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September 9, 2016

Ms. Heather Bresch
Chief Executive Officer
Mylan Inc.
1000 Mylan Boulevard
Canonsburg, PA 15317

Dear Ms. Bresch:

For adults and children with severe allergies, an epinephrine injection can be the difference between life and death. No parent should have to make a decision between spending \$600 on two EpiPens for a child and putting food on the table for their family. I write to express my concerns about Mylan's excessively high price for the EpiPen.

The rising cost of prescription drugs is impacting families across America every day, and I am especially concerned with the practices that led to the skyrocketing price of the EpiPen.

As a policymaker, I value and encourage the research and development of new and innovative treatments and cures for patients, especially those that are life-saving. I understand that innovation requires investment. What makes the EpiPen case particularly egregious is that the price increase for the product is not correlated with any new development or research. The EpiPen first came to market in 1987 and was affordable – around \$50 – until Mylan acquired the product in 2007.

I do not believe that recent efforts by Mylan are sufficient to address or justify the high price of the EpiPen. While coupon programs like Mylan's savings card program may help some consumers with the immediate cost of the EpiPen, they are not available to all consumers, including the millions who are covered by Medicare and Medicaid. Further, insurance companies that cover the drug do not receive coupon discounts, which increases overall costs to the healthcare system, which are ultimately passed back down to the consumer.

Additionally, following years of effort to prevent generic and competitor products from entering the market, Mylan recently authorized its U.S. subsidiary to launch a generic EpiPen. However, the cost of this EpiPen is still currently estimated to be around \$300 per two-pack. It is unclear what the difference between the brand and generic drugs will be, why only Mylan can produce the product, and whether the additional product will bring down prices for the consumer.

Three years ago, the tragic death of a young girl at summer camp in Sacramento motivated the state legislature to require every school in California to have an Epi-pen on site. However, school nurses in my district are concerned that fewer families can afford the Epi-Pen, resulting in

fewer students bringing their own personal Epi-Pen to school. The nurses believe this could put a serious strain on the schools' limited supply and ability to handle student emergencies.

Anaphylactic shock doesn't just happen at school, it can happen anywhere at any time. My own grandson suffers from a peanut allergy and I carry an Epi-Pen wherever we go. But too often an Epi-Pen is only available to children through their school because it is simply too expensive for families to afford.

I have also heard from constituents in Sacramento who have had to rely on old and potentially ineffective EpiPens long after their expiration date because of the high cost of the new product. Life-saving drugs like these should be affordable for everyone, and families should not have to struggle financially to access a drug that has long been proven to work effectively and cost efficiently. I urge Mylan to reconsider the high price of the EpiPen. I look forward to your response and explanation of how Mylan will ensure that this life-saving product is accessible and affordable.

Sincerely,



Doris Matsui

Cc: Robert M. Califf, M.D., Commissioner, The Food and Drug Administration