in support of its motion to dismiss and

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motion for summary judgment.

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(Brief interruption)

I'm getting somebody else talking. We have a lot of people listening, and you should all have your computers on mute.

Okay. So the defendant's brief on its motion to dismiss and motion for summary judgment, and Lilly's response to those filings and the opening brief have already been filed. Lilly — the opening brief is a reference to Lilly's cross motion for summary judgment. So those have been filed.

Defendant's reply on these issues and in response to these briefs is due June 1, just a few days from today, but that's the date that is the subject of the request for the continuance to June 4th to allow the government to file a brief in response to the preliminary injunction response.

Plaintiff's reply then is not due until June 14th. So we're right in the middle of trying to get the initial lawsuit teed up properly for the Court to resolve. And then I'll just say it this way, although I don't mean it quite as negatively as it sounds, out of left field comes a May 17th, 2021 enforcement letter to Lilly's issued by the compliance and enforcement arm. What are the initials again?

MR. O'QUINN: H-R-S-A, Your Honor.

THE COURT: H-R, say it again.

MR. O'QUINN: Health Resources and Services

Administration, also referred to sometimes as HRSA.

THE COURT: Okay, good, thank you. I knew the agency but I forgot the acronym.

HRSA issued a letter on May 17th, 2021, which was an enforcement letter that Lilly's has interpreted as an effort to basically do an end run around the primary litigation that is pending. The government denies that that's what it is, but the defendants are seeking through that letter to enforce the December 30, 2020 advisory opinion against Lilly. That's Lilly's take on it, and that's what has prompted the request for the TRO.

Plaintiff's opening brief on that TRO and preliminary injunction have been filed. The defense response to the TRO request was due on June 4th, although I have briefing from the government. I guess it's on the motion for preliminary injunction, not the TRO that's due on June 4th. So we're getting — and then plaintiff's reply is due June 14th. And there is supposed to be an in-person hearing on June 16th.

That's on Lilly's motion for preliminary injunction.

On Lilly's motion for TRO, it's basically the same request as the relief for the preliminary injunction. And both sides filed briefs on that today.

So we're tripping all over ourselves with respect to the procedural posture of the case. And there are various arguments by both sides, that one side says is at stake, the other side says no, that's not true. So it's gotten pretty confusing.

It's -- you're in a court of equity here when you're seeking injunctive relief such as you have. And so the fairness of this schedule and what's being asked for is part of the Court's consideration. So the May 17th, 2021, letter, for example, imposed a deadline of June 1 on Lilly's to respond to that letter.

In the last paragraph, it says that "HRSA requests that Lilly provide an update on its plan to restart selling without restriction covered outpatient drugs at the 340B price to covered entities that dispense medications through contract pharmacy arrangements by June 1, 2021."

So that June date, coming as it does right after a national holiday and without really much notice, has required the heroics of the parties as well as the Court to try to respond in accordance with your rights when a TRO is filed.

So it's not going to be enough for you simply to get the matter briefed and argued because I have to rule on these issues, and I think that it at least makes the June 1 date unrealistic. I don't know — that's not an order yet but it's troublesome that the date would be so soon. It's also troublesome that this arm of the department would issue the May 17th letter without apparent regard to the litigation schedule that is underway in the other lawsuit.

It does look punitive. It looks -- maybe the milder way of saying that is incentive because the same lawyers are trying to respond to all of it in the same court. The same judge is trying to respond.

So I don't know if HRSA didn't check or they checked and thought this would be another way for them to advance their concerns and interests, but it looks a little like piling on by the government with these deadlines. I'm only speaking of the deadlines.

So you're leaving us in a tough spot in terms of just trying to keep track of what is being filed, what needs to be filed and what rulings are required both as we go along and ultimately with respect to all the forms of relief that are being sought.

So that said, I want to take up the issue of the TRO today, only that, and see if we can determine whether with respect to the May 17th letter, the enforcement letter, there is a basis for some sort of injunctive relief that will answer Lilly's concerns or dash them if they are unfounded concerns.

So it's your motion, Mr. O'Quinn. I've read the submissions, but I'll hear you on that.

MR. O'QUINN: Thank you, Judge Barker. May it please the Court. Again John O'Quinn, on behalf of plaintiff, Eli Lilly, and we very much do appreciate the Court hearing this matter on such short notice.

As the Court is aware, and as we've just been discussing, the parties are in the midst of recent cross motions for summary judgment in this action --

THE COURT: Hang on just a minute, Mr. O'Quinn. I can barely hear this when it's coming through the system. Do you have earphones? Do you have some way I can hear it?

(Off-the-record discussion.)

Speak again, Mr. O'Quinn. Let me see if I can hear you any better.

MR. O'QUINN: Is that any better, Your Honor?

THE COURT: Not much, but I'll get in closer to the computer. It's coming through our courtroom system here and so the sound is going everywhere.

MR. O'QUINN: I can try to dial in from my phone, and leave the video on and switch to the phone if you think that would be better, Your Honor.

THE COURT: I don't know how to answer the question. Go ahead and try it on your phone, would you, Mr. O'Quinn?

MR. O'QUINN: I'd be happy to.

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THE COURT: Don't think I'm not impressed by your savvy, Mr. O'Quinn.

MR. O'QUINN: I'm figuring out all of this technology hopefully in time not to have to be able to use it.

(Off-the-record discussion.)

MR. O'QUINN: Your Honor, can you hear me any better?

THE COURT: Yes, that's better.

MR. O'QUINN: Okay. We'll proceed this way then.

Taking this from the top, again, Your Honor, we appreciate you hearing this matter on such short notice. As the Court is aware, the parties are currently in the midst of briefing cross motions for summary judgment in this action, both on the ADR Rule, which was the subject of the previous preliminary injunction, and on the December 30th advisory opinion decision, which announced that manufacturers such as Lilly were obligated to sell their pharmaceuticals to contract pharmacies at 340B discount prices.

Now among the core issues that are presented in this case are number one, whether the government can, consistent with the --

THE COURT: Sorry, hang on a minute. I just can't get it. Let's try the headset.

 $\mbox{\sc Ms.}$ Talmor, say something to me and let me see how I hear you.

MS. TALMOR: Good afternoon, Your Honor.

THE COURT: That's better.

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Have you got a microphone like that, Mr. O'Quinn?

MR. O'QUINN: I'll look, Your Honor.

THE COURT: Say something again, Ms. Talmor, because we're checking the headsets.

MS. TALMOR: Yes, Your Honor. Testing. Can you hear

me?

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THE COURT: I can actually hear you in the ambient space here, but Mr. O'Quinn's microphone is too far away from him.

MS. TALMOR: I think the headphones seem to make a difference.

MR. O'QUINN: Let me try it one more time before I plug it in. Any better, Your Honor? Can you hear me any better this way, Your Honor?

THE COURT: Now I'm getting all the feedback from this.

Go ahead, Mr. O'Quinn. I'm just going to try to concentrate here.

MR. O'QUINN: I apologize. The phone that I have is one that doesn't have an insert forehead buds, and so I think I've reached the limits of my technological capabilities, but I will do my best with this.

THE COURT: Maybe you better go back to where you were before because this is not working.

MR. O'QUINN: I'll go back to the computer, Your Honor.

THE COURT: Yes.

(Off-the-record discussion.)

THE COURT: Are you back in business, Mr. O'Quinn?

MR. O'QUINN: Is this any better, Your Honor?

THE COURT: Yes, that's better. You're up closer to it. Can you still read your papers?

MR. O'QUINN: I can.

THE COURT: Okay. Now --

MR. O'QUINN: I'm glad we'll be in person for the next one.

THE COURT: Yeah, me too.

MR. O'QUINN: So, Your Honor, what I was saying is that the core issues that are presented in this case are:

Number one, whether the government can, consistent with the 340B statute and the constitution, require manufacturers such as Lilly to provide the 340B discounts to contract pharmacies as it purported to do in its December 30th decision; and number two, even assuming that the agency has authority to issue such a decision in the first place, whether the decision announced in that December 30 advisory opinion is the kind of decision that required the agency to go through reasoned notice and comment rule-making.

Now as Your Honor noted, while those issues and others were pending before the Court, set to be fully briefed and ripe for decision in just a little over two weeks, the government sent a letter to Lilly last week saying that it had now determined that Lilly was in violation of its obligations and threatening to issue penalties if Lilly did not comply "immediately."

So (indecipherable) --

THE COURT: Wait, we missed it, Mr. O'Quinn. The court reporter didn't get it.

MR. O'QUINN: I said the letter wasn't sent to counsel. It doesn't acknowledge these proceedings or the fact that these issues are pending before the Court. And it's an extraordinary letter in that regard. It can only be explained by political motivation and outcry, certainly not reasoned administrative decision making, which is what we have been concerned about in this case from the very beginning, Your Honor.

The letter proves, as I said at the last hearing, that the outcome of any ADR process would have been preordained with no meaningful opportunity for a fair hearing and the Court was right to enjoin that process.

Now the government demands to encroach upon the decision-making process before this Court and force Lilly's compliance with the government's position even before this Court renders a decision.

THE COURT: Let me ask you a question, Mr. O'Quinn.

I don't read that to be what the May letter requires. The May letter requires that by this June 1st date -- let me find it again -- you're to provide a plan for restarting the selling of the outpatient drugs.

So I don't understand this letter to be anything

beyond what's written in that last paragraph. The reference to the possible sanctions, the penalties of up to \$5,000 for each instance of overcharging is basically to get your attention but they're not threatening to do that. This is — as I understand it, this is a notice of violation and the first step of the agency in an enforcement action. So it's separate from the issues that were raised in the prior complaint and request for preliminary injunction where the Court enjoined the ADR process.

So I don't see the threat to Lilly's from this letter that would warrant a TRO based on what they have actually asked you. They're not asking for any — they've not made a determination on the merits. They're not actually doing anything other than saying they've done their audit and based on their audit and their analysis, that Lilly's policy is not consistent with the statute. And so I don't get what you think is the threat here that warrants a TRO. What am I supposed to restrain?

MR. O'QUINN: I appreciate the questions, Your Honor, and there's two issues that are packed into that. One is what is in this letter. And two is what are the issues before the Court, and how do the issues that are before the Court intersect with this letter.

And I agree it's not about the ADR process. It's not about the ADR process that Your Honor has enjoined. It is

about the enforcement of the decision that the agency announced in the advisory opinion on December 30th requiring that we sell to or, if the government prefers, through contract pharmacies as opposed to just selling to covered entities.

So if you look at the last page of the letter, Your Honor, and the second paragraph from the top, it says — the sentence begins "For the reasons set forth above, Lilly must immediately begin offering its covered outpatient drugs at the 340B ceiling price to covered entities through their contract pharmacy arrangements."

That is the issue presented in Counts 1 through 4 of the complaint pending before the Court. And this letter doesn't just require that we give them a status update. Indeed I reached out to the government to say "Can we have agreement that there's not going to be adverse action taken pending the outcome of this case?" And that wasn't something that they could agree to.

And the reason that's significant, Your Honor, is because the letter puts us to a Hobson's choice. It says you either must immediately comply or you're going to face civil monetary penalties as described in the final ruling.

And it specifically says that "Whether civil monetary penalties are warranted, based on Lilly's willingness to comply" and that is what we say in response on June 1st. It's going to go with whether we face civil monetary penalties for

not agreeing to do the very thing that we have challenged in this court, namely whether we have to sell 340B discounted drugs to contract pharmacies.

THE COURT: Okay. Let me insert myself here.

If you view this letter as the first step in the enforcement action as the government has described it, then all that paragraph says on page 2, the first full paragraph, is "This is what our audit has revealed. You're not in compliance with the 340B ceiling price requirements. And as a result, there are monies owed either by virtue of overcharges for which there should be a credit or a refund to the covered entities."

So this is their position. This is what they are saying. This is what their end goal is. But I don't read this letter to be a threat to impose sanctions beyond the request that's articulated there, and that is, "This is where we think you're in violation, this is our position, and by June 1, you need to start putting together a plan to restart selling that complies with the law as we're telling you what it is in our enforcement action."

So I don't read that paragraph to be an expression of imminent threat or concern. In fact, when I read this letter, this is sort of a lesser point, but it makes me think maybe the right-hand at the department didn't know what the left hand was doing because the unfairness of June 1 is apparent given all the other deadlines in the case, and that there's nothing in

this letter that requires June 1. This letter could have said July 1, except that they feel strongly about it in that there are people who are supposed to be getting these beneficial prices who are not getting them because of your policy.

So there is an exigency. There's just not a crisis.

And this letter could have been sent with a different time frame that wouldn't create the confusion that I think this letter has by virtue of importing a June 1st deadline into this larger structure of briefing deadlines.

So I just don't read anything in this letter to create the imminent threat that you attach to it, not if you agree with Lilly's description of it that it's a violation letter and this is the first step in their enforcement action —

MR. O'QUINN: Your Honor --

THE COURT: -- which is separate, they say; this is separate because this is the agency enforcement action as opposed to the general counsel's opinion which came out on December 30th.

I think maybe this department likes to work on the basis of the day before a holiday. The December 30th letter comes down right before. It's like people cleaning off their desks. I'll leave that one to you, Katie, to decide if that's true.

MR. O'QUINN: Your Honor, I think several points. First, I think this letter looks exactly like the type of

threatened enforcement action that the Supreme Court addressed in the Sackett versus EPA case, as well as other cases, Your Honor, to make the point that when a party is threatened with imminent enforcement action unless it takes certain acts, then that is itself something that is reviewable, it is challengeable. And we can, if we need to, and we'd be happy to do so and we could do it tonight, file a second amended complaint that challenges this particular letter.

And the fact that the advisory opinion was general guidance, a general position, and now you have a letter that applies it specifically, doesn't make any difference in terms of the issues that are before the Court.

The challenge to the advisory opinion is properly before the Court because a "Litigant specific final decision is not a requirement for APA suits as the Seventh Circuit recently held in Builders Bank versus FDIC." It's a Seventh Circuit opinion from 2017.

So what you have is you have an advisory opinion that we have challenged. If we're right about our challenge, then this more recent letter could have never issued. And the threatened actions under that letter could never occur because they involve the same question, which is what is our statutory obligation under 340B in terms of selling to contract pharmacies. And if the Court concludes, as we have raised in — specifically in Count 2 of our complaints, that the

statute does not require such sales, then that viciates this May 17 letter.

THE COURT: Where do you find authority for your argument that you're being — or Lilly is being faced with the requirement that Lilly sell discounted drugs to specific pharmacies? I don't see that in the statute. That's not how I read that. They have to give it to the covered entities and that's the extent of the obligation, isn't it? That Lilly —

MR. O'QUINN: I agree.

THE COURT: That Lilly has to sell, at these reduced prices, the drugs to covered entities but there's nothing in the law that says how the covered entities distribute them or sell them or dispose of them. Is there? Can you tell me what you're relying on for that or are you just telling me that's how it plays out in the real world?

MR. O'QUINN: I think it's a little bit of both, Your Honor. So first, I agree that the statute did not require that we sell to contract pharmacies. The statute only requires that we sell to covered entities. And that is the heart of the issue that is teed up in the summary judgment briefing that we're about halfway through briefing in front of Your Honor.

THE COURT: So has Lilly continued to sell the 340B drugs at the discounted price to covered entities?

MR. O'QUINN: We absolutely have, Your Honor. Lilly is willing and does sell to covered entities. What it doesn't

do is sell to contract pharmacies who, after the fact, after they have, as a retailer, sold a drug to a particular patient --

THE COURT: Well, that's what I'm asking you, Mr. O'Quinn. Where is that foreclosed? Where is that prohibited?

MR. O'QUINN: Well, Your Honor, I think it's foreclosed in three ways.

First, the statute specifically identifies who the entities that we have to sell to are and who they are not. And just to be clear, in the contract pharmacy transactions that we're talking about, there's never a situation in which the covered entity takes title to a drug, that it ever actually purchases a drug or that even actually makes a decision about dispensing a particular drug or where it is dispensed.

THE COURT: That's my question, Mr. O'Quinn. Those aren't your concerns under the statute, are they? Because the statute simply says you have to sell to covered entities, and it identifies the entities. And there's been an opinion that says if you don't have an in-house pharmacy, then it has to go to the pharmacy that the covered entity designates.

But beyond selling the drugs at the discounted price to the covered entities, that's what you're supposed to do in exchange for your promise under the agreement you signed -- I say you, but I always mean Lilly -- the agreement you signed to

get the benefit of the expanded sales. You just have to make them available to the covered entities at this reduced price but there's nothing about purchases or sales to pharmacies.

You do have a distribution requirement though, don't you?

MR. O'QUINN: Your Honor, we have a requirement to sell to covered entities. On that, we're in vigorous agreement.

THE COURT: All right. And you're telling me that Lilly's never stopped doing that?

MR. O'QUINN: Lilly has not stopped making sales to covered entities. What Lilly has stopped doing is -- what Lilly has done is gone back to the arrangement that existed in 1996 as opposed to what HRSA would like us to do today. And under that arrangement, Lilly makes its drugs available to covered entities that wish to purchase it. They can purchase it directly and make it available -- if they do not have an in-house pharmacy, it makes it available to them through a single outside pharmacy.

What it does not do is make it available for reimbursement demands that come from contract pharmacies that purportedly have relationships with these covered entities. And what you have is a situation where weeks, months after drugs are dispensed, a contract pharmacy can make a demand for a purchase that actually isn't for the benefit of a patient of a

covered entity in order to replenish the supply that it allegedly disbursed on behalf of a patient of a covered entity.

And I think it's important to understand what's going on here because the statute does not say that we must sell 340B discounted drugs to patients of covered entities, nor does it say that we must sell 340B discount drugs to retailers who are selling to patients of covered entities, but only to covered entities. And that is the heart of the issue that is presented in the cross motions for summary judgment.

The government understands that the statute doesn't require such direct sales. That is why the advisory opinion engages in such gymnastics to come up with this purported agency relationship to try to argue that these sales are okay or are required because the contract pharmacy is acting as an agency of the covered entities.

THE COURT: Mr. O'Quinn, let me ask you a question:

Is it Lilly's policy that a covered entity can be denied the

340B discounts when the covered entity directs the discounted

drugs to be shipped to an outside dispenser?

MR. O'QUINN: Well, the short answer, Your Honor, is they can designate one and Lilly will honor that. What Lilly doesn't do is honor requests from contract pharmacies in a situation where the covered entity is not making the purchase, is not taking title, is not controlling the dispensing of the drug.

THE COURT: Okay. So explain to me, Mr. O'Quinn, in a step-by-step way, how this happens. Lilly gets a request from a covered entity to supply the discounted-priced drugs. So that request comes from a covered entity, right?

MR. O'QUINN: Respectfully, Your Honor, it doesn't work that way at all. And perhaps, you know, the single best resource that I can point the Court to as you think about these issues is the amicus brief that was filed just a week or two ago by a 340B expert who then proceeds to describe exactly how drugs are disbursed through this program. And he describes the history in great detail.

In 1992, the 340B statute --

THE COURT: Wait, excuse me, I've not read the amicus brief, and I'm asking you.

MR. O'QUINN: I understand.

THE COURT: You tell me, Mr. O'Quinn. I don't care if you dumb it down for me. That will be all right. But tell me how this works step by step and where you think your rights arise.

MR. O'QUINN: Yes, so let me try to describe it. I'll go back, and I think it would be helpful to talk a little bit about the history, because I think --

THE COURT: No, I just want you to tell me the process today, the process today.

MR. O'QUINN: So the process that happens today is

that if a patient goes to get a prescription filled, that prescription --

THE COURT: No, I'm sorry, sir. Take it from Lilly's perspective. Lilly gets an order --

MR. O'QUINN: I am, Your Honor.

THE COURT: Well, you're telling me --

MR. O'QUINN: There's --

THE COURT: Wait a minute. You're telling me about a patient. I want to know about Lilly, the manufacturer.

MR. O'QUINN: Your Honor, we don't --

THE COURT: Go ahead.

MR. O'QUINN: Your Honor, in order to describe how an order makes its way to Lilly, Lilly gets an order in the context of a contract pharmacy. Lilly gets an order from a contract pharmacy. Covered entities can send orders directly to Lilly, too. And if a covered entity sends an order to Lilly for stock, that is, I want X number of X drug, then Lilly sends stock to the covered entity.

With respect to the contract pharmacies, what has been the prevailing model over the last several years is that the contract pharmacy just orders its stock from Lilly in general, whether it's for 340B patients or whether it's for anybody else. They just order it en masse. What happens is that a patient comes in and the contract pharmacy dispenses the drug. Call it a contract pharmacy, it's just a regular pharmacy. Any

patient comes in, they dispense the drug.

After the fact, using algorithms, that is, they go back and decide was this person potentially the patient of a covered entity. And using algorithms, they make a decision on this. And if they do, they then go have their third-party administrator basically ask for a credit from Lilly. That is they will say "Well, when you sell us the next bottle, when you sell us the next vial, we want it at the 340B price because we think this person that we sold it to a few weeks or months ago may have been a 340B patient." That is how it happens right now.

So there is never a purchase under that so-called replenishment model, and I'd be happy to walk through this in more detail and was planning to in the context of our summary judgment brief, or for that matter, the upcoming preliminary injunction hearing, but that is the way the model works is that the drugs purchased by a contract pharmacy are, in fact, purchased by a contract pharmacy. They are not purchased by covered entities. And then it is this entire accounting exercise in which they say "Well, we think maybe this could have been to a 340B patient. So we should get money back or we should get the next one for a lower price," which is very different than how the world existed and what Congress had in mind when this all came into being where covered entities themselves would go and make a purchase from Lilly.

So to this day, if a covered entity comes to us and says "We'd like to make a purchase," Lilly will sell them what they are asking for. What Lilly is not doing is engaging in, you know, the receiving end of this arbitrage that's being done by contract pharmacies on the theory that somebody may have been a patient of a 340B entity, a covered entity.

THE COURT: So in this time since you changed your policy, there have been no requests by covered entities that you have refused to fill; is that true?

MR. O'QUINN: It is true that with respect to covered entities themselves, we are willing to sell to covered entities. I don't know whether there have been any disputes with somebody about whether they are a covered entity or not, but I know that we are willing to sell to covered entities.

And we are -- more than that, we are willing to sell to a single contract pharmacy location for them if they do not have their own in-house pharmacy, because we are committed to providing drug access.

What we are not committed to, and what the statute neither requires nor contemplates is for these for-profit pharmacies to be able to engage in essentially the type of arbitrage that they are engaged in at our expense and --

THE COURT: Hang on a minute, Mr. O'Quinn. So your statement that Lilly has, during this period of time when you changed your procedures from what the department has told you

you ought to be doing, has always made sales to covered entities, but also to any and all of the contract pharmacies attached to the covered entities or just one?

MR. O'QUINN: No, Your Honor, just to the covered entities and to any contract pharmacy that they wholly own or to a single contract pharmacy location if they do not have an in-house pharmacy.

THE COURT: All right. But previously they weren't limited to a single contract pharmacy, right?

MR. O'QUINN: Well, if the question is, was there a time where Lilly had been permitting reimbursement along the lines that I was describing earlier, yes, that is true. But Lilly came to recognize that the situation was untenable, that there was too much abuse and that it was not adhering to the benefits of patients. So Lilly said it would — from that point, which was about a year ago that Lilly announced this, Lilly made clear what its policy would be in terms of absolutely being willing to sell to covered entities, but not to reimburse through some unlimited number of contract pharmacy arrangements, and the statute doesn't contemplate sales to contract pharmacies at 340B discounts.

THE COURT: So getting back to the May 17 enforcement letter, except for the June 1st, 2021 part, how does this create a crisis for Lilly's that warrants the Court's extraordinary powers here?

MR. O'QUINN: No, I appreciate that we are asking for emergency, extraordinary relief, Your Honor. And I think it's warranted here because what the letter does is it puts Lilly to a Hobson's choice. The choice is, you can immediately begin selling through these contract pharmacies, honoring these so-called contract pharmacy contractual arrangements, or if you are not willing to do that, if you are not willing to make immediate reimbursements to third parties for whom you will never be able to get the money back from, and giving discounts immediately to third parties that you will not be able to get the money back from, if you are not willing to do that, then you will be subject to penalties, significant penalties. And that is exactly --

THE COURT: But excuse me, Mr. O'Quinn, that's been their policy all along. This is their --

MR. O'QUINN: Well, respectfully, Your Honor, it hasn't --

THE COURT: Wait, Mr. O'Quinn. This has been their policy all along that this is how they interpret the statute. This is how they think the duty devolves on Lilly's and the other manufacturers of pharmaceuticals. That — so I don't understand why this letter creates a crisis for Lilly's.

MR. O'QUINN: Respectfully, Your Honor, it has not been their policy all along. It is not the policy that was in the 1996 guidance, which only gave a safe harbor for covered

entities with respect to one contract pharmacy. It was not the policy in the 2010 guidance, which did not contemplate this replenishment model that we've been talking about. And the first time that they articulated this position was in the December 30th advisory opinion. And that is why I'm now here asking for a TRO or a preliminary injunction relating to the advisory opinion, because while the government explains it, this May 17 letter is just simply the other shoe falling from the December 30th advisory opinion decision.

THE COURT: So what do you want enjoined, Mr. O'Quinn?

MR. O'QUINN: I want the government to be enjoined

from requiring us to offer — to use their words — to offer

their covered outpatient drugs at 340B ceiling prices to

contract pharmacy arrangements pending this Court making a

decision on the merits on that issue.

THE COURT: That is not what that letter says. The letter says "Here's how we see it. And by June 1st, you've got to provide an update on your plan to restart selling without restriction" and so forth. So you have to come up with a plan.

MR. O'QUINN: Well, the plan, I think --

THE COURT: And the plan -- let me just go on. The plan would be the plan, I assume, that you would deploy if you didn't prevail in the merits of your lawsuit.

MR. O'QUINN: Well, Your Honor, that is the rub, right? In other words, if that's what the government was

asking for, if it was saying "Could you tell us what your plan is if you lose this lawsuit?" That would be one thing.

Because obviously, you know, we will abide by the decision in this case. And I assume that the government will as well. And that's really the rub here is whether or not the government can then say "Well, if you don't immediately begin offering outpatient drugs, and if you do not demonstrate your willingness to comply with what we say your obligations are, and to demonstrate that immediately, then you will be subject to penalties." That, I think, is what is untenable here because that is what interferes with the very issues before the Court.

If the Court decides the merits of the advisory -- of the challenge to the advisory opinion, the December 30 decision, that will be dispositive of the things that are presented in this May 17th letter. And I understand that the government has a slightly different view on that, but I think it's impossible that if this Court decides on the merits the question of statutory interpretation and decides in our favor, then that leaves no room for what the government is threatening in the May 17th letter.

Likewise, if the Court says that the December 30 decision was procedurally improper, then it needed to go through a notice and comment rule making, that you needed to hear what the -- that the government needed to take into

account all sorts of significant considerations, the cost, the benefits, whether they benefit, et cetera, et cetera. All of that will require reasoned agency decision making, none of which is reflected in the advisory opinion, which wasn't subject to any type of notice and comment rule making. And the May 17 letter, Your Honor, does nothing to cure that, does nothing to make it better.

So our position is that these two rise and fall together. And that is why if the Court were to enter a preliminary injunction pending resolution of this case, which I think would, be very, very soon, then that would protect us from the actions that the government has threatened in this letter, which as the Supreme Court said in Sackett versus EPA and in U.S. Corps of Engineers versus Hawk, if you don't have to be — you don't have to already have the enforcement action taken against you in order to be able to curtail the government when it's threatened such actions, and that's exactly what we have here. It's exactly the situation as was in Army Corps of Engineers versus Hawks and in Sackett versus EPA.

And we -- again, if the Court thinks it would be helpful and certainly if the Court thinks it's necessary, we can file a second amended complaint about this May 17 letter. We can do that forthwith. I just -- I didn't want to burden the Court with additional papers because I think that this letter and actions threatened in it rise and fall with the

decision that the Court has on the December 30th advisory opinion on the contract pharmacy requirement.

And that was the first time that the government articulated those requirements. The government argued "No, no, that's always been our position." But as we laid out in our complaint, Your Honor, paragraphs 90 to 94, and it's discussed in our preliminary injunction brief, pages 12 to 13, it was only last summer that the government was saying that it could not take enforcement action based on its then existing guidance. And that's what —

THE COURT: So wait, Mr. O'Quinn. Lilly's complaint here, the heart of it is that the dispensing mechanism of these drugs that have to be sold pursuant to the 340B program is what causes basically the flood of product into the marketplace beyond what the contemplation of the original statute was, right? That it's the method of dispensing —

MR. O'QUINN: I think that's fair, Your Honor.

THE COURT: What?

MR. O'QUINN: I think that's fair, Your Honor. It's not just dispensing. It is that the sales, the purchases, are actually happening by the contract pharmacies, but I think that's a fair shorthand way to describe it.

THE COURT: So the December 30th advisory opinion held in part that to the extent the contract pharmacies were acting as agents of the covered entities, then drug manufacturers,

such as Lilly's, who participate in the 340B program, were obligated to deliver the outpatient — the covered outpatient drugs to those contract pharmacies and to charge the covered entity no more than the 340B ceiling price for the drugs, right? So you get drawn into the dispensing by virtue of this obligation to deliver; is that right?

MR. O'QUINN: Well, I think that's the way that the advisory opinion tries to describe it. I think one of the procedural flaws with the advisory opinion is while it renders some conclusions about hypothetical agency relationships, it doesn't examine any facts, any real world facts about what happens with the contract pharmacies and the covered entities, and whether they are ever, in fact, acting as agents of the covered entity, assuming that that would be enough under the statute. It's not, but even if it were, that is not something that the advisory opinion decision addresses.

So under Motor Vehicles versus State Farm, such an important aspect of the decision, that the agency simply hasn't considered, and part of why it didn't consider it is because it didn't go through notice and comment. It didn't give anyone a chance to — it didn't give anyone a heads up, it didn't give anyone a chance to comment on it and to explain what was happening in the real world, and what this — what the implications of this would be.

That's another important factor that the December 30

advisory opinion decision simply doesn't consider. Where does the money go? Because under their rationale, the contract pharmacy could pocket it all. And that is decidedly not who Congress intended to benefit under the 340B statute.

The 340B statute was ultimately intended to benefit patients. And the fact is that through these contract pharmacy relationships, very few patients are getting any type of discount provided to them. And what monies flow in the form of a discount to a patient is something that the agency didn't consider. What money flows to the covered entities as opposed to staying in the pocket of these big for-profit pharmacy chains is something that the agency didn't consider.

THE COURT: So it sounds like, Mr. O'Quinn, the way you describe the system is that the way things have evolved, the covered entity and the single contract pharmacy arrangement is a fiction. And that, in fact, the drugs go directly to the pharmacy that dispenses to the patient, and then through some algorithm tries to figure out what percentage of its distribution of those drugs went to Medicare or Medicaid-eligible customers. Is that right?

MR. O'QUINN: That is exactly right, Judge Barker.

And the upshot of that is that the statutory requirement for us to sell does not apply, because the statutory requirement is that we offer the covered entity the opportunity to make these purchases, not these contract pharmacies that are making these

purchases and then doing accounting mechanisms after the fact.

They are not the ones that we're obligated to make a sale to. It is the covered entities. And if we were, that would raise — as we explained in our complaint and our summary judgment paper, that would raise some very serious constitutional questions under the takings clause.

THE COURT: Okay. Since Lilly changed its policy and you tell me you have been selling 340B drugs to the covered entities in this interim time, how are you doing that? How are you — what are the mechanics, the nuts and bolts, of that?

MR. O'QUINN: Judge Barker, the short answer is that when a covered entity — for example, let me take the simplest example. If a covered entity has its own in-house pharmacy and they put in an order for a certain amount of stock because they know that — they anticipate that their patients are going to need it, then we sell that to the covered entity at its — at the 340B ceiling price.

It is similar when they work with a single contract pharmacy. There are different models one could use. Historically what happened from 1996 until 2010 is that when they work with a single contract pharmacy, that contract pharmacy did what you might expect. It had a separate inventory that it kept on behalf of the 340B ceiling —

THE COURT: I'm not asking about the history,
Mr. O'Quinn. I'm saying during this period since you changed

the policy, and you tell me that you have not ever failed to give the discounted price to covered entities, how are you doing that?

MR. O'QUINN: My understanding, Your Honor, and this is where we reach the limits of what I know, but I certainly will endeavor to know more before our next hearing, is simply that they place an order and we send them the product.

How that works and in more granular detail, I'm not aware. And how specifically it works with their — in the case of a single contract pharmacy, I think depends on the specific arrangements. But I know it is something that is discussed by and discussed with the covered entity and Eli Lilly.

THE COURT: Hang on just a minute.

(Off-the-record discussion.)

My clerk has a good question. She says if Lilly is still dealing with the covered entities, but the covered entities have multiple contract pharmacies that they deal with, do you still supply the drugs to the multiple contract pharmacies?

MR. O'QUINN: No. It's one contract pharmacy unless it is a contract pharmacy that is owned by the covered entity itself.

(Off-the-record discussion.)

THE COURT: Let me just clarify because we're a little confused here. Lilly will sell to the covered entity --

MR. O'QUINN: Correct.

THE COURT: Period.

MR. O'QUINN: Period.

THE COURT: You'll also sell to a covered entity that has a contract pharmacy if the covered entity doesn't have a pharmacy in-house basically. Is that true?

MR. O'QUINN: Yes.

THE COURT: Will Lilly -- has Lilly been selling to covered entities, whatever they ask for, even if the covered entity deals with multiple contract pharmacies?

MR. O'QUINN: Yes. In other words, if the -- I think what you're asking is if the covered entity has its own -- in multiple contract pharmacy arrangements, are we still willing to sell directly to the covered entity itself? Yes.

THE COURT: So if the contract entity is in that category of whatever it was, 15 kinds of entities, and they make an order, you fill it and what they do with it, you leave to them to decide; is that true?

MR. O'QUINN: That is true, Judge Barker. In terms of the sales that we make to the covered entity, the covered entities then decide what to do with that pursuant to the statute.

THE COURT: Okay. I've kept you from perhaps attending to your outline there. So is there something else you want to add because I want to turn to Miss Talmor?

MR. O'QUINN: I appreciate that, Your Honor. Just a couple of points, and that's this: The Court plainly has authority to enjoin enforcement of an agency decision if the Court believes that we are reasonably likely to show that it is invalid because it was promulgated the wrong way or because it is contrary to substantive law, that is, for example, inconsistent with the statute.

Respectfully, the December 30th contract pharmacy opinion is such a decision. It articulates obligations. It articulates requirements on manufacturers. And the May 17th letter is simply an attempt by the agency to enforce that same decision. And it makes no difference whether the government, in the May 17th letter, fights the December 30 decision or not. It doesn't change the substance of what the agency is doing. It doesn't diminish this Court's authority to interpret the 340B statute, to enforce the APA, and to enjoin the government from taking action that would be inconsistent with either of those.

And as we cited in the short brief that we submitted yesterday, the case called Habitat Education Center versus

Kimball's, the court there noted "Defendants cite no authority and I have found none that would require plaintiff to file a fresh lawsuit to challenge a final agency action, and the action is no more than the latest iteration of an earlier action that is the subject of a pending lawsuit."

That is exactly what we have here. If the December 30th decision is substantively or procedurally inadequate, then the May 17th letter is too. And we ask that the Court enjoin enforcement of either pending a decision on the pending cross motions for summary judgment that will be fully briefed in just over two weeks. If the Court has any other questions, I'd be happy to answer.

THE COURT: Thank you, Mr. O'Quinn. Not right now. Miss Talmor?

MS. TALMOR: Thank you, Your Honor. HRSA, as the government agency charged with oversight and enforcement of the 340B program, recently made a determination that Lilly, along with five other manufacturers, are violating the statute through their contract pharmacy restrictions.

This Court should deny Lilly's TRO for four reasons:

Because HRSA's violation letter is not yet before the Court;

because there is nothing improper in HRSA having made its

determination at this time; because Lilly is wrong on the

merits of the statutory dispute and is fundamentally

misportraying the facts of what is going on in these

transactions; and because the entry of an injunction will not

prevent irreparable harm. Indeed, it will have no practical

affect as this litigation proceeds.

Taking the first point I'd like to address quickly:

The violation letter is a new agency action that is not

predicated on the general counsel's advisory opinion from last December. Lilly's argument that the violation letter rests on and rises and falls with the advisory opinion are inaccurate.

In reality, this letter determined for the first time that Lilly is noncompliant with its statutory violations. It is the first step in an enforcement action. And it resulted from a separate administrative process that was begun months before the advisory opinion ever was authored, and is separate from the advisory opinion. And just to be very plain here, it is HRSA that is statutorily charged with enforcing the 340B statute, not HHS's general counsel.

Now in two other --

THE COURT: Is this HRSA authority an authority that can be exercised entirely in-house so you don't have the ADR requirements that you had in the other opinion and the other process that was laid out?

MS. TALMOR: Absolutely, Your Honor. Now a covered entity can bring a claim in the ADR process, at least as to other manufacturers while Your Honor's injunction is in place. But that is a separate process from HRSA exercising its own statutory authority.

And indeed, that is born out by the fact that HRSA issued a letter to Lilly last August stating that it was undergoing review of Lilly's policy. That is the process that culminated in the violation letter. And as I noted, violation

letters that are similar went to five other manufacturers on the same day.

Now the two other --

THE COURT: So the precursor to the May 17, 2021 letter was the August notice letter; is that right?

MS. TALMOR: Yes, Your Honor.

THE COURT: All right. And the August 2020 letter that went out was independent of the December 30th advisory opinion?

MS. TALMOR: Yes, Your Honor.

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THE COURT: If there had been a notice in June of a violation by Lilly, and then an advisory opinion on December 30th, what's the connection between those two actions?

MS. TALMOR: They are not connected, Your Honor.

THE COURT: Are you saying there is no connection?

There's no legal connection?

MS. TALMOR: I am saying that HRSA's action does not depend on the advisory opinion. It would have been taken in the absence of the advisory opinion. And its authority for taking an enforcement action is the statute and the regulations that HRSA has promulgated. It is not the general counsel's advice.

THE COURT: Does the HRSA acting administrator take into account the general counsel's opinion?

MS. TALMOR: I believe that HRSA would take into

account an abundance of authorities, including looking at the opinion of the general counsel. But HRSA is under no obligation to agree. And, in fact, can disagree with the opinion of the general counsel. But I believe that the opinion of the general counsel would be relevant in the same way that the opinion of covered entities that other material that would be before the agency, including previous guidance, all of that would be relevant material. But the action taken by HRSA depends on the statute. It does not depend on the general counsel's interpretation.

THE COURT: So what is the impact of the general counsel's opinion then if it doesn't result in any enforcement action?

MS. TALMOR: There is absolutely no impact of the general counsel's advisory opinion, Your Honor. And that is the reason that we demonstrated, we think persuasively in our opening brief, that the advisory opinion is not final agency action. It does not impose obligations on manufacturers —

THE COURT: So it's just an idle gesture by the department? It has no effect? It's just how the general counsel thinks about it on that particular day?

MS. TALMOR: I do not think it is idle, Your Honor. I think on the contrary that it is common for agency counsel to issue advisory opinions to regulated entities setting forth the general counsel's view of a statute that the agency

administered. I think there are formal processes where a lot of agencies do that. But that is not basis for an enforcement action, particularly not in a statutory scheme like this where enforcement is vested in a different agency component.

So the general counsel issued its advice, as we stated in our brief, in response to a lot of public outcry about the serious harm that Lilly's policy has been causing and still causes. But that is not the basis for HRSA's enforcement action.

And in fact, I would point out in two related cases brought by two other manufacturers who also received violation letters, the court has ordered those manufacturers to amend their complaint adding claims to those violation letters, and just this morning, those manufacturers have done so. And just this morning, Defendant stipulated to a revised briefing schedule so that HRSA can produce an administrative record supporting the violation letter, and the parties can brief the merits of it. And I would point out that the only authority that Lilly supports to suggest that it need not do so fully supports our position.

In Habitat Education Center versus Kimball, the authority cited in their TRO brief, that court rejected an argument by the government that a plaintiff needed an entirely fresh lawsuit to challenge a new action. And the court said that it is proper for a plaintiff to file supplemental

pleadings challenging new agency action when it relates to existing claims. But we're not arguing that Lilly needs a new lawsuit. We're arguing that Lilly needs to amend its complaint and allow briefing on the violation letter --

THE COURT: So Mr. O'Quinn has said that Lilly's will do that. They've offered to do it. They've offered to do it quickly. So I don't think we need to delay too much more. Go ahead and file your amended complaint, Mr. O'Quinn.

All right. So we mooted that issue. Now go to your next one.

MR. O'QUINN: We'll do that, Your Honor.

MS. TALMOR: Thank you, Your Honor.

Next I'd just like to briefly touch on the reasons why there is nothing improper in HRSA making its determination during the litigation. Lilly is continuing to portray this as though the declarations that it already seeks based on the advisory opinion would moot out the HRSA violation. That is incorrect.

Now I would like to, if I may in a moment, talk about the factual inaccuracies in much of what Mr. O'Quinn said, but for now, I would like to say that the agency at no time, either the general counsel nor HRSA, has ever said that Lilly must sell 340B drugs to contract pharmacies.

So the declarations that Lilly has asked HRSA to issue would, if this Court were to issue them, would in no way stop

HRSA's enforcement because HRSA's enforcement does not order that at all.

Now it is Lilly here who has tried to preempt HRSA's enforcement action disclosed back last August when it filed suit challenging the advisory opinion, which again wasn't final agency action.

Now defendants are in no way trying to evade judicial review as Lilly suggests. We believe that once Lilly does amend its complaint, that the reasoning set forth in the violation letter and the legality of that reasoning will be before this Court, and this Court can properly decide it on the merits. It is separate from the advisory opinion.

Now, as I mentioned, HRSA sent violation letters to six manufacturers. Not all of those manufacturers are even engaged in litigation right now with us, but several of them are. And so we have, I believe it is five different actions pending in district courts across the country with widely varying briefing schedules, including one that is fully briefed and has already had a merits hearing earlier today. And another in which the matter won't be fully briefed for several months to come.

So while HRSA is very respectful of the Court's judicial process, I would submit that HRSA is under no obligation to time its enforcement action against multiple regulated entities to coincide with any one particular

litigation. And on the contrary, if every time a regulated entity filed suit against the government challenging something an agency was doing, if that obligated the agency to take into account the litigation and even preclear things as Lilly suggests, that would stop the working of government entities in their tracks. That simply is not the law.

THE COURT: Did all the other recipients of the enforcement letters have a June 1st response date?

MS. TALMOR: Yes, Your Honor, because that deadline wasn't tied to anything in the litigation. That deadline was the culmination of HRSA's determination that covered entities are being wrongly denied access to statutorily discounted drugs that they're entitled to purchase, and that those actions are having such harmful consequences on patients and providers that HRSA is seeking to have the manufacturers reverse their policy, which is the role of the agency.

THE COURT: Are you telling me that the HRSA letter says that covered entities have not been supplied the drugs that they've requested? I'm just speaking of the covered entities --

MS. TALMOR: Absolutely, Your Honor.

THE COURT: I'm not talking about the pharmacies. I'm just talking about the covered entities.

MS. TALMOR: Absolutely, Your Honor. The thrust of the letter is that covered entities are being denied access to

discounted drugs. And it is a fundamental misportrayal to say that the agency is requiring any sales to contract pharmacies or to pharmacies whatsoever.

So the letter that was issued to Lilly is akin to a cease and desist letter, which is a common function of administrative agencies just as the first step in an enforcement proceeding, and --

THE COURT: I want to make sure you're not using language that I'm misinterpreting.

So when you pull apart the system, the distribution system, and you identify the components of the process as the covered entity and a contract pharmacy, one, if the covered entity doesn't have a pharmacy itself, just speaking about those two parts of the distribution, is it HRSA's view, is it the department's view, is it yours in this litigation, that Lilly has not supplied drugs to those covered entities upon request or upon ordering?

MS. TALMOR: Yes, Your Honor. It's stated as plainly as I am able. HRSA has reviewed Lilly's policy and the complaints of covered entities as referenced in the letter. HRSA has determined that Lilly is denying purchases by covered entities in absolute violation of its 340B statutory obligation.

HRSA has determined that continued refusal to honor purchases by covered entities may result in sanction and to

violate Lilly's PPA. So we stated on page 8 of our TRO opposition this morning that "HRSA agrees with Lilly that the statute does not obligate it to sell to contract pharmacies."

Well, I tried as well as I'm able to be mindful of the precise words Mr. O'Quinn used this afternoon, and I believe he said many times that it is Lilly's position that it not be required to sell to contract pharmacies, or that HRSA or in its view the administrator, AO, I'm sorry, is requiring Lilly to sell to contract pharmacies or provide contract pharmacies with discounted prices. None of those statements are true.

Lilly could refuse to sell drugs to contract pharmacies if it chose, but Lilly cannot, without violating its statutory obligation, deny purchases by covered entities, including on the basis of the dispensing mechanism chosen by the covered entities.

So I think there are two-points to address on that, and there is the merits of the statutory dispute between the parties, and then there are the factual inaccuracies that Mr. O'Quinn discussed earlier today.

I'll start with the factual points. Mr. O'Quinn spent a large amount of time discussing the, as he put it, replenishment model of drugs going to contract pharmacies.

None of that material is before the Court. No evidence in the record suggests that this replenishment model is an accurate depiction of how covered entities purchase drugs.

There simply is no evidence before the Court, and it's not this Court's role at this time to determine whether the manner in which covered entities are purchasing drugs is the best model. What is before the Court once Lilly amends is whether Lilly's policy -- let me rephrase -- whether HRSA has lawfully determined that Lilly's policy violates the statute. And relatedly, when Mr. O'Quinn was discussing the so-called replenishment model, he pointed to an amicus brief that I understand Your Honor has not read. We will show in our forthcoming brief that that amicus brief we contend should not be considered by this Court. It was authored by a Mr. Aaron Vanderveld who Mr. O'Quinn depicted as a 340B expert. In reality, he is a (indecipherable).

THE COURT: I'm sorry, he's a what, Miss Talmor?

MS. TALMOR: I apologize. He is a consultant who has been paid by Pharma, which is the pharmaceutical industry trade organization, to produce a lengthy study undermining the 340B program.

He also is currently accepting monies; in other words, he currently is profiting off of another manufacturer, (indecipherable) contract pharmacy restrictions.

Mr. van der Velde has developed the software that at least one, if not other, manufacturers are using to restrict contract pharmacy purchases.

So Mr. van der Velde, we believe, is not an expert,

but he is a consultant hired by the pharmaceutical industry to undermine this program. So that is not material that this Court should consider in deciding the merits of the statutory question that actually is presented between the parties.

THE COURT: I have not permitted any amicus to participate in this litigation, which is one reason I hadn't read that. So I knew that the government opposed it. I'll make a decision with respect to the amicus, but I don't -- I guess I've already said, on this hearing, no. I can't think of any other reason to include them.

MS. TALMOR: My broader point, Your Honor, is not just about the brief, but it's that the -- all of the depictions

Mr. O'Quinn was giving about contract pharmacies buying the drugs and replenishing their inventory, none of that's in the record. None of that's before the Court --

THE COURT: Miss Talmor, you've got to slow down a little bit.

MS. TALMOR: I apologize. At no time has the agency required Lilly to sell discounted drugs to contract pharmacies.

THE COURT: So it sounds like to me -- let me just say -- that the parties agree as to the specific requirements of the 340B statute. And then after the language of the statute is nailed down, that it's at that point that the parties start to disagree as to what that means. Is that true, Miss Talmor?

MS. TALMOR: I'm not sure, Your Honor. I don't think so respectfully. I am not sure exactly the strategy, but I do know that Mr. O'Quinn, both in his filing yesterday and his presentation today, he continues to assert that the agency is making Lilly make sales to contract pharmacies.

THE COURT: So let me stop you there. So if I issued an order and said, "No, there's no requirement that sales be made to contract pharmacies in the statute," that's consistent with the government's view, right?

MS. TALMOR: Yes, Your Honor.

THE COURT: And that is also what Lilly wants. They don't want to have to sell to contract pharmacies, true?

MS. TALMOR: Yes, Your Honor. I think the problem is that if that order were issued, my understanding is that Lilly would take it to mean that HRSA's violation letter could not proceed through enforcement proceedings, and we would absolutely take the position that it could. In other words, if this Court rules that Lilly does not have to sell to contract pharmacies, HRSA will proceed with its enforcement action because we, HRSA, has determined that Lilly's policy is wrongfully denying purchases by covered entities on the basis of the dispensing mechanism selected by the covered entity.

THE COURT: Okay, I understand your position. Go ahead and make your arguments.

MS. TALMOR: Thank you. I'd like to tick through,

briefly, the merits. We believe that once Lilly amends, that its challenge to the violation letter will fail on the merits.

Again, the arguments that the violation letter depends on the advisory opinion is untrue. The determination made by HRSA for the first time that Lilly is overcharging covered entities is based on several factors that derive directly from the statute and existing regulations.

So first, HRSA has determined that Lilly's policy is denying sales to covered entities when those covered entities distribute through neighborhood pharmacies. Before I hit a couple other statutory points, I would just like to briefly point out why that matters so much.

Some of the covered entities that we are referring to serve particularly large geographic areas, meaning that there could be patients that live hours away from the actual covered entity. And for them to have to travel back to receive their prescriptions directly from the covered entities in-house pharmacy could prove impossible, even for those covered entities that have an in-house pharmacy.

And regardless whether they do or not, we're talking about particularly disadvantaged populations. We're talking about people often below the poverty line, that are underinsured and uninsured. And therefore, as we all know, may have transportation barriers. To require all patients of a

covered entity to receive their drugs from one location, whether it's in-house or one contract pharmacy, proves an insurmountable barrier for many patients, and simply isn't condoned by the statute.

Next, Lilly's continued assertion that it fulfills its statutory obligation by offering discounted drugs to all covered entities, they aren't talking about regular commodities here. We're talking about controlled substances. Lilly doesn't get to determine who does and does not have the lawful ability to take delivery of controlled substances, store them and dispense them, meaning that the vast majority of covered entities do not have the licensing, a pharmacist on staff, the ability to take delivery of Lilly's drugs; thus, they rely on outside pharmacies.

And if they do have a small in-house pharmacy, that in-house pharmacy often is not capable of serving all of their patients. So for Lilly to say all covered entities can buy as many drugs as they want is meaningless when the majority of covered entities do not have the ability. They don't have a DEA registration. They don't employ a pharmacist. So it simply is meaningless in practice.

Lilly continues to insist that the agency's interpretation has changed since 1996. That is false. We showed in our opening brief and referenced in our brief this morning that the agency has interpreted the statute

consistently since 1996 to prohibit manufacturers from denying a sale to a covered entity on the basis of dispensing mechanism.

THE COURT: On the basis of what?

MS. TALMOR: Dispensing mechanism. I apologize. Dispensing mechanism. In other words, how the drugs are received and given out to patients.

So the guidances that the agency has issued since '96 have flatly stated that the statute does not allow manufacturers to deny purchases by covered entities.

The statutory obligation has never changed. Lilly points to another provision that was added on to the statutory obligation in 2010. This is the discussion and the party's briefs about the language for purchase versus offer.

In truth, those words fall in the same statutory command. They refer to the same obligation by Lilly to sell its discounted drugs to covered entities. And the offer language that was added to the statute, what it actually did was it codified an additional requirement that says that Lilly cannot discriminate against covered entities by offering drugs to full price payors on more favorable terms than covered entities.

So what that means is that full price payors are allowed to buy Lilly's drugs through a variety of wholesale distribution mechanisms. And HRSA's violation letter, one of

the rationales that it relied on, one of the things that it stated is that Lilly is violating its requirements by denying covered entities the ability to purchase on an equal footing with full price payors.

The violation letter relies therefore on the plain text of 42 USB 256BA1 to find that Lilly is violating its obligation when it denies purchases by covered entities.

It also relies on the text of the purchasing agreements Lilly entered into which require it to ensure that that ceiling price is available to all covered entities. And the violation letter explicitly does not require Lilly to provide any discounts to a pharmacy.

It does state that existing regulations — that's the simple monetary penalty regulation that we cite in our brief — explicitly state that an overcharge will occur when there is any order that a covered entity results in paying more than the ceiling price, which is exactly what happens when Lilly denies purchases through multiple contract pharmacies.

As we mentioned in our brief this morning, the statutory history shows that Congress considered, and then removed from the statute, language that would have imposed a restriction just like the one Lilly wants this Court to read into the language. The original draft of the language that we are debating here would have restricted discounted drug sales to drugs that are dispensed by or — dispensed by a covered

entity or through an onsite contract pharmacy.

Congress removed that language from the statute. So essentially Lilly asks this Court to read into the statute language that Congress explicitly removed.

Lilly's reading also violates the Supreme Court's pronouncement on what the 340B statute requires. So again, the statutory rationale set forth in the violation letter needs to be judged on the four corners of that rationale set forth by the agency, and it is wholly based on the statute and consistent with it.

Moreover, Lilly has certainly not shown any entitlement to equitable relief. First of all, it would be improper to enjoin agency actions at large rather than -- I'm sorry, to enjoin agency enforcement rather than a discreet agency action, and that is what Lilly asks for.

The injunction they seek would seem impermissibly broad. They aren't asking this Court to enjoin a June 1st deadline to communicate to HRSA. They're asking this Court to stop the agency from proceeding through its normal agency enforcement, which would be improper.

THE COURT: Miss Talmor, what is supposed to happen by June 1st?

MS. TALMOR: So, HRSA has instructed Lilly, as you pointed out, Your Honor, to communicate to HRSA its plan to come back into compliance with the statute. That presents

Lilly with a choice. Lilly can communicate to HRSA its plan and Lilly could reverse its restrictions and resume offering covered entities the ability to purchase discounted drugs no matter how those drugs are dispensed. That is what HRSA believes Lilly should do.

However, Lilly has the option of not doing so, and if Lilly does so, what it is essentially doing is risking sanction should its interpretation prove incorrect at the conclusion of this litigation. Here's the critical point when analyzing whether any kind of injunctive relief is warranted —

THE COURT: Hold the microphone up by your mouth again.

MS. TALMOR: Thank you. Far from preventing an irreparable harm, the injunction that Lilly seeks will not have any practical effect at all. So let's walk through the options if this Court were to — well, regardless whether this Court entered an injunction or not, if Lilly continues with its policy while this litigation proceeds, then at the end of the this litigation, should the government prevail, as we expect to, Lilly will be subject to sanctions regardless whether there was a TRO or a PI entered. In other words, if this Court were to enjoin further agency action and the government prevails, Lilly is open to sanctions for that entire time until it comes back into statutory compliance.

On the reverse --

THE COURT: Well, wait a minute. The sanctions turn on a willfulness requirement, don't they?

MS. TALMOR: It has to be a knowing and intentional violation.

THE COURT: Right. So I mean there's some room there for something less than an automatic sanction, which you've said they are subject to.

MS. TALMOR: I apologize, Your Honor, if it sounded as though I meant it was automatic. It is far from automatic. Let me clarify.

The agency has made no determination that sanctions are warranted. And I believe the letter states that explicitly. The letter does state that HHS will consider whether sanctions are warranted (indecipherable).

THE COURT: Wait, wait, wait, you're going too fast.

Pretend like you're having to talk to a jury and slow it down a little bit because we can't -- I can't even follow it, never mind the court reporter getting it down, because you're just going lickety split.

MS. TALMOR: I apologize. I will slow way down.

The agency has not determined that sanctions are warranted at all and that, I believe, is explicit in the letter. HHS will analyze whether sanctions are warranted based on Lilly's entire course of conduct.

We cited in our TRO opposition this morning the

regulation that provides for the process of imposing sanctions. There is nothing automatic and that determination would not be made on June 1st. And even if the agency determined at some later date that Lilly should be subject to monetary penalties, that determination would be reviewable by a court, which would provide Lilly the opportunity to argue that, even if it was wrong, that it wasn't knowing and intentional. Lilly has all of the procedural protections there if sanctions ever were —

THE COURT: So it sounds like from your explanation that the June 1st date doesn't have any real effect. It's just — it was just where HRSA pegged a reply date. It could have been July 1. It could have been August 1, right?

MS. TALMOR: Kind of, Your Honor. I would qualify that. HRSA does take the position that Lilly is noncompliant, that it's having real world harms, and that Lilly should stop its policy.

HRSA does want Lilly to stop its policy. HRSA wants the other manufacturers to cease their restrictions as well because HRSA has made the determination that they are both unlawful and harmful to access to discounted drugs for underserved population.

So HRSA does want the manufacturers --

THE COURT: I know. I know they want that, but I'm trying to decide does the June 1st date matter? I'm being asked for emergency relief. I have to figure out what doom

will occur if June 1 comes and goes and Lilly doesn't respond and I don't make them.

MS. TALMOR: Your Honor, I think that is one of the strongest reasons why injunctive relief is not warranted is because there will be no practical impact from actually issuing an injunction. If the agency decides that Lilly is subject to sanction, there is no reason that that determination would necessarily be tied to June 1st. It will be an analysis of all of Lilly's conduct.

THE COURT: So why wouldn't the agency change the date sua sponte?

THE COURT: Well, put that in there. Put that in there, "as soon as possible."

MS. TALMOR: Your Honor, the manufacturers have shown that they are unwilling to come back into compliance voluntarily. This is the agency's — this — as I mentioned earlier, the cease and desist letter, this is the agency putting Lilly on notice that Lilly is violating the statute and that the regulator has determined that Lilly should come into compliance.

Now the reason that the June 1st date is depicted as a date to communicate its plan is because HRSA realizes that the

manufacturer policies vary and that the real world distribution channel, the wholesale distributors that manufacturers rely on, are complicated. So it's not a matter of flipping a switch and rescinding a policy. So HRSA has instructed manufacturers to let it know by June 1st what steps it will take to come into compliance. It's not a date for the imposition of sanctions.

And so we take the position — certainly I have no idea how long, you know, it will be before we receive Your Honor's ruling. If Lilly decides to wait out the resolution of this case and does not reverse its policy, then the agency may take actions to impose sanctions if the agency prevails, but the June 1st date isn't some magic date that needs to be enjoined.

THE COURT: Okay. Well, if there's no magic to it, I honestly don't understand why the agency couldn't take its own steps to ameliorate any confusion or concern that that might turn out to be a date that, while not problematic today, becomes problematic in ways that the plaintiff didn't foresee and we never probed; you didn't explain.

When there's a deadline that has to be met, most lawyers will advise their clients not to ignore it.

MS. TALMOR: We certainly, for what it's worth, do not think that Lilly should ignore it. Your Honor, we don't think there's anything particularly onerous in ordering each of the drug makers, not just Lilly, to communicate to the regulator a

plan to come into compliance within about two weeks, which is what they did. We just -- we don't think there's anything improper or unusual in that.

Lilly can choose to ignore the date, but we don't want Lilly to ignore the date. And Mr. O'Quinn mentioned having approached the government before filing his motion.

Mr. O'Quinn approached the government about suspending operation of the letter, suspending operation of the date, and the agency did decline to do that because the agency's interest is in having manufacturers come back into compliance as soon as possible.

The purpose of these letters is to put six manufacturers on notice that the regulator has determined that their policies violate the statute, and that by violating the statute, they violate their PBAs, which are what entitle them to access Medicare and Medicaid.

So the agency's interest is in having manufacturers comply with the statute because, let me be clear, at this time, Lilly's policy is denying purchases by covered entities. And the harms that Lilly lays out in its motion simply could not support injunctive relief.

As we've discussed, issuing a TRO or a PI at this point will not prevent HRSA from pursuing civil monetary penalties at the conclusion of this litigation if the government prevails. Lilly points to reputational harm, but

that can't support relief because HRSA has already determined that Lilly is violating the statute and HRSA's position will not change if a TRO is entered.

Lilly's other claims can't justify relief -THE COURT: Slow down. Slow down. Slow down.

MS. TALMOR: Lilly's counsel spoke about the importance of notice and comment, but there is no cogent argument that an agency is required to undergo notice and comment before taking an enforcement action.

So the notice and comment claim just has no relevance to the violation letter. And, you know, as far as the date here, the public interest is served by Lilly and its peers coming back into compliance with the statute as promptly as possible.

So the public interest would not be served either by this Court enjoining further agency proceedings, or by the agency backing off its position that manufacturers should come into compliance. You know, there certainly is no attempt to, as Lilly put it, usurp the litigation here, but HRSA's interest is in having Lilly resume honoring purchases by covered entities, and we feel there is real exigency in that happening.

THE COURT: Okay. Is that all?

MS. TALMOR: If Your Honor has any further questions, especially related to the merits, I would be happy to answer them.

THE COURT: I don't have any more questions. Of course I've read what you've submitted, and I'm alert to the fact that I've got to decide something quickly, so I'm eager to finish up the oral arguments here and do my work.

MS. TALMOR: Is there any matter I should address as far as the reason that we asked for combined briefing and the short extension on the remaining brief?

THE COURT: You want an extension of time and you won't give me one? Is that what I'm hearing you say?

MS. TALMOR: That is not my intention to say.

Certainly not. Your Honor, with the unexpected hearing here,
my team, which is just three attorneys, we had another hearing
just before this one, and we've had four emergency motions that
has not allowed us to continue with our reply briefing.

THE COURT: Well, I'm just giving you a little bit of a hard time here because if you think you've been busy, so has the Court. I bet Mr. O'Quinn has been, too. That's the nature of what we do for a living. So we're all facing deadlines, but I tried to get you to say "Oh, we'll overlook the June 6th. We'll put it off for 30 days or something." And I couldn't get you to do that. So I'm of two minds about giving you -- you didn't come into court in due equity yourself, Ms. Talmor.

MS. TALMOR: Well, Your Honor, respectfully, I don't think there's any real relationship between HRSA asking Lilly to communicate about its plan to come into statutory compliance

and counsel's reply brief. I do apologize for this matter being teed up so quickly before the Court, but I don't think those matters are really related, and I would note that Lilly did not oppose our request for a few extra days. And we also believe that it would seriously cut down on the reading material before this Court for us to combine our briefs into one.

THE COURT: I get that. I get that it's apples and oranges. I just wanted you to be a little uncomfortable.

MS. TALMOR: I am, Your Honor.

THE COURT: Okay, very good. I've accomplished what I intended to. I'll grant your motion for the extension of time.

MS. TALMOR: Thank you.

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THE COURT: All right.

Mr. O'Quinn, is there anything further that you need to add to the day's record here?

MR. O'QUINN: Respectfully, Your Honor, there's quite a bit that I need to respond. I will try to do it very briefly.

THE COURT: All right. Get as close to your microphone as you can.

MR. O'QUINN: Yes, Your Honor.

So first, I think it's important to recognize that with respect to the May 17 letter, government's counsel just told you that Lilly is risking sanctions if it does not comply

immediately. That is what you heard. And that is exactly the type of thing that the U.S. Supreme Court in Sackett versus EPA and Corps of Engineers versus Hawks said that a court absolutely can step in and review.

And if the Court can step in and review it ultimately, then the Court can step in and review it preliminarily, and can grant emergency relief. It sounds like the government is saying that any number of choices that Lilly has made, including the choice to pursue this lawsuit, could be used against Lilly in terms of sanctions.

They keep saying that they want Lilly to come into compliance. You heard her say "come into compliance" multiple times. Well, that is coming into compliance with their view. And the last time I checked, they don't get to decide what the law is. You do. And that is the issue that we have presented in our complaint, and that is the issue that will be presented in the amended complaint, which will raise the exact same issues. And that — the veiled threats against Lilly, both with respect to sanctions and the threat of potential revocation of PPO, is exactly why this Court ultimately needs to render a substantive decision.

Lilly, of course, will abide by a judicial interpretation of the statute. An open and judicial interpretation of the statute is exactly what we're seeking.

Now on the issue of interpretation, I think the

government's counsel respectfully is playing word games, semantics. And I don't want the Court to be misled about some key points. I don't think there is any dispute about whether or not Lilly is willing to sell to covered entities at ceiling prices when the covered entities are who are making the purchase. The covered entity never pays more than the ceiling price when the covered entity is making the purchase.

The word games that you're hearing is over what it means to sell to a contract pharmacy, and the fact is, that query to the contract pharmacy relationships, the covered entities never take title. They never actually make the purchase. Contract pharmacies are what are making the purchase, and the contract pharmacies are not entitled to the 340B discounts.

Now whether you want to think of that as sales, whether you want to think of that as distribution, however you want to describe it, the statute does not impose an obligation for us to provide discounts to contract pharmacies as opposed to the covered entities. And what we are seeking is relief against the very first thing that the government identified in its letter on May 17th where it says that Eli Lilly's policy places restrictions on 340B pricing to covered entities that dispense medications through pharmacies under contract.

That's what we're all talking about here. That is what we contend is not required by the statute. And that is

inconsistent with the structure of the statute, and that is what we are seeking relief against, both in terms of our challenge to the administrative order -- excuse me, to the advisory opinion that was issued on December 30th, and with respect to what the government has currently threatened.

Now the government's counsel comes back and says that I referred to a bunch of things that are not in the record in terms of the replenishment model and how things actually work in the real world when it comes to contract pharmacies and covered entities. And my simple response is this: If it's not in the administrative record, then that is the government's problem. And that is a reason why the government's December 30th decision should absolutely be vacated at a minimum, because under Motor Vehicle Association versus State Farm, the agency's absolutely required to consider all important aspects of an issue when it is making a decision.

And so if it doesn't have the facts, and if the facts are in the record with respect to how its contract pharmacies actually work, and whether covered entities ever take title, whether they ever have possessions, whether they actually are involved in the dispensing decisions as opposed to an all being an after-the-fact algorithm, well, that is the government's problem and that is reason enough to require vacatur of the advisory opinion and everything that the government is trying to do consistent with that opinion.

THE COURT: What is the effect of the general counsel's advisory opinion from December 30, 2020? Miss Talmor says not much.

MR. O'QUINN: Yeah, I appreciate that question because that's exactly what I wanted to address next because it is clear on the face that that decision announces obligations, it identifies requirements. It says, and it says it for the first time, interpreting the statutory language at issue, that manufacturers are obligated to make sales through these contract pharmacy arrangements. And that has legal consequences.

And again, I think if there was any doubt, the May 17th decision reflects that. Now they say "Oh, well, this has all been a question of some sort of investigation." What investigation? They issued the same letter to a number of manufacturers on the same day in which they just disagree with our interpretation of the statute. There's not anything — there's no investigation here. This is a dispute about what the statute means and what the statute requires.

THE COURT: Well, you haven't quite answered my question. You told me what's in the general counsel's advisory opinion, which I can read and have read and thought about and studied, but what difference does it make?

That's what Miss Talmor said, that in terms of the enforcement effort that's underway now through HRSA, that it

doesn't have any effect.

MR. O'QUINN: The advisory opinion, Your Honor, is, respectfully, it's a disguised legislative rule. It is a rule. It didn't go through notice and comment rule making, which it should have, but it is a rule. And part of how you know it's a rule is because it is the first place and the first time when the government imposes the requirement to sell to all contract pharmacies based on this statutory language regardless of what their dispensing model looks like. That's the first time that you see this.

And the government spent last year essentially taking the opposite position. This is documented in paragraphs 90 to 94 of our complaint. It's at pages 12 to 13 of our preliminary injunction brief. And the government was representing to Lilly that there was no binding obligation in terms of the requirement to sell to or through, or whatever semantics government wants to use, contract pharmacies.

That is what they represented to the covered entities themselves in other litigations in part to get that litigation dismissed. That is what they represented to the public. This is laid out, I believe it's in paragraph 96 of our amended complaint about things they said to the public, that there was no requirement that the government — that — excuse me, I think it's paragraph 94 of our amended complaint references an article that is reporting on what HRSA represented to it and to

the public, that the 340B contract pharmacy guidance that then existed was not legally enforceable. And that contract pharmacy guidance that then existed was guidance that involved a different statutory provision because the statutory language in both the advisory opinion from December and the May 17th letter is —

THE COURT: Well, isn't the more likely explanation here, Mr. O'Quinn, that the enforcement action by HRSA that's running down this parallel track either will or will not embrace the general counsel's view and standards, and you don't know yet basically whether that general counsel's advisory opinion will influence the kinds of allegations and findings that HRSA will make if they find that Lilly isn't in compliance.

I mean, you don't really know yet how the enforcement arm of the department, the agency, will use the advisory opinion; isn't that true?

MR. O'QUINN: Well, Judge Barker, I know one of two things is true. Either it will, which proves my point about the advisory opinion, or it will not, which proves my point about it all being arbitrary and capricious with the government zigzagging on what its rationale is and why it thinks that we have some kind of obligation to sell to or through these contract pharmacies as opposed to all the statute says, which is that we have to make — we have to honor purchases by

covered entities themselves that are no more than the ceiling price.

So they either will follow the advisory opinion, which proves my point that it was a legislative rule, or they will abandon it, which will prove my point that this is all arbitrary and capricious. And that is really, I think, where this all ultimately ends, Your Honor, is that there are two issues before the Court, either of which -- and frankly, probably more than this -- will be decisive as to what the government can do here. And that is true now, and it will be true after we amend our complaint to specifically make reference to the May 17th letter. But issue number one is what does the statute require? And if the Court agrees with us, that the statute does not require honoring these accounting arrangements as opposed to sales to the covered entities, then that will be dispositive of the advisory opinion, and that will be dispositive of the May 17th letter and the not veiled threat, the open threats that are being made about it.

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And number two, if the Court finds that the advisory opinion from December 30th was — you know, should have been subject to notice and comment but was not, well, that means that they can't be doing what they are trying to do through the May 17th letter either because if it announced a new rule and it did so without notice and comment, then the May 17th letter necessarily falls for the same reasons.

So that is why we respectfully submit that these rise and fall together. Again, I'm happy to amend the complaint. I don't think that that makes a substantive difference here, but the fact that we're talking about facts that the government submits are not part of the administrative record just goes to show that the government has not approached its problem solving, its decision making in a way that it's required to under the APA. And in terms of the ultimate question of statutory interpretation, that is a question for the Court and the Court's answer to that question is what should be dispositive of all of these issues.

So for these reasons, for the same reasons that the Supreme Court decided Sackett versus EPA, we ask that the Court grant relief in order to protect Lilly from the Hobson's choice that the government has admitted that it has put Lilly to, which is it must either come into compliance or risk severe sanctions.

THE COURT: Okay. Thank you very much. Hold on now. Just a minute. Can you turn off the sound now?

Can you hear me now?

MR. O'QUINN: (Nodded.)

THE COURT: Yes, they can.

Okay, I'm going to step down from the bench. You just stay there for a minute because I'll step away, and that will be like turning off the technology if we knew how to do that.

So just hang on a minute.

(Off-the-record discussion.)

All right. I wanted to discuss a couple of things with my clerk to make sure I had clarity about my intended course of action here. I will not enter a temporary restraining order against HRSA or the defendant, the Department of Health and Human Services, based on the May 17, 2021 enforcement letter. There's no irreparable harm that's threatened to Lilly by virtue of that enforcement letter.

There's no likelihood of prevailing on the merits of that enforcement letter as it's been instigated here in the first step of the enforcement proceedings in the form of a violation letter, which is how I interpret that. So I will not grant the requested relief, and the petition for a temporary restraining order is denied.

That said, the June 1 date is inequitable. It's unfair. It's the day right after the holiday, and it is insensitive to the way lawyers and their clients like to take advantage of opportunities like Memorial day.

And so since this is a court of equity as I am presiding now, I will ameliorate the effect of the June 1st deadline by making it ten days from June 1st, which would be June 10th as the date on which Lilly must submit to HRSA the plan that's referenced in the last paragraph of the May 17th letter.

That plan does not need to be expressed in a way that requires Lilly to give up any of its claims in the pending litigation. It can do so without prejudice to its litigation positions and strategies in the primary litigation. That's a usual technique to say without admitting liability, without acceding to the interpretations of HRSA or the explanations, the predicates, that are laid out in that May 17th letter, the Lilly plan for compliance would be to "do what we've said we're required to do." I assume that's what you'll say, that is your position. And if HRSA takes a different view about your interpretation of the plan, then they'll have to prove up through their enforcement mechanism whatever it is they intend to do.

So I think that that's the extent of the relief that I can offer today under the usual paradigms of injunctive relief. The other schedules, I granted the government's request for a brief extension to make the filings that were referenced in that motion. And I have directed counsel for Lilly's to go ahead and amend their complaint, which could be done pretty quickly, and get that on file so that everything's incorporated in the litigation that I'm going to have to sort through and resolve. And then we'll hold the in-person hearing on June 16th, 2021 to determine what action to take on Lilly's motion for preliminary injunction.

So that's the action that flows from the Court today.

76 Is there anything else I need to address, Mr. O'Quinn? MR. O'QUINN: Not for the plaintiffs, Your Honor, thank you. THE COURT: Anything from you, Miss Talmor? MS. TALMOR: No, Your Honor, thank you. THE COURT: All right. Have a good holiday weekend and I'll be in touch, and we'll see you in mid June. MR. O'QUINN: Thank you, Your Honor. You too. MS. TALMOR: Thank you, Your Honor. 10 (Court adjourned at 5:25 p.m.) 11 ************************* 12 13 CERTIFICATE OF COURT REPORTER 14 15 I, Laura Howie-Walters, hereby certify that the 16 foregoing is a true and correct transcript from reported 17 proceedings in the above-entitled matter. 18 19 20 21 /S/LAURA HOWIE-WALTERS May 31st, 2021

LAURA HOWIE-WALTERS, FCRR, RPR, CSR Official Court Reporter Southern District of Indiana Indianapolis Division

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