

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23

ALABAMA STATE BOARD OF PHARMACY

BUSINESS MEETING

Wednesday, January 14, 2015

9:10 a.m.

LOCATION: Alabama State Board of Pharmacy  
111 Village Street  
Hoover, Alabama 35242

REPORTER: Sheri G. Connelly, RPR

1 APPEARANCES

2

3 BOARD MEMBERS:

4 Dan McConaghy, President

5 Buddy Bunch, Treasurer

6 David Darby, Member

7 Donna Yeatman, Member

8

9 ALSO PRESENT:

10 Susan Alverson, Executive Secretary

11 Mitzi Ellenburg, Director of Operations

12 Eddie Braden, Chief Inspector

13 Glenn Wells, Inspector

14 Mark Delk, Inspector

15 Cristal Anderson

16 Terry Lawrence

17 Blake Anderson

18 Zac Brown

19 Gary Mount

20 Cara Leos

21 Matthew Muscato

22 Tammie Koelz

23 Ronda Lacey

- 1 Dane Yarbough
- 2 Roger Bates
- 3 Louise Jones
- 4 Rick Stephens
- 5 Jim Easter
- 6 Steve Bethea
- 7 Chris Burgess
- 8 Julie Hunter
- 9 Cynthia Ransburg-Brown
- 10 Jack Adams
- 11 Eddie Vanderver
- 12 Leah Pierce
- 13 Waldo Roth
- 14 Maggie Fields
- 15 Stephanie Tristano

16

17 \*\*\*\*\*

18

19 MR. MCCONAGHY: All right. We're  
20 going to open the January 14, 2015, Alabama  
21 State Board of Pharmacy meeting. We do have a  
22 quorum with the exception of Tim Martin is not  
23 here. All other members are present and

1     accounted for. I need a motion to adopt the  
2     agenda.

3                 MR. DARBY: I move we adopt the  
4     agenda.

5                 MR. BUNCH: Second that.

6                 MS. YEATMAN: Second.

7                 MR. MCCONAGHY: All in favor?

8                 MR. DARBY: Aye.

9                 MS. YEATMAN: Aye.

10                MR. MCCONAGHY: Right off the top, I  
11     know you got it a little late, Buddy, but are  
12     you ready to do the treasurer's report?

13                MR. BUNCH: I'll take a stab at it.  
14     Good morning. We did just get it kind of off  
15     the press. We had a little technical snafu, but  
16     Dan helped me. We're in good shape. Dan's been  
17     doing it for years, so if we're off, it's all  
18     his fault. I couldn't screw it up that bad in  
19     one day. I run it like I'll run my business.  
20     If I've got enough money to pay the bills at the  
21     end of the week -- at the end of the month,  
22     we're doing good, right.

23                But I think the income as far as the

1 budget and all, we're pretty much in line with  
2 everything that -- that we budgeted last year  
3 and I'll beg a little forgiveness on this month  
4 and hopefully next month we'll be more prepared  
5 for it but we were -- I got here a little bit  
6 early and we were trying to get it printed and  
7 done and it just didn't happen until JUST now.  
8 But anyway, again, we're in good financial  
9 situation and I'll give you a little bit better  
10 report next month.

11 MR. MCCONAGHY: I would add on Buddy's  
12 report there too, anybody that is from the  
13 outside looking in, that 90 percent of the  
14 revenue that we're going to get for the year is  
15 already in and it might look like there's a lot  
16 of money in there but there's not that much  
17 money when it's got to last you basically a year  
18 and a half because the next cycle is not near as  
19 much income. But anybody from the outside  
20 looking in needs to understand that that balance  
21 is not as big as it looks, so.

22 Motion to accept?

23 MR. DARBY: I make a motion we accept

1 the financial report.

2 MS. YEATMAN: Second.

3 MR. MCCONAGHY: All in favor?

4 MR. DARBY: Aye.

5 MR. BUNCH: Aye.

6 MS. YEATMAN: Aye.

7 MR. MCCONAGHY: All right. We have  
8 the man here, Mr. Clean, Mike Garver, to do our  
9 Wellness report today.

10 DR. GARVER: That's a great  
11 introduction. Happy New Year.

12 MR. DARBY: Happy New Year.

13 DR. GARVER: Good to see all of you  
14 and speak to you about the Wellness -- the shape  
15 of the Wellness committee and where we are and  
16 where we are with several different aspects.  
17 I'm going to just kind of start off and read the  
18 report for actually the month of December.

19 There are presently 144 people in our  
20 screening program with signed contracts and  
21 orders. This number includes any individuals on  
22 a diagnostic monitoring contract but does not  
23 include any of the health professionals listed

1 below. There is one pharmacist in inpatient  
2 treatment. There are present 16 pharmacists who  
3 are being held out for some reason, and when I  
4 say this for some reason, these reasons can mean  
5 that they are -- have halfway house, that the  
6 treatment center is waiting on them, that  
7 they're being evaluated, or that there is  
8 another problem -- health problem with them that  
9 prevents us from presenting them to you for  
10 relicensure.

11           There are no techs in treatment at the  
12 present. There are ten techs who are being held  
13 out for the same sorts of reasons and we expect  
14 a lot of those in the first quarter to come due,  
15 so we're going to have a big influx of all of  
16 the back work. The staff has done a lot work in  
17 the investigation process and the treatment  
18 centers are ready to sign off on a lot of them,  
19 so we're going to have a lot of people coming  
20 back into pharmacy pretty soon and I think  
21 that's great.

22           There is one student who is in  
23 inpatient treatment. That student was actually

1 here yesterday and will be out of treatment on  
2 the 23rd of this month and hopefully back in  
3 school. Susan has done a lot to make that  
4 process work for us. There is one student who  
5 has completed outpatient treatment, refused  
6 recommendations. This particular person we've  
7 had before the Board before and actually they  
8 are asking for an extension in order to get back  
9 into the program and school and we're working  
10 around try to see if that can -- that could  
11 happen.

12           There's one student who's relapsed and  
13 been withdrawn from school and may not be able  
14 to be returned. The staff knows about this  
15 gentleman and we're working on him as we speak.

16           There are 85 individuals in facility-  
17 driven aftercare. Facility-driven aftercare is  
18 aftercare that's strictly put on by treatment  
19 centers where individuals go for a specified  
20 amount of time, usually two years to meet once a  
21 week with other health professionals. Sometimes  
22 they're all pharmacists. Sometimes they're  
23 lumped in with physicians and dentists, nurses,

1 but they -- we do have a lot of folks in  
2 aftercare.

3           This next are just some -- a little  
4 statistic to show you how many people we  
5 actually identified -- new cases that we  
6 identified in 2014. There are 16 new cases that  
7 are -- six pharmacists, nine techs, and one  
8 student. There were 36 active cases in 2013 and  
9 in 2014 there were 52 total active cases, so we  
10 had a net gain of 16 people in 2014 and  
11 that's -- that's not too bad actually and most  
12 of those people are -- have been processed, have  
13 gotten treatment, or in the process of getting  
14 that. That's the formal part of this.

15           I did want to speak just two seconds  
16 about the mentors we have. We have a total of  
17 19 pharmacists and pharmacy techs throughout the  
18 state now who are available to mentor  
19 pharmacists and techs that get out of treatment  
20 and we try to -- except in rare cases where  
21 there's a small town and there's no one  
22 available, we have people available -- other  
23 health professionals, recovering health

1 professionals, pharmacy health professionals  
2 available to talk to new recovering pharmacists  
3 and pharmacy techs, so we're -- people call me  
4 all the time and I get them involved as quick as  
5 I can. As long as they have some recovery  
6 themselves and want to be a part of it, we're  
7 willing to take those on so that -- that's done  
8 very well.

9 I sent an email through Susan last  
10 month concerning meeting with the schools.  
11 We're going to do that the first week in  
12 February. We're going to have the meeting up  
13 here. The people from Auburn are going to come  
14 up actually to Birmingham and we'll all meet  
15 here. I don't know where we're going to meet  
16 yet, whether we meet at Samford or at the  
17 Board's office to continue the discussion around  
18 the proper protocol that Susan has kind of  
19 worked out and the Wellness committee is in  
20 agreement with about facilitating evaluations  
21 and treatments for students, so that's it.

22 My mother is okay. There's no more  
23 crises with her. Christmas went fine. She

1 opened all but two of her presents and they're  
2 in the bottom drawer for Easter. I can't tell  
3 you why they're there but that's why they're  
4 there.

5 Any questions for me this morning?

6 MR. MCCONAGHY: I'd just like to make  
7 a comment and tell you I can speak for the Board  
8 that -- Donna is new. She hasn't given me her  
9 opinion but we've been --

10 DR. GARVER: Good.

11 MR. MCCONAGHY: The Board has been  
12 real pleased with what you've done since you've  
13 taken the program over and we've been real happy  
14 with it and after speaking with some of the  
15 folks that have been through the program and  
16 were actually in the previous program, that they  
17 speak very highly of the new program.

18 DR. GARVER: Well, thank you. I do  
19 appreciate that compliment.

20 MR. MCCONAGHY: I just want you to  
21 know that we appreciate you continuing it like  
22 you have.

23 DR. GARVER: Well, thank you.

1     Somebody did it for me. I'm just trying to  
2     continue that. So that's it. I'll be in  
3     contact with you about the meeting and good to  
4     see all of you. Good luck.

5             MR. MCCONAGHY: At this time we'd like  
6     to start with Mitzi and everybody stand up and  
7     tell us who you are and who you represent.

8             MS. ELLENBURG: Mitzi Ellenburg, Board  
9     of Pharmacy.

10            MR. MOUNT: Gary Mount, director of  
11     pharmacy, Baptist South in Montgomery.

12            MS. LEOS: Cara Leos, ALSHP.

13            MR. BROWN: I'm Zac Brown. I'm a  
14     student on rotation here.

15            MR. MUSCATO: Matthew Muscato,  
16     Walgreens Pharmacy.

17            MS. KOELZ: Tammie Koelz, Walgreens  
18     Pharmacy.

19            MS. LACEY: Ronda Lacey, McWhorter  
20     School of Pharmacy.

21            MR. YARBROUGH: Dane Yarbough, Turenne  
22     PharMedCo.

23            MR. BATES: Roger Bates, Alabama

1 Pharmacy Association.

2 MS. JONES: Louise Jones, Alabama

3 Pharmacy Association.

4 MR. STEPHENS: Rick Stephens, Senior  
5 Care Pharmacy.

6 MR. EASTER: Jim Easter, Baptist  
7 Health System. In a few moments Maggie Fields,  
8 a student from Samford, will join us.

9 MR. BETHEA: Steve Bethea, University  
10 of South Alabama Medical Center.

11 MR. BURGESS: Chris Burgess, Heritage  
12 Compounding Pharmacy.

13 MS. HUNTER: Julie Hunter, Omnicare.

14 MS. RANSBURG-BROWN: Cynthia Ransburg-  
15 Brown, Sirote and Permutt.

16 MR. ADAMS: Jack Adams, Huntsville  
17 Hospital.

18 MR. LAWRENCE: Terry Lawrence, Alabama  
19 Board of Pharmacy.

20 MR. VANDERVER: Eddie Vanderver, CAPS,  
21 Incorporated.

22 MS. PIERCE: Leah Pierce, Wal-Mart  
23 Pharmacy.

1 MR. ROTH: Waldo Roth, Zoopharm.

2 MS. FIELDS: Maggie Fields with Jim  
3 Easter.

4 MR. DELK: Mark Delk, State Board of  
5 Pharmacy.

6 MR. WELLS: Glenn Wells, State Board  
7 of Pharmacy.

8 MR. MCCONAGHY: At this time we're  
9 going to need to have a motion to approve the  
10 various minutes that we've got listed on here  
11 and hopefully y'all looked at them in the  
12 Dropbox because we're not going to read all 370  
13 pages.

14 MS. YEATMAN: So moved.

15 MR. DARBY: I make a motion we approve  
16 the minutes of the November 19, 2014, Board  
17 meeting.

18 MR. BUNCH: Second.

19 MR. MCCONAGHY: All in favor?

20 MR. DARBY: Aye.

21 MR. BUNCH: Aye.

22 MS. YEATMAN: Aye.

23 MR. DARBY: I make a motion we approve

1 the December 17, 2014, interview minutes.

2 MR. BUNCH: Second.

3 MR. MCCONAGHY: All in favor?

4 MR. DARBY: Aye.

5 MS. YEATMAN: Aye.

6 MR. BUNCH: Aye.

7 MR. DARBY: And I make a motion we  
8 approve the December 17, 2014, Board meeting  
9 minutes.

10 MR. BUNCH: Second.

11 MR. MCCONAGHY: All in favor?

12 MR. BUNCH: Aye.

13 MS. YEATMAN: Aye.

14 MR. DARBY: Aye.

15 MR. MCCONAGHY: Okay. By unanimous  
16 vote, they're all approved.

17 Eddie, do you want to do the  
18 inspector's report now?

19 MR. BRADEN: Yes, sir. If you look in  
20 your Dropbox, you'll see how many inspections we  
21 had completed last -- last month but I'd like  
22 for you to look at the completed complaints for  
23 last month. That's a high number. The

1 inspectors worked really hard last month to get  
2 cases caught up for the 2014 -- the 2014 year  
3 and we're on track to do that many completed  
4 this month and we have other information to give  
5 you in executive session.

6 MR. MCCONAGHY: Any questions?

7 (No response.)

8 MR. MCCONAGHY: That was good. Susan,  
9 secretary's report.

10 DR. ALVERSON: Okay. We were  
11 primarily in the office during this past month  
12 and I say the biggest thing that happened in the  
13 office this past month was wrapping up renewals.  
14 As you referred to, Dan, all renewals other than  
15 technicians occur in even-numbered years and so  
16 all pharmacists renewed their license, plus we  
17 had 800 out-of-state businesses who were having  
18 a pharmacist apply for a new license and then  
19 renewed their license and all businesses renewed  
20 their license and I've asked Mitzi to comment on  
21 that about how the business part went. We had  
22 technicians before and pharmacists follow that  
23 but.

1 MS. ELLENBURG: Well, two of the  
2 primary problems with the pharmacies,  
3 manufacturers, et cetera, has been the slow  
4 process of the computer. GL Solutions had  
5 problems at their end. It was slow here. It  
6 was taking an exceptional amount of time just to  
7 enter one and get it approved but they seemed to  
8 have worked through that. It's picked up now.

9 The other thing that's really slowed  
10 us down this year, and Jim can attest to that,  
11 is the number of pharmacies and facilities from  
12 out of state that have had some type of  
13 disciplinary action, so they could not renew  
14 online because there was disciplinary problems.  
15 They had to send in paper applications, which  
16 slows it down anyway and then with GL Suites  
17 being slowed down, that slowed it down even  
18 further but we've caught up. We're getting  
19 hearing -- we're setting up for administrative  
20 hearings for the ones that's had disciplinary  
21 for out of state so it's better now.

22 We did the ones that had disciplinary  
23 action -- Susan had written a letter and with

1 Jim's permission, we went ahead and sent out  
2 their license so that they could still send in  
3 the State of Alabama and since they had not  
4 actually been charged, they weren't permitted --  
5 refused to ship in but we did tell them that  
6 there may be some type of administrative hearing  
7 or disciplinary action further down the line.

8 MR. WARD: One thing that will speed  
9 this up is the application, if they've been  
10 disciplined, require them to send the discipline  
11 along with their application because a lot of  
12 the holdup is they don't send it or they give  
13 their version of what happened so we have to  
14 contact them back to get a copy of it and that  
15 all takes time. So if they are required to  
16 submit copies of the discipline, it will  
17 certainly speed things up and a lot less work  
18 for every -- everybody.

19 MS. ELLENBURG: I agree.

20 DR. ALVERSON: If you could tell me  
21 after the meeting what pieces of paper  
22 specifically are the most helpful so we can put  
23 that on the form or the information.

1 MR. WARD: Okay.

2 DR. ALVERSON: Thanks, Mitzi.

3 MS. ELLENBURG: You're welcome.

4 MR. MCCONAGHY: Susan, along that  
5 line, could I just ask you a question because  
6 I've run across this a couple of times where  
7 people -- pharmacists were trying to renew their  
8 license and they had some kind of issue that was  
9 going on in another state that was going to be  
10 months before it was even addressed. Do we need  
11 to create a policy or some kind of rule to where  
12 you have a pending -- you could have a pending  
13 license that's -- because I don't think we have  
14 anything official in our rule like that but  
15 something that would allow them to go ahead and  
16 issue that license and then --

17 MS. ELLENBURG: Well, that should  
18 really revert just like the pharmacists, we go  
19 ahead and send it to them with the letter and  
20 tell them that there may be disciplinary or  
21 administrative hearing further down the line.  
22 We shouldn't hold their license because legally  
23 they haven't made any -- had any violations in

1 Alabama, so we should go ahead and renew it,  
2 send them a letter, tell them there may be  
3 something on down the line and show them active  
4 in our computer.

5 MR. MCCONAGHY: Okay. I was just  
6 thinking if we had something in wording that --  
7 where they were able to read that it's -- if  
8 they're getting a letter that says that, that  
9 we're issuing your license but it's pending --

10 MS. ELLENBURG: Yeah, they should be  
11 getting it.

12 MR. MCCONAGHY: -- submittal of the  
13 final report for other things.

14 MS. ELLENBURG: Right.

15 MR. MCCONAGHY: I didn't know if we  
16 needed to have something even on the website  
17 like that where they could go ahead and fill it  
18 out online but --

19 DR. ALVERSON: Right, and we'll talk  
20 to Lynn about that because Lynn renews all  
21 pharmacies -- pharmacists.

22 MR. MCCONAGHY: Okay.

23 DR. ALVERSON: And we'll have that put

1 in that process so it shows.

2 MR. MCCONAGHY: Okay.

3 DR. ALVERSON: All right. We are  
4 happy though that that process is over and even  
5 though we had some glitches, we did get through  
6 it and everyone was still relatively sain.

7 What I most wanted to report about is  
8 the data management system. Those of you who  
9 have been here for at least a year, so I guess  
10 everybody except Donna, has heard me mention  
11 every month, we're having a problem with the  
12 data management system and Mitzi has told you  
13 it's still going on. So we made the decision  
14 with your backing that we were going to look for  
15 another company and we've looked at a couple of  
16 companies and the company we like best is called  
17 CyberBest Technology. We've had them in.  
18 They've met with the licensing side and the  
19 enforcement side. Their CEO has been here.  
20 They have a project manager who would be  
21 handling our situation. He's met with us a  
22 number of times.

23 They have been working with the Board

1 of Nursing now for five years and that's not  
2 because it took them five years to put in the  
3 system. It's because the Board of Nursing keeps  
4 saying, well, we'd like to add another  
5 component, we'd like to add another component,  
6 so that's why it's been five years but the Board  
7 of Nursing has said nothing but wonderful things  
8 about them.

9 We also discovered that they are the  
10 company that designed a program being used by  
11 the police system. It's in -- is it all  
12 throughout the State or just --

13 MR. BRADEN: Yes, AlaCOP and LETS are  
14 systems that all the departments utilize in the  
15 State of Alabama.

16 DR. ALVERSON: And from what I've  
17 heard from our inspectors is that it's -- it's  
18 just been a great system because it allows them  
19 to pull up all the data, user-friendly. You can  
20 see everything when you stop to give a ticket or  
21 even when -- when our office searches background  
22 on somebody, they say the system is -- is just  
23 so responsive and user-friendly. So based on

1 the comments that we've gotten from other people  
2 in the State that we think we can rely on and  
3 having looked at their system, we would like to  
4 go with CyberBest.

5 We've talked to them and we've told  
6 them that but I would like your approval before  
7 we sign a contract and the contract -- a draft  
8 of a contract should be here next week. I will  
9 send it to all of you. Of course it will go  
10 through Jim and Joe's office to be sure  
11 everything is right and we're protected. Then  
12 we will have about a week to look at that  
13 contract, make any changes we want to the  
14 contract, send it back.

15 Hopefully we can come to some  
16 agreement within about three weeks from now.  
17 The price is going to be \$275,000. It would be  
18 150,000 when we sign the contract and 125  
19 when -- when they put the system in but I know  
20 that sounds like a big number but we've paid  
21 almost that much to GLS now and with GLS we owe  
22 them \$10,000 every month forever.

23 With this company, once it's in, we

1     owe them nothing.  We're done.  We own all the  
2     data and we own the program that they've built,  
3     so that's not the case with GLS.  So we could  
4     take everything, the background, the backbone  
5     of -- of what they've designed for us and take  
6     that and go to somebody else if we wanted, all  
7     right, because -- that's just the way they  
8     contract.

9             After they install it, we have a year  
10    to work out the kinks and that year is free.  If  
11    we wish to make small adjustments, that will be  
12    free.  If we decide we're going to license a new  
13    group like, you know, now we're going to be  
14    responsible for licensing, I don't know, GNC  
15    stores, all right, then that's building a new  
16    component and we would pay for that but we would  
17    pay for those components as we chose to add  
18    them, all right.  So there's no ongoing fee or  
19    payment that we have with them.

20            They would deliver the first of August  
21    of this upcoming summer all of our data -- all  
22    of our data in a system already populated, all  
23    right.  They would also have the technician

1 renewals up and running and we would have a  
2 month to practice with it because technicians  
3 renew September 1.

4           At the time they deliver the system,  
5 they will have inspections finished, so our  
6 inspectors will have all of our inspection  
7 forms. They will all be on tablets so we can do  
8 inspections from the field on a tablet, hit  
9 submit and it will go into the system, so we  
10 won't be bringing a piece of paper back and  
11 someone's got to scan it and then try to put it  
12 in the system someplace.

13           Well, Eddie, you've talked to them  
14 more than I have on that. Do you want to  
15 comment on what would be available on the  
16 tablets from the field?

17           MR. BRADEN: They showed me how they  
18 are able to do geographic location, show how  
19 many pharmacies or registrants we actually have  
20 in a certain area. We can do it by county.  
21 They can break it down into zip codes to make it  
22 easier for the guys to see what is open to need  
23 an inspection, so it looked very user-friendly

1 to me.

2 DR. ALVERSON: The inspectors would be  
3 able to pull up previous inspections while they  
4 were on site if they wanted to know what  
5 happened last time. They said even if they were  
6 in a town, they're standing on main street  
7 thinking isn't there another pharmacy on main  
8 street, they'll be able to put that in and it  
9 would say, yes, there's -- David Darby has got a  
10 store just three or four blocks down. So that  
11 would be the inspection system and they will  
12 also have, and we are very hopeful about this, a  
13 system to track all complaints.

14 So we get complaints from all  
15 variations that come in, things that are mild,  
16 things that are diversion cases, all kind -- the  
17 things that you hear on Tuesdays. They already  
18 have a system built that shows that complaint is  
19 going to step one. You can put in comments, add  
20 documents. The date is there. It shows when it  
21 goes to the next person in line, the next person  
22 in line, when it leaves to go to the lawyer's  
23 office, when it comes back, statements of

1 charges, consent orders, all of that is tracked  
2 so you can see it in a time line.

3           So we would be able to at any time  
4 say, I want a report on every case that's come  
5 in and where it is now, you know, and why has it  
6 been in that place for three months, you know.  
7 There's probably a good reason, maybe something  
8 is in court and we're waiting for a municipal  
9 court to finish but at least we would know where  
10 everything is and know how it's moving through  
11 the system and we would be able then to close  
12 the circle knowing it came in here, we went  
13 through all these steps. This is all the  
14 documentation that we've acquired and we closed  
15 it, and this is what happened, all right. And  
16 we really need that ability to be able to follow  
17 cases in that way. So that would also be  
18 delivered August 1.

19           We chose then to have technician  
20 online applications installed and pharmacy  
21 applications installed next because those are --  
22 those create a tremendous amount of work and  
23 then the rest of renewals and online

1 applications. They've said they just can't  
2 figure out why things have taken so long because  
3 basically in our system, when you set up one  
4 renewal, all the other renewals look pretty much  
5 just like that. So that's where we are.

6 MR. MCCONAGHY: There goes your  
7 budget, Buddy.

8 MR. BUNCH: Yeah. They may not want  
9 to talk about their competition but do they have  
10 any insights on GLS or why there were so many  
11 problems with them? I'm just curious.

12 DR. ALVERSON: No, they didn't. I  
13 will tell you this though, our contacts at GLS,  
14 both our technical contact is gone and the  
15 person that is supposed to be my contact for  
16 administrative things is gone.

17 We were supposed to meet originally  
18 every two weeks. I'm now going every two months  
19 before I hear from them. When I contacted them  
20 I got a vice president that we know and I was  
21 told, well, you can't start with me, you've got  
22 to drop down to the project manager to report  
23 this. The project manager will report it up

1 through the line and eventually it will come to  
2 me that you're leaving and I'll report it to the  
3 CEO.

4 So they said, we'll do everything we  
5 can to make this easy for you. We'll get your  
6 data for you. All we ask is in return is that  
7 you don't bad-mouth us to other people. If you  
8 would just say things didn't work out, so it's  
9 like a divorce but nobody's fault and we'll  
10 separate as friends so.

11 MR. MCCONAGHY: Have you got like a  
12 time line on when things would need to start  
13 with the new company?

14 DR. ALVERSON: Well, they wanted to  
15 see the data. They've already been here.  
16 They've met with everybody to begin to collect  
17 data, things like forms we use, inspection  
18 forms, letters, those kinds of things. They  
19 asked to see our data from GLS and I've asked  
20 for that and they said they're sending it,  
21 although they did send me an email saying we  
22 don't have to send you your data, just so you  
23 know.

1                   I've also asked them to stop work on  
2 any projects we're working on because that's  
3 just a waste of our time working with them and I  
4 told them that we're going to be sending a  
5 letter and I want that to go through Joe's  
6 office saying that you have not begun work on  
7 any of the eight projects we were due for this  
8 contract year. They're just finishing up  
9 projects from last contract year. So since  
10 we've had no projects in this year and since  
11 they are not going to be doing any -- working on  
12 anything for us, I feel what we pay should --  
13 should change.

14                   So I'm preparing a letter that I -- at  
15 least the backbone of a letter to go to Joe  
16 because I want to be sure it's stated in correct  
17 legal talk. You know, whether we have options  
18 to take action afterward, you know, that would  
19 be for the Board and Joe and Jim to discuss. I  
20 don't want to take any action until I get our  
21 data out though. That's my opinion but I'm not  
22 a lawyer.

23                   MR. WARD: That's right -- you're

1 absolutely right. Is it -- you know, one  
2 problem we've had this time is when you want to  
3 change a form or something in the computer  
4 like --

5 DR. ALVERSON: Yes.

6 MR. WARD: Is that going to be  
7 better -- is that something this company knows  
8 about? So like if you want something changed,  
9 you can go ahead and get it changed without a  
10 six-month delay?

11 DR. ALVERSON: Of course they've  
12 promised us that, that they would be available.  
13 They said any, you know, small change, you just  
14 call, we fix it. There's no charge, no  
15 question.

16 MR. DARBY: Is there a way we can  
17 define what a small change is?

18 DR. ALVERSON: Sure. We ought to put  
19 in the contract anything that we -- I mean,  
20 we've had so much experience with things going  
21 wrong, we ought to be able to define that.

22 MR. DARBY: Yeah. Also, if there  
23 is -- can we put in the contract when we do a

1 major change and they're going to charge us for  
2 it what the rate of the fee would be for the  
3 major changes.

4 DR. ALVERSON: Right. They told us  
5 what a project manager or a technical person  
6 gets paid per hour and that would be the hourly  
7 rate that we pay.

8 MR. DARBY: Okay.

9 DR. ALVERSON: And we can put that in  
10 the contract, although people's salary can  
11 change.

12 MR. DARBY: Yeah.

13 MS. YEATMAN: Is there a way with this  
14 new system that they'll, you know, have  
15 complaints and we'll be able to go in and track  
16 a certain individual to see how many complaints  
17 have been logged against a particular  
18 pharmacist, technician?

19 DR. ALVERSON: I'm quite sure we'll be  
20 able to but we need to -- that's the kind of  
21 thing they're asking us to spell out now because  
22 they're saying if you don't ask for it now,  
23 you're not going to get it and then we have to

1 adapt the system later. So I'll make a note of  
2 that, that we would be able to, although that --  
3 the system, and as I understand, if it's by a  
4 pharm -- a business or a person, when it gets  
5 entered in, it also puts a note in their file,  
6 so the systems cross. All the data, the court  
7 data, documentation, all of that doesn't  
8 transfer to their licensing file but the fact  
9 that they --

10 MS. YEATMAN: That they've had some  
11 type of sanction.

12 DR. ALVERSON: -- been there, right,  
13 would be in their licensing file.

14 MS. YEATMAN: Okay.

15 MR. MCCONAGHY: I guess on time line  
16 what I was wondering was I'm the only one that  
17 was around back when GLS was contracted and  
18 never did have a good feeling about them but is  
19 there some way that we could set up where they  
20 could meet with the Board, some of these folks,  
21 and give their sales pitch to the Board just to  
22 say we did the due diligence on this one where  
23 we didn't on the last?

1 DR. ALVERSON: Yes, and I asked them  
2 and they said, yes, we'll be there, so I can  
3 have them for next month. I just didn't -- I  
4 wasn't sure that's what you wanted but yes, I'll  
5 have the CEO here and the person we're working  
6 with for you next month.

7 MR. BUNCH: And their place or their  
8 hub is Atlanta; is that right?

9 DR. ALVERSON: Right, the person we're  
10 working with is from Atlanta. They're housed in  
11 Florida.

12 MR. MCCONAGHY: So you wouldn't need  
13 any kind of motion today, we can wait until next  
14 month to do that or I think you got the approval  
15 to move forward on it already --

16 DR. ALVERSON: Right.

17 MR. MCCONAGHY: -- as far as a motion.

18 DR. ALVERSON: In terms of signing the  
19 contract, we'd like to --

20 MR. MCCONAGHY: Like to talk to them  
21 first.

22 DR. ALVERSON: Right. So when I send  
23 you the first draft of the contract, please feel

1 free to add whatever you want because we'll be  
2 better off with six or eight people looking at  
3 it than just one person. I would say this,  
4 bragging a little bit, I had an email from them  
5 yesterday saying we have never worked with a  
6 company that everybody speaks up, everybody  
7 tells us information, and people have gotten  
8 data to us so fast, this has been kind of a  
9 remarkable experience for us so -- and that may  
10 be part of the sales pitch but it never hurts to  
11 brag. That's what I have to say.

12 Oh, I'm meeting -- I have to think  
13 what day of the week it is. I'm meeting  
14 tomorrow with the Medical Board and the State  
15 Department -- State Health Department about  
16 pellets and this is what I propose to recommend  
17 and I'll take your advice.

18 I've read a lot about implantable  
19 hormone pellets and you know, whether they're of  
20 any value whatsoever, I'm not going to comment  
21 on that. A lot of literature says that they are  
22 not but what I have found is that the only way  
23 you can sterilize those pellets is by radiation.

1 We don't have a single pharmacy making pellets  
2 in Alabama that's using radiation to sterilize  
3 the pellets.

4           They're using an autoclave and as you  
5 well know, autoclaves work on pressurized steam,  
6 so unless water is inside what you're  
7 sterilizing, you don't sterilize it, so it turns  
8 out that the pellet itself would have to be  
9 ten-percent water before you could sterilize it  
10 in an autoclave. Well, there's no water in  
11 those pellets whatsoever. They're the powder,  
12 usually stearic acid, which is -- if I remember  
13 from pharmacy school kind of waxy substance I  
14 think and the other ingredients are also kind of  
15 fatty, all right.

16           So even PCCA refuses to recommend how  
17 to compound pellets because they've taken the  
18 position that you can't sterilize a pellet  
19 unless you do it by radiation, so I feel I'm on  
20 good ground making that statement. I've read  
21 the cases that have come before the Medical  
22 Board here. The Board in Tennessee also had a  
23 number of cases of patients with complaints and

1 they all relate to the release rate on the  
2 pellets.

3           So there's an issue of how much  
4 pressure you apply when you actually create that  
5 pellet, and of course, we have no standardized  
6 way of doing that. It depends on what  
7 ingredients you put in. There are all kinds of  
8 factors that affect how that drug is released  
9 from that pellet, so I would like to put a  
10 requirement in that you can't compound pellets  
11 in Alabama or ship pellets into Alabama unless  
12 you have at a minimal animal studies to show  
13 release processes. I'd prefer human studies to  
14 show that in humans these things actually  
15 release at a constant rate over a three-month  
16 period, which is what's being claimed, but  
17 that's not what's happening. People are just  
18 making them and figuring it ought to work.

19           MR. WARD: What does the FDA say about  
20 that?

21           DR. ALVERSON: I actually have a call  
22 in to the FDA. I also have a call in to there's  
23 one manufacturer in the United States that does

1 make testosterone pellets and so I have called  
2 them to ask them what requirement they had to  
3 meet for the FDA to prove release rate or the  
4 kinetics of pellets, but I think if a company  
5 hasn't looked at that, if they have no idea what  
6 the release rate is, we're putting patients at  
7 risk, so that's my feeling. If you suggest  
8 something else, I -- I would like to know.  
9 That's just my take on it.

10 MR. DARBY: I agree with you in  
11 principal. The danger I think is that --  
12 because you're not talking about -- you're  
13 talking about compounding pharmacies not  
14 outsourcing facilities or manufacturers, you're  
15 talking about compounding pharmacies making  
16 these?

17 DR. ALVERSON: I'm talking about  
18 compounding pharmacies and I'd also like  
19 outsourcing facilities.

20 MR. DARBY: Yeah, I think the danger  
21 you run into -- are you going to make those  
22 requirements on other compounded products, you  
23 know? Are you going to require them to have

1 animal testing or human testing be your --

2 DR. ALVERSON: Right.

3 MR. DARBY: -- or are you treating  
4 everybody the same?

5 DR. ALVERSON: My thinking has been  
6 that we don't have anything else that I'm aware  
7 of that's supposed to have a three-month release  
8 rate and where you're giving a patient three  
9 months' worth of drug at one time.

10 MR. DARBY: So your requirement could  
11 be any product that's going to be released over  
12 a 30-day period -- a greater than a 30-day  
13 period.

14 MR. WARD: See what the FDA says  
15 first.

16 MR. DARBY: Yeah. As far as the --

17 MS. YEATMAN: What their statutes  
18 are.

19 MR. WARD: Yeah, what they say about  
20 it. I mean, I think you're right but don't you  
21 want to see what the FDA says.

22 DR. ALVERSON: Well, they -- they have  
23 taken the stance, of course, just by what --

1 what they require now that you have to be able  
2 to prove release rate before you can have a  
3 product approved.

4 MR. MCCONAGHY: I think we've got  
5 somebody in the audience that's had some  
6 experience with that if you'd like their input.

7 DR. ALVERSON: From Chris?

8 MR. MCCONAGHY: Yeah.

9 MR. BURGESS: Chris Burgess, Heritage  
10 Compounding Pharmacy. We did look into the  
11 pellets. I actually have a pellet press at the  
12 pharmacy. So our concern with the pellets was  
13 the fact -- was the sterility issue.

14 Once we got to the point where we  
15 determined gamma radiation was going to be the  
16 only way I felt comfortable with the sterility  
17 of these products, we stopped it. Gamma  
18 radiation at that -- and coming from a nuclear  
19 pharmacy, I do have some experience with that,  
20 not the actual gamma radiation sterility but  
21 radioactivity. But we looked into it and it was  
22 a cost issue. It was -- for the number of  
23 customers that we had, we were just not going to

1 be able to justify spending the money on the  
2 equipment to sterilize the products.

3 Now, the hardness issue, I think if --  
4 I completely agree with what Susan's talking  
5 about. The release rate, if we stick to just  
6 the fact that we say pellets, we want to make  
7 sure that we have this information on this  
8 delivery device, the pellets, I think we're  
9 safe. It still allows us in the compounding  
10 world to do stuff and practice as we -- as we  
11 currently are practicing but I'm also with  
12 Susan, I'm very concerned with pellets industry  
13 that has popped up, not just in this state but  
14 in the United States, and I think this is a very  
15 good move by the Board.

16 MS. YEATMAN: I get the -- having to  
17 hold everybody to the same level with the 30  
18 days, 90 days whatever release rate. My bigger  
19 concern is the sterility of it regardless. If  
20 you're looking at, you know, laminar flow hoods,  
21 you're not allowing individuals to make  
22 compounds without laminar flow hoods. If the  
23 only way to sterilize a pellet is to use

1 radiation, then could we not as a board say, you  
2 can't make pellets, you can't ship pellets in  
3 the State of Alabama unless you can show that  
4 you're using radiation to sterilize the product.  
5 And then we can address -- if it becomes an  
6 issue with, you know, how it's released over a  
7 longer period but my bigger concern starting out  
8 is what are we offering to the public that's not  
9 a sterile product.

10 DR. ALVERSON: I know there's  
11 another -- other questions but --

12 MR. BURGESS: Well, there's also  
13 information -- a little information on using dry  
14 heat sterilization. I haven't seen any testing  
15 on that, so just over the last couple of years,  
16 and granted I looked at pellets probably four  
17 years ago but some pharmacies have -- I've heard  
18 through the grapevine trying dry heat  
19 sterilization. I just haven't seen any reports  
20 on it or any studies on it, so there may be  
21 other, you know, ways of getting these pellets  
22 sterilized. And then after that, they would --  
23 you'd want to make sure that they -- they work

1 and we would need to -- you would want to see  
2 some testing, some studies proving that these  
3 devices release the drug the way they say  
4 they -- or sold as basically.

5 MR. BETHEA: Steve Bethea, USA Medical  
6 Center. I would urge the Board as they consider  
7 rules for the pellets to consider defining  
8 carefully what we consider a pellet to be. Are  
9 they from the manufacturer called pellets? We  
10 mix things up on chemotherapy LCDs for hepatic  
11 chemo embolization with other things mixed in it  
12 and they're going to be released over long  
13 periods of time.

14 We put antibiotics in bone cement when  
15 we replace joints. There are a lot of things we  
16 mix with extended releases that are going to  
17 vary from patient to patient and concentration  
18 to concentration and procedure to procedure, so  
19 we don't want to write ourselves out of therapy  
20 with other things that we mix up.

21 DR. ALVERSON: That's a great comment.  
22 I think the Medical Board only wanted to address  
23 hormone pellets. The cases that -- that

1 we've -- that I've read, and some of them are  
2 horrific, have all related to release rate  
3 where -- and frequently they put in -- I've seen  
4 up to ten pellets at one time they implant and  
5 if you get them from someplace that releases  
6 quickly, that's a year's worth of hormone that's  
7 going to be released in a very short period of  
8 time, you know, and they've seen precancerous  
9 growths in women, really excessive bleeding,  
10 tissue damage, all the things that happen with  
11 your hormones being out of sync, you know, mild  
12 as it is hair loss, you know, those kinds of  
13 things.

14 MR. MCCONAGHY: All right. Yeah, I  
15 think it would be pretty easy to regulate  
16 whether they're sterilized or not but it would  
17 be a whole another issue for that so we may need  
18 to separate the duration of the therapy from the  
19 sterility issue but.

20 MS. YEATMAN: It could be two separate  
21 things but I -- I mean, I would think if you're  
22 a reputable company, you should be able to show  
23 that what you're saying you are providing to the

1 public is actually what you're providing. So if  
2 we're going to ask them to show evidence that it  
3 takes 90 days for this hormone to be released,  
4 if they can't show that, that's not something I  
5 want to dispense.

6 DR. ALVERSON: Well, we just shut down  
7 a pharmacy in northern Alabama that was getting  
8 pellets from a 503B facility in another state  
9 and they had zero documentation. Now, they were  
10 radiating the pellets.

11 MS. YEATMAN: See, that's two  
12 different issues.

13 DR. ALVERSON: Right.

14 MR. DARBY: Had the FDA inspected the  
15 out-of-state facility yet?

16 DR. ALVERSON: Yes.

17 MR. MCCONAGHY: Donna, on that I think  
18 about my old inspector was A. C. McDonald and  
19 one of his things was -- his quotes was, "We  
20 don't make all these rules for the reputable  
21 people."

22 MS. YEATMAN: Right. If everybody did  
23 their job it wouldn't happen.

1 MR. MCCONAGHY: Is that it, Susan?

2 DR. ALVERSON: That's it.

3 MR. MCCONAGHY: Jim, have you got an  
4 attorney's report?

5 MR. WARD: No, sir, just --

6 MR. MCCONAGHY: Thank you.

7 MR. WARD: -- just executive  
8 session.

9 MR. MCCONAGHY: We'll move into old  
10 business. Number one item on there is for  
11 nonresident pharmacies and I'm not sure who's  
12 going to present that but if you would, when you  
13 do, give a little background about why we're  
14 doing the nonresident pharmacy thing.

15 DR. ALVERSON: All right. At first I  
16 thought those were my initials but that's before  
17 I got married so.

18 I would mostly like to thank the Board  
19 for allowing us to do the distance interviewing.  
20 I can't tell you what a difference that made in  
21 workload in our office and I think we -- we  
22 provided the same service to people who were  
23 going to be getting licensed here but using

1 that -- that system of doing it through distance  
2 communication and being live and every one of  
3 the Board members participated to make it  
4 possible and so I'd really like to thank you for  
5 that.

6 We were not able to get a printout  
7 from our data company of how many nonresident  
8 pharmacies renewed but -- and we have tried.  
9 It's a bunch. That's the best I can do for you.  
10 So that's finished but as you mentioned, we have  
11 been really shocked by the number of pharmacies  
12 and pharmacists who had disciplinary issues in  
13 the past and have had to come before the Board.

14 Okay. The UAB Medicine is my comment  
15 too. Do you want me to mention that?

16 MR. MCCONAGHY: Uh-huh.

17 DR. ALVERSON: I think I have an  
18 answer to this but I believe the Board wanted to  
19 support our law in not allowing for the practice  
20 of Internet medicine when they never see a  
21 practitioner on screen or through any other  
22 means. I just want to be sure when pharmacists  
23 call and say, can I fill this prescription,

1     what -- what the Board's stance was and I'm not  
2     necessarily asking for a vote. I just want to  
3     be sure it's fine when our staff tells people we  
4     don't support prescriptions that have come  
5     through filling out questionnaires and there's  
6     been no human contact whatsoever.

7                   MR. BUNCH: I guess if they know it  
8     came that way then they should not fill a  
9     prescription but the problem is them knowing  
10    that, I guess, so if you don't --

11                   DR. ALVERSON: They don't always know.  
12    Sometimes they do know and those are the ones  
13    that have called our office to say, what do I  
14    do. I just want to be sure we're doing what the  
15    Board wants to say we don't see it as a valid  
16    prescription.

17                   MR. BUNCH: I think that's our  
18    stance.

19                   DR. ALVERSON: And we have no  
20    intention of going out and trying to take  
21    pharmacists to task for that. We understand  
22    they're in a difficult situation.

23                   MR. MCCONAGHY: Yeah, and I think our

1     wording should just be that you shouldn't  
2     knowingly fill a prescription that's an Internet  
3     based and leave it at that.

4             DR. ALVERSON:   Okay.   That solves my  
5     problem.

6             MR. BUNCH:     Yeah.

7             MR. MCCONAGHY:   And I don't know if it  
8     would be you or Mitzi, tell us where the -- the  
9     rule that we started last week about the boxes,  
10    how far are we on that and what's the -- how  
11    long is that going to take to --

12            DR. ALVERSON:   On the emergency  
13    boxes.

14            MR. MCCONAGHY:   Nursing home.

15            MS. ELLENBURG:   The publishing date  
16    for the Legislative Reference Monthly magazine  
17    will be the end of the month so I'll get it in  
18    there for the end of the month.   You have to  
19    have a hearing, of course, within 35 days so  
20    that will be set for February and then the  
21    process starts.   You have to give them 35 days  
22    comments and so forth, but it will be mailed  
23    this month, published in the journal this month.

1 There will be an administrative hearing in  
2 February.

3 MR. MCCONAGHY: So before it will  
4 actually be active, it will be --

5 MS. ELLENBURG: It has to be public.

6 MR. MCCONAGHY: -- after we meet in  
7 March?

8 MS. ELLENBURG: No, because you have  
9 to give them -- it has to be 35 days for public  
10 comments. Then you have to go in and the Board  
11 has to vote after the comment period time to  
12 accept any comments or reject any comments and  
13 then it has -- it will be published and it's  
14 effective 35 days from that. So you're talking  
15 about at least three or four months.

16 MS. YEATMAN: Susan, have you had any  
17 conversation with the Board of Medical Examiners  
18 about this e-medicine?

19 DR. ALVERSON: Yes, I have.

20 MS. YEATMAN: Are they supportive of  
21 it or what is their --

22 DR. ALVERSON: Well, they have a  
23 similar law. Do you want to finish this

1 emergency box discussion?

2 MR. MCCONAGHY: Well, I think -- well,  
3 I mean, I just want to --

4 MS. YEATMAN: Sorry.

5 MR. MCCONAGHY: Time line wise, I  
6 think that pretty well sums it up if we're  
7 probably talking April.

8 MS. ELLENBURG: I would say April,  
9 yes, sir.

10 DR. ALVERSON: Yes, we did discuss it  
11 with -- that was the first place we went. They  
12 have a similar law but they felt that they had  
13 told UAB that they could do this as a research  
14 project way back and they didn't want to go back  
15 on their word. So they still support the same  
16 position that we do but they saw this as an  
17 exemption.

18 MS. YEATMAN: So in their mind it's a  
19 research project?

20 DR. ALVERSON: It's a research  
21 project.

22 MR. MCCONAGHY: All right. If that's  
23 all on the old business, we'll move into new

1 business. The number one item on there is  
2 background checks on the applications for the  
3 technicians and I think we're right back to  
4 Susan again on that one.

5 DR. ALVERSON: I'm sorry. We  
6 discussed this before but if we're going to  
7 build a new computer system, we'll have to have  
8 a way to build this in. We would like to move  
9 forward with getting background checks on  
10 technicians before they're licensed. A large  
11 number of states have already moved to that. Of  
12 course that means there will be more hearings.  
13 If you feel that information will be helpful for  
14 you --

15 MS. YEATMAN: Yeah.

16 MR. BUNCH: I think it's way behind --  
17 way past due.

18 MR. WARD: How much does it cost?

19 DR. ALVERSON: Nothing, because when  
20 you apply online it says that your application  
21 won't be processed until we receive your  
22 background check. This is where you go online  
23 to do your background check and in that filling

1 it out, it says use a credit card and pay  
2 usually \$35.

3 MR. DARBY: The cost will be passed on  
4 to the applicant.

5 MS. YEATMAN: Yeah, the technician.

6 MR. MCCONAGHY: Yeah, part of their  
7 application fee.

8 MR. DARBY: Yeah, I have no problem  
9 with doing background checks on technicians.  
10 Why would you not do it on everybody?

11 DR. ALVERSON: All pharmacists have a  
12 background check before they start pharmacy  
13 school. Now, if you would like to do it before  
14 they get a pharmacy license, we can do that too.  
15 What you would catch is what they did in  
16 pharmacy school.

17 MR. MCCONAGHY: I just know what --  
18 applying to some other states and recently  
19 Tennessee, they require it of a pharmacist  
20 that's reciprocating.

21 DR. ALVERSON: All right. We can  
22 easily do that.

23 MS. YEATMAN: Why would we not want to

1 do it?

2 MR. BUNCH: Are we saying a background  
3 check?

4 MS. YEATMAN: She's saying that we  
5 won't process it until we receive it.

6 MR. BUNCH: Are we saying a background  
7 check on pharmacists -- new pharmacists or  
8 renewal pharmacists?

9 DR. ALVERSON: I don't think we'd want  
10 to do it every renewal. That would be every two  
11 years.

12 MR. BUNCH: Things happen within two  
13 years.

14 DR. ALVERSON: Right.

15 MS. YEATMAN: New application and  
16 reciprocity.

17 MR. WARD: Who's doing the background  
18 check?

19 DR. ALVERSON: There are a number of  
20 companies that do that. There's one company  
21 nationally that does it for pharmacy schools.  
22 They have the national contract and they also  
23 have the national contract for medical school

1 applications.

2 MR. WARD: And they -- what are they  
3 backgrounding?

4 MR. DARBY: What are they checking?

5 MR. WARD: What are they checking?

6 DR. ALVERSON: They do state, cities,  
7 counties, federal.

8 MR. DARBY: Are they checking arrests  
9 or bankruptcies?

10 MR. WARD: Do they have credit? Do  
11 they use credit, criminal history, employment,  
12 whatever?

13 MR. BRADEN: It's criminal history.

14 MR. WARD: It's criminal history.

15 MR. BRADEN: Right.

16 DR. ALVERSON: I think they do  
17 abuse -- child abuse records. That's a --

18 MR. WARD: Well, you know, for Alabama  
19 folks we could get all of that except for the  
20 city. It's all online now. That's what I do.

21 MR. BRADEN: But that's one of the  
22 situations, the city --

23 MR. WARD: The city is the problem.

1 MR. BRADEN: You can't get that.

2 MR. WARD: Right, I agree.

3 MR. BUNCH: I think without a doubt  
4 background checks on technicians and as far as  
5 pharmacists go.

6 DR. ALVERSON: If you want to discuss  
7 that, the pharmacy part, and how --

8 MR. WARD: I think the reciprocity you  
9 have --

10 MS. ELLENBURG: At what point does the  
11 pharmacy school do a background check, when they  
12 first start school?

13 DR. ALVERSON: When they apply.

14 MS. ELLENBURG: So it would be five  
15 years before they came to us basically?

16 DR. ALVERSON: Four years. Samford  
17 has been doing it for a while. Auburn has  
18 implemented, I believe.

19 MS. ELLENBURG: Well, I mean, you  
20 could still do it on new pharmacists because  
21 anything can happen in four years.

22 MR. WARD: I think it's a good idea.  
23 I just wanted to see what it is.

1 MR. DARBY: Before you sign off on  
2 it.

3 MS. YEATMAN: We should --

4 MR. BUNCH: Why don't we --

5 MR. DARBY: I think we can see what's  
6 available out there.

7 MS. YEATMAN: We have a contract with  
8 whoever, so why don't we pursue it, talk to the  
9 company that's doing it from the pharmacy  
10 schools.

11 DR. ALVERSON: Would you like a  
12 presentation from a company?

13 MR. DARBY: Yes.

14 DR. ALVERSON: Yes.

15 MR. WARD: Susan, for example, credit  
16 may be important because if someone who is broke  
17 could be stealing medicine and sell it, you  
18 know, so we may want it to be broader than just  
19 criminal.

20 MR. DARBY: I would -- I would check  
21 with other states and see what -- if they do  
22 background checks and, one, see what they check  
23 for.

1 DR. ALVERSON: Right.

2 MR. DARBY: If it's criminal and  
3 financial and then two, find out what rate of  
4 people that come up with dings on their record  
5 because, you know, you check -- I think  
6 Mississippi requires background checks and you  
7 know, you might find out that, you know, one  
8 percent and then you question, well, is it worth  
9 it. But if it's ten percent, it would certainly  
10 be worth it.

11 MR. WARD: People have garnishments  
12 and stuff you might want to know.

13 MR. DARBY: Yeah.

14 DR. ALVERSON: I can tell you about  
15 five years of experience at Samford with people  
16 who have been accepted because you don't have  
17 everybody do it, just those that you've  
18 accepted, and I'd say we would average maybe one  
19 a year that we would have to get a ruling from  
20 the Board, will you provide an intern/extern  
21 license for this person.

22 MR. MCCONAGHY: Well, it sounds like  
23 we're going to have to -- if we're going to do

1 this, we'll have to have a new rule about it and  
2 the -- I would suggest that -- or make a motion  
3 that we put Donna in charge of the Board side of  
4 coming up with some wording and some policy on  
5 that.

6 MS. YEATMAN: It's great being new.

7 MR. MCCONAGHY: Are you going to  
8 second that, David?

9 MR. DARBY: I'll second that.

10 MS. YEATMAN: Good. I got the  
11 wording. Jim just gave it to me. I'm done.  
12 Look how quick and efficient I am.

13 MR. WARD: You've got it in  
14 680-2-.14.

15 MR. MCCONAGHY: I think there's a  
16 total consensus on that's a good idea, so let's  
17 move on to --

18 DR. ALVERSON: Number two.

19 MR. MCCONAGHY: -- number two.

20 DR. ALVERSON: Right now we have a  
21 verification page which boards of pharmacy  
22 really -- most boards of pharmacy have something  
23 on their website with the verification page, so

1 if you're going to hire somebody or usually it's  
2 a hiring situation, you could pull up that name  
3 on the website and it will tell you if they  
4 have -- they're in good standing, whether  
5 they're on probation, or if they have a --  
6 something in their history and then you can dig  
7 deeper.

8 Right now, this is going to come as a  
9 shock to you but GLS has screwed it up. So we  
10 have people who are on probation that the system  
11 has shown in good standing. I'm not aware that  
12 they've said something is wrong with anybody  
13 that isn't but I would be in favor of taking  
14 down our verification until we know the system  
15 is correct.

16 There are some major insurance  
17 companies now that refuse to have a contract  
18 with a store or with a pharmacist who has  
19 anything on their record, and you know, we've  
20 had to answer some of those questions and write  
21 letters to get people who have the right to have  
22 a contract give them that right and clear up  
23 situations because our database was screwed up.

1                   MR. DARBY: Yeah, I think you need to  
2 take that down immediately.

3                   MS. YEATMAN: Yeah, now, if  
4 information is bad.

5                   MR. MCCONAGHY: You don't need a  
6 motion for that.

7                   DR. ALVERSON: No, I don't. I want  
8 just want to be sure we --

9                   MR. MCCONAGHY: We've got -- would you  
10 mind taking one question on that?

11                   DR. ALVERSON: No, I'm sorry.

12                   MR. BETHEA: Real quick, Steve Bethea,  
13 University of South Alabama. My employer  
14 requires me to verify my pharmacists that we  
15 register when they do -- when I go to the  
16 website to print that off, I will now have to  
17 call the Board probably.

18                   DR. ALVERSON: I'm sorry. That means  
19 we will have to answer the phone.

20                   MR. BETHEA: Can I just email you a  
21 list of my people and they can email me back?

22                   DR. ALVERSON: Yes.

23                   MR. BETHEA: Thank you.

1 DR. ALVERSON: And I'm sorry because I  
2 know this is going to be hard on everybody but I  
3 just feel -- I mean, we've had situations that  
4 people have gotten hurt and I'd rather we do the  
5 work than have somebody's career hurt.

6 MR. BETHEA: Okay, thank you.

7 MR. DARBY: Yeah.

8 DR. ALVERSON: We'll have to look at  
9 CE for pharmacists. Do you want to stick with  
10 the five-percent audit or do you want me to ask  
11 you this question later on when I have a  
12 printout from NABP and I can tell what you  
13 proportion of pharmacists in Alabama supposedly  
14 didn't get their CE.

15 MR. MCCONAGHY: I think it's in our  
16 rule right now that it's five percent --

17 DR. ALVERSON: Five percent.

18 MR. MCCONAGHY: -- so unless we're  
19 going to change the rule, we'll need to stick  
20 with it.

21 MR. DARBY: I don't think there's a  
22 specific number. It's just random. I don't  
23 think there's a -- I was reading the rule a

1 minute ago. I don't think there's a specific  
2 number, is there?

3 MS. ELLENBURG: No.

4 MR. DARBY: No.

5 DR. ALVERSON: All right. We'll stick  
6 with that.

7 MS. LACEY: Susan, will NABP just give  
8 you a list of -- Ronda Lacey, McWhorter School  
9 of Pharmacy.

10 Will NABP just give you a printout of  
11 the individuals who were -- of the hours they've  
12 completed and that way you would just only be  
13 looking at the people who didn't get their CEs?

14 DR. ALVERSON: What we received when  
15 we did it with the technicians was a printout of  
16 hours but we had no way of knowing if they're  
17 live or they're not live, so what we got from  
18 NABP with the technicians we felt was unusable  
19 so we did a random sample of everybody.

20 If the data is better and it's usable,  
21 you know, then I would think we could get them  
22 from people who we know didn't get their  
23 hours --

1 MS. LACEY: Thank you.

2 DR. ALVERSON: -- which if that's  
3 agreeable with the Board.

4 MR. BUNCH: I thought, you know, when  
5 they were starting the new numbering that was  
6 going to take care of all of the random checks  
7 and all. I mean, you've either got it or you  
8 don't but what you're saying is that we don't  
9 know if it's live or not live.

10 MS. YEATMAN: We know how many hours  
11 they got.

12 DR. ALVERSON: We knew how many hours,  
13 right.

14 MS. YEATMAN: We don't know if they  
15 filled all the other requirements.

16 DR. ALVERSON: Right.

17 MR. BUNCH: So they know that's a  
18 problem and there's a fix to that you think?

19 MS. ELLENBURG: Well, the problem was  
20 with the technicians. Last year you could not  
21 even go online with their NABP number and pull  
22 them up. There was absolutely no data.

23 But the pharmacists there was data, so it was

1 the technicians was the issue.

2 MR. BUNCH: So is that in the works to  
3 be fixed?

4 MS. ELLENBURG: It should have been  
5 corrected through them, yes, sir.

6 MR. BUNCH: That's an ideal system if  
7 you've got their NABP number, you've either got  
8 it or you don't.

9 MS. ELLENBURG: Right.

10 MR. BUNCH: You don't have to guess  
11 who --

12 MS. ELLENBURG: Well, somehow there  
13 was a glitch and NABP wasn't capturing the tech  
14 CE.

15 MR. BUNCH: Have they got GLS there?

16 MR. WARD: How many pharmacists are  
17 there, Susan?

18 DR. ALVERSON: Between 7,000 and 8,000  
19 pharmacists.

20 MR. WARD: Five percent would be like  
21 350 to 400.

22 DR. ALVERSON: Four hundred, right.

23 MR. WARD: That's an awful lot of

1 work.

2 MR. MCCONAGHY: Louise, did that  
3 answer your question?

4 MS. JONES: Yes, thank you. I guess  
5 I'm surprised because I wasn't aware. We've  
6 been told as an ACPE accredited provider who's  
7 required to report to the system beginning  
8 January '13 that the reason we were doing this  
9 was so that state boards of pharmacy would be  
10 able to know automatically every pharmacist and  
11 every technician who were not meeting  
12 requirements. So if it's not functioning in a  
13 format that allows you to be able to determine  
14 that, I would be interested in knowing if once  
15 you get this next set if it's still doing that  
16 because we can certainly work with them as an  
17 ACPE accredited reporting provider and let them  
18 know our frustrations with that because it's a  
19 waste of our time if it's not working that  
20 way.

21 DR. ALVERSON: Part of the disconnect  
22 is you said you're working with ACPE but NABP is  
23 running the show.

1 MS. JONES: Right, right.

2 DR. ALVERSON: So ACPE can say yes,  
3 it's supposed to be that way but they -- the  
4 data goes to NABP and it's what NABP does with  
5 it that's the issue.

6 MS. JONES: And as a state board, I  
7 would assume y'all are going to have a lot more  
8 power petitioning them to have the system report  
9 the way you want it than an ACPE provider would,  
10 so I certainly encourage you to flex your muscle  
11 on that one because that's ridiculous.

12 DR. ALVERSON: We agree.

13 We ran into something in the state  
14 that we weren't expecting and Cristal is going  
15 to do a report for you and ask you for your  
16 advice on nonpharmacy dispensing sites.

17 MS. ANDERSON: Yes, recently I had an  
18 inquiry that was received by a pharmacist here  
19 in Alabama. He was questioning the nonpharmacy  
20 dispensing sites and basically whose regulation,  
21 whose protocol they fall under.

22 I thought there might be a simple  
23 answer but after looking into it, I see where

1 nonpharmacy dispensing sites, they have no  
2 regulation by federal agencies and minimal by  
3 two states. A nonpharmacy dispensing site is a  
4 site other than a pharmacy that dispenses  
5 medicinal preparations under the supervision of  
6 a physician to patients for self-administration.  
7 Usually this is physician offices, ERs, urgent  
8 care centers, rural health facilities.

9           There's only seven that are registered  
10 NPI sites in Alabama. I partnered with  
11 Investigator Glenn Wells and we actually went  
12 out to the site that the pharmacist was asking  
13 us about, which is the Mohawk Healthy Life  
14 Center in Roanoke, Alabama. We didn't really  
15 have jurisdiction but they did let us come in  
16 and see their -- their facility and it actually  
17 was the best case scenario on that one, but  
18 being that there's so little, if any,  
19 legislation, we're a little bit concerned as far  
20 as who's regulating these people.

21           MR. WARD: Well, here's the problem.  
22 The Pharmacy Practice Act, and every time the  
23 Board tries to amend it, the medical association

1 makes sure that they stick a clause in that it  
2 does not apply to doctors. So if it's under the  
3 auspices of the authority of a physician, it's  
4 not silent in our law. There is a prohibition  
5 that the Act -- the Pharmacy Practice Act does  
6 not apply so all the things you would like for  
7 them to do as a pharmacy, you can't.

8 MS. ANDERSON: Which I did speak with  
9 someone at the Board of Medical Examiners and  
10 they said that they monitored the physician --  
11 the dispensing physician but they --

12 MR. WARD: If it's controlled drugs  
13 they do.

14 MS. ANDERSON: Yeah, but they don't  
15 monitor the facility.

16 MR. WARD: Yeah.

17 MS. ANDERSON: There's no standards of  
18 practice. They're only registered with an NPI  
19 and NCPDP, which is the National Council for  
20 Prescription Drug Programs, and so I'm a little  
21 concerned about that but like I said, we did  
22 find the actual means they were using in Roanoke  
23 and it seemed pretty good. I just wanted to

1 show you a demonstration of it.

2 DR. ALVERSON: The physicians aren't  
3 always there either and this one is dispensing  
4 samples.

5 MS. ANDERSON: And this is how they're  
6 marketing it to physicians as well.

7  
8 (The following is transcription of the video.)

9 Welcome to MedStart Connect, an  
10 integrated medication management program  
11 designed to help providers improve medication  
12 adherence and increase patient satisfaction.  
13 MedStart Connect is a complete program that  
14 begins at the point of care and benefits  
15 patients for as long as they continue therapy.

16 Patients start the program by  
17 receiving a free 30-day sample of their  
18 medication during their visit with the doctor.  
19 MedStart Connect also includes patient outreach  
20 and one-on-one phone support so patients can ask  
21 questions about their medication and receive  
22 adherence counseling.

23 The program provides an optional

1 MedStart Connect home delivery service that  
2 offers patients free shipping, low prices on  
3 generics, and 90-day refills of their  
4 medication, ideal for patients who have a high  
5 deductible health plan, have difficulty getting  
6 to the pharmacy, or who pay out of pocket for  
7 their prescriptions.

8           At the heart of MedStart Connect is  
9 the MedStart cabinet, which allows you to  
10 provide free 30-day samples of generic, brand,  
11 and over-the-counter medications to your  
12 patients. Centrally located in the patient care  
13 area, the MedStart cabinet can be used by any  
14 licensed health care provider. The MedStart  
15 cabinet provides controlled access and  
16 automatically manages sample inventory.

17           Providing patients with a sample of  
18 their medication is easy. First, the physician  
19 logs into the MedStart cabinet. If the cabinet  
20 is interfaced with an EMR or practice management  
21 system, the physician then chooses the patient's  
22 name from the list. If the cabinet is not  
23 interfaced, the physician simply scans the

1 patient's super bill. The system will  
2 automatically collect patient information and  
3 sample inventory data. The physician is then  
4 shown a list of medications available in the  
5 cabinet. The desired generic, brand, or  
6 over-the-counter medication is selected from the  
7 list. Once a medication is selected, the door  
8 will open so the sample can be removed from the  
9 bin.

10           Next, the bar code on the sample is  
11 scanned to verify that the correct medication  
12 has been removed from the cabinet. A label will  
13 print, as well as helpful information about the  
14 medication to give to the patient along with the  
15 sample similar to what they would receive at a  
16 pharmacy. Finally, the physician logs out. The  
17 entire process takes about 20 seconds.

18 Physicians and patients can benefit from the  
19 MedStart connect program. Physicians can offer  
20 a value-added service to their patients while  
21 patients leave with a free sample in hand  
22 improving their satisfaction.

23           But MedStart Connect does not end

1     there. Patient outreach and one-on-one phone  
2     support is also available from our pharmacy  
3     staff and care specialists. Pharmacists are  
4     available to answer medication-related questions  
5     and our care specialists encourage patients to  
6     adhere to their medications. A toll-free number  
7     is also available to physician office staff for  
8     any medication-related questions or concerns.

9             The MedStart Connect optional home  
10    delivery service helps patients save time and  
11    money on medications. We offer a convenient  
12    mail order service with low price 90-day  
13    supplies of medications delivered right to their  
14    home. Once enrolled, patients in the MedStart  
15    home delivery program receive ongoing adherence  
16    support. MedStart Connect provides refill  
17    reminders to help patients stay on track and we  
18    work with physician offices to authorize new  
19    prescriptions when necessary.

20            Our packaging is discreet and  
21    confidential with free standard shipping.  
22    MedStart Connect, brought to you by MedVantx, is  
23    the trusted program that's provided millions of

1 samples in physician offices and delivered  
2 millions of prescriptions through home delivery,  
3 free 30-day samples of medication, patient  
4 outreach and adherence counseling, and home  
5 delivery. MedStart Connect helps improve  
6 medication adherence and increase patient  
7 satisfaction for happier patients and healthier  
8 practices.

9 (End of video.)

10 MS. ANDERSON: And this was just the  
11 type of cabinet they were using at this  
12 particular facility. I don't know if all the  
13 other facilities or the other six in the State  
14 of Alabama are utilizing this type of technology  
15 or if it's, you know, a little bit more sketchy  
16 but.

17 MR. WARD: Well, they -- they read our  
18 law because distributing samples is an exemption  
19 so -- but I think the hook may be the  
20 counseling, the calling. It looks like they're  
21 really a mail order.

22 MS. ANDERSON: This one was going  
23 through Cigna Insurance.

1                   MR. WARD: Well, I think they need  
2 to -- I think they need to have a license  
3 here.

4                   MS. ANDERSON: Which the mail order  
5 facility does.

6                   MR. WARD: Yeah.

7                   MS. ANDERSON: But just not the actual  
8 facility where it's being dispensed.

9                   MR. MCCONAGHY: But if they've got an  
10 NPI number, that gives them the ability to bill  
11 and you would think that the third parties would  
12 be holding them to the same kind of standards  
13 that they would be holding the pharmacists to.

14                   MR. WARD: How do they know who to  
15 call when they get that brochure? How do they  
16 know who to call?

17                   MS. ANDERSON: Who to call?

18                   MR. WARD: Yeah.

19                   MS. ANDERSON: For --

20                   MR. WARD: They get their sample and  
21 the said it doesn't stop here. They call a  
22 pharmacist.

23                   MS. ANDERSON: Yeah, they have a

1 hotline number so you can --

2 MR. WARD: Who does?

3 MS. ANDERSON: It's provided through  
4 this company, so I would imagine it would --

5 MR. WARD: Well, does the company have  
6 a license with us?

7 MS. ANDERSON: Yes, as a mail order  
8 facility.

9 MS. YEATMAN: MedStart does?

10 MS. ANDERSON: They go through --  
11 yeah, actually, they do. Their parent company  
12 has one.

13 MR. DARBY: MedVantx.

14 MS. ANDERSON: MedVantx.

15 MR. WARD: So they have a mail order?

16 MS. ANDERSON: They do, in place  
17 and this is --

18 MR. BUNCH: What's the financial  
19 incentive for physicians? Is he getting a  
20 kickback? If he's giving them a so-called  
21 sample there and then it's going to be mail  
22 order through Cigna, is he just doing this out  
23 of the kindness of his heart?

1 MS. ANDERSON: I highly doubt it. I  
2 couldn't find --

3 MR. BUNCH: Where is his incentive to  
4 do this?

5 MR. DARBY: What -- when you were on  
6 site, was the physician actually doing the  
7 operation of the machine like it was in the  
8 video?

9 MS. ANDERSON: No. They had a nurse  
10 practitioner at the time. Their physician comes  
11 in and sees them twice a week.

12 MR. WARD: Why don't you bring this up  
13 when you meet with them. Maybe there's  
14 something jointly you can do.

15 DR. ALVERSON: Okay.

16 MS. ANDERSON: Like I said, this was  
17 actually a pretty -- a pretty good operation  
18 that we went in and saw. I'm just not sure --  
19 they just happened to have a high standard. I'm  
20 not sure -- that's not required so the other six  
21 facilities in the State might -- might be more  
22 sub par but I just kind of wanted to touch base  
23 with y'all. Y'all can talk about it and maybe

1 let me know how you'd like me to proceed.

2 MR. WARD: If you believe this video,  
3 there's always a doctor. It says the physician  
4 does it all so --

5 MS. ANDERSON: Which I checked with  
6 the nurse practitioner that is licensed with the  
7 medical examiners and she said that the nurse  
8 was practicing within her scope since she was  
9 a -- the doctor was her collaborating  
10 physician.

11 MR. MCCONAGHY: Any more questions?

12 MR. WARD: What was the name of the  
13 company, Med what?

14 MS. YEATMAN: MedVantx and MedStart.

15 MR. WARD: What was the name of that  
16 company?

17 MS. ANDERSON: The actual one that we  
18 visited?

19 MR. WARD: Yeah, the one that was on  
20 that video, Med --

21 MR. DARBY: MedStart.

22 MS. YEATMAN: MedStart.

23 MR. WARD: MedStart.

1                   MR. DARBY:   And MedVantx is the  
2   parent.

3                   MR. MCCONAGHY:  Yeah, I think the  
4   general consensus is the Board would like you to  
5   follow up on that.

6                   Next item on the new business is  
7   the --

8                   MR. DARBY:   CVS.

9                   DR. ALVERSON:  CVS wanted to change  
10  their inventory date.  Normally, I mean, our  
11  office just handles that but I think we have to  
12  get approval from the Board.

13                  MR. DARBY:  What's the current date?

14                  MS. ELLENBURG:  I talked with the  
15  gentleman from CVS and April 20 is their  
16  inventory date now.  He was wanting to change  
17  his -- all of the out-of-state facilities to the  
18  same date and I told him we had no jurisdiction  
19  on the out-of-state inventory, so it's become a  
20  moot point now.

21                  MR. DARBY:  Okay.

22                  DR. ALVERSON:  I'm done.  You don't  
23  have to hear anything else from me.

1                   MR. WARD: Do you have any opinion,  
2 Susan, what's in it for the doctors?

3                   DR. ALVERSON: Do I have any opinion  
4 about what?

5                   MR. WARD: Why would the physicians be  
6 doing this? How is it helping them to have this  
7 cabinet in there and dispensing a sample rather  
8 than the patient leave and call the pharmacy.  
9 How are they make -- are they making money on  
10 it?

11                  MR. BUNCH: They've got to be getting  
12 money.

13                  MR. WARD: Yeah.

14                  DR. ALVERSON: There's got to be  
15 something.

16                  MR. BUNCH: Yeah, I know --

17                  DR. ALVERSON: I'm guessing the mail  
18 order company has a contract somehow.

19                  MR. WARD: I'm just wondering if that  
20 is an issue to look at, some sort of kickback.

21                  DR. ALVERSON: Right.

22                  MR. WARD: I'm not sure they've  
23 researched it but it seems --

1 DR. ALVERSON: In my mind, it's a way  
2 for mail order companies to kind of gather  
3 patients. I mean, in some ways it's the same  
4 idea as having a pharmacy in the hospital so you  
5 give them their take-home medication.

6 MR. BUNCH: Right.

7 DR. ALVERSON: And then you convert  
8 them to mail order.

9 MR. WARD: The thing about it, you get  
10 to see them -- you get to see a doctor giving  
11 them a sample -- they got -- they said you get  
12 90 days.

13 DR. ALVERSON: Right. Yes, converted  
14 immediately to mail order.

15 MR. WARD: How? That's the part  
16 that's scripted.

17 MS. ANDERSON: This facility was  
18 e-scripting, I believe. They said that they  
19 would give the sample, check back with the  
20 patient, see how they were doing, and then  
21 e-script the prescription to the mail order  
22 facility.

23 MR. WARD: So they have captive

1 doctors. So the doctor has got to be getting  
2 something.

3 MR. BUNCH: He's getting payment --  
4 he's payment -- probably by the number of  
5 patients that he's -- that he's sending to the  
6 mail order facility because a doctor is not  
7 going to do that without some money.

8 MS. YEATMAN: Well, how is it being  
9 presented to the patient?

10 MR. WARD: I don't know.

11 DR. ALVERSON: It also seems that the  
12 patient has no freedom of choice that way.

13 MS. YEATMAN: Exactly, yeah.

14 MR. WARD: But that's when a  
15 captive --

16 MR. BUNCH: That happens every day.  
17 They don't have a freedom of choice.

18 MR. MCCONAGHY: I think that's a whole  
19 separate discussion on that.

20 MR. BUNCH: It is.

21 MR. MCCONAGHY: Any other new  
22 business?

23 DR. ALVERSON: No. We're done. I'm

1 done.

2 MR. MCCONAGHY: Not exactly on new  
3 business, I guess it would be more of an  
4 announcement, is most everybody here knows  
5 Charlie Thomas and he's retiring February 1st  
6 from the Health Department. If you get a  
7 chance, you know, contact him. They're going to  
8 have a function for him I think to -- Louise, do  
9 you know when they're having the --

10 MS. JONES: It's today but it's a  
11 surprise.

12 DR. ALVERSON: It's a surprise for us  
13 too.

14 MR. MCCONAGHY: It will be a surprise  
15 by the time he reads this. Charlie is one of  
16 those --

17 MR. BUNCH: Good thing Charlie isn't  
18 here.

19 MR. MCCONAGHY: -- he's been involved  
20 in everything, been on the State Board, and I  
21 met him back in 1979 when he was working retail  
22 pharmacy and that's -- he's for sure going to be  
23 one of the hall of fame pharmacists that goes in

1     there now that he's retiring.  I don't think  
2     they ever put anybody in there until they  
3     retire.

4                   MS. JONES:  He's actually been  
5     inducted into the Alabama Healthcare Hall of  
6     Fame.

7                   MR. MCCONAGHY:  He has.  Well, that  
8     would be appropriate.  Charlie has left his  
9     stamp on a lot of things and he's opened a lot  
10    of doors since he's been down at the Health  
11    Department.  He's got pharmacy sitting at a lot  
12    of tables that they didn't used to know were  
13    even there and if you get a chance, y'all thank  
14    Charlie for all he's done for the profession in  
15    Alabama.

16                  All right.  If that's it, at this time  
17    we're going to move into executive session,  
18    which is for the purpose of talking about the  
19    competencies of professionals, permit holders,  
20    and registrants, and any other legal matters  
21    that we might need to discuss.  We will go into  
22    executive session at -- let's see, we'll give a  
23    ten-minute break here, so we'll go in at 10:50

1 and we'll probably be out by 11 o'clock today  
2 and at that time we will resume the meeting.

3 We'll come back into a public meeting  
4 but we will not carry out any further business.  
5 We'll just vote on any items that need to be  
6 voted on that were discussed in executive  
7 session but you're welcome to come back if you  
8 want to but we're just going to say some numbers  
9 and vote on them and that will be it. So if  
10 there's no further questions, we'll retire into  
11 executive session.

12 MR. DARBY: You need to take a vote.

13 MR. MCCONAGHY: That's right. We have  
14 to take an individual vote on that, don't we?

15 MR. DARBY: I'll second the motion.

16 MR. MCCONAGHY: Okay. That's a motion  
17 and seconded. Buddy?

18 MR. BUNCH: I vote yea.

19 MR. MCCONAGHY: Yea. Donna?

20 MS. YEATMAN: Yea.

21 MR. MCCONAGHY: David?

22 MR. DARBY: Yes.

23 MR. MCCONAGHY: And yes here. We're

1     retired.

2

3             (Whereupon, a recess for executive  
4             session was taken from 10:39 a.m. to  
5             11:52 a.m.)

6

7             MR. MCCONAGHY: We're out of executive  
8             session and resuming our other and David is  
9             going to read those numbers in and results, so.

10            MR. DARBY: Case number 14-0078, case  
11            number 14-0160, letter of concern.

12            Case number 14-0168, case number  
13            14-0170, no violation.

14            Case number 14-0173, accept a  
15            permanent surrender.

16            Case number 14-0178 and case number  
17            14-0181, letter of warning.

18            Case number 14-0189, pharmacy --  
19            supervising pharmacist plan of action on  
20            identifying the duplicate therapy.

21            Case number 14-0115, no violation.

22            Case number 11-0198, a follow-up  
23            letter and inquiry to the insurance company and

1 send a copy to the pharmacy.

2 Case number 12-0362, closed case, no  
3 license to be issued.

4 Case number 14-0149, require plan of  
5 action.

6 I make a motion we accept these  
7 recommendations.

8 MR. MCCONAGHY: I second it.

9 MR. BUNCH: Aye.

10 MS. YEATMAN: Aye.

11 MR. DARBY: Aye.

12 MR. MCCONAGHY: Being no other  
13 business before the Board, the meeting is  
14 adjourned.

15

16 (Whereupon, the meeting was adjourned  
17 at 11:54 a.m.)

18

19

20

21

22

23

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23

CERTIFICATE

STATE OF ALABAMA

SHELBY COUNTY

I, Sheri G. Connelly, RPR, Certified Court Reporter, hereby certify that the above and foregoing hearing was taken down by me in stenotype and the questions, answers, and statements thereto were transcribed by means of computer-aided transcription and that the foregoing represents a true and correct transcript of the said hearing.

I further certify that I am neither of counsel, nor of kin to the parties to the action, nor am I in anywise interested in the result of said cause.

/s/ Sheri G. Connelly

SHERI G. CONNELLY, RPR

ACCR No. 439, Expires 9/30/2015

**WORD INDEX**

&lt; \$ &gt;

**\$10,000** 23:22**\$275,000** 23:17**\$35** 53:2

&lt; 1 &gt;

**1** 25:3 27:18**10:39** 86:4**10:50** 84:23**11** 85:1**11:52** 86:5**11:54** 87:17**11-0198** 86:22**111** 1:19**12-0362** 87:2**125** 23:18**13** 66:8**14** 1:10 3:20**14-0078** 86:10**14-0115** 86:21**14-0149** 87:4**14-0160** 86:11**14-0168** 86:12**14-0170** 86:13**14-0173** 86:14**14-0178** 86:16**14-0181** 86:17**14-0189** 86:18**144** 6:19**150,000** 23:18**16** 7:2 9:6, 10**17** 15:1, 8**19** 9:17 14:16**1979** 83:21**1st** 83:5

&lt; 2 &gt;

**20** 72:17 79:15**2013** 9:8**2014** 9:6, 9, 1014:16 15:1, 8 16:2,  
2**2015** 1:10 3:20

88:22

**23rd** 8:2

&lt; 3 &gt;

**30** 41:17 88:22**30-day** 39:12, 12

70:17 71:10 74:3

**35** 49:19, 21 50:9,  
14**350** 65:21**35242** 1:20**36** 9:8**370** 14:12

&lt; 4 &gt;

**400** 65:21**439** 88:22

&lt; 5 &gt;

**503B** 45:8**52** 9:9

&lt; 6 &gt;

**680-2-.14** 59:14

&lt; 7 &gt;

**7,000** 65:18

&lt; 8 &gt;

**8,000** 65:18**800** 16:17**85** 8:16

&lt; 9 &gt;

**9** 88:22**9:10** 1:12**90** 5:13 41:18

45:3 81:12

**90-day** 71:3 73:12

&lt; A &gt;

**a.m** 1:12 86:4, 5  
87:17**ability** 27:16 75:10**able** 8:13 20:725:18 26:3, 8 27:3,  
11, 16 31:21 32:15,20 33:2 40:1 41:1  
44:22 47:6 66:10,  
13**absolutely** 31:1

64:22

**abuse** 55:17, 17**accept** 5:22, 23

50:12 86:14 87:6

**accepted** 58:16, 18**access** 71:15**accounted** 4:1**ACCR** 88:22**accredited** 66:6, 17**acid** 36:12**ACPE** 66:6, 17, 22  
67:2, 9**acquired** 27:14**Act** 68:22 69:5, 5**action** 17:13, 23

18:7 30:18, 20

86:19 87:5 88:16

**active** 9:8, 9 20:3

50:4

**actual** 40:20 69:22

75:7 78:17

**Adams** 3:10 13:16,  
16**adapt** 33:1**add** 5:11 22:4, 5

24:17 26:19 35:1

**address** 42:5 43:22**addressed** 19:10**adhere** 73:6**adherence** 70:12,

22 73:15 74:4, 6

**adjourned** 87:14, 16**adjustments** 24:11**administrative**

17:19 18:6 19:21

28:16 50:1

**adopt** 4:1, 3**advice** 35:17 67:16**affect** 37:8**aftercare** 8:17, 17,  
18 9:2**afterward** 30:18**agencies** 68:2**agenda** 4:2, 4**ago** 42:17 63:1**agree** 18:19 38:10

41:4 56:2 67:12

**agreeable** 64:3**agreement** 10:20

23:16

**ahead** 18:1 19:15,

19 20:1, 17 31:9

**ALABAMA** 1:2, 18,

20 3:20 12:23

13:2, 10, 18 18:3

20:1 22:15 36:2

37:11, 11 42:3

45:7 55:18 61:13

62:13 67:19 68:10,

14 74:14 84:5, 15

88:3

**AlaCOP** 22:13**allow** 19:15**allowing** 41:21

46:19 47:19

**allows** 22:18 41:9

66:13 71:9

**ALSHP** 12:12**Alverson** 2:10

16:10 18:20 19:2

20:19, 23 21:3

22:16 26:2 28:12

29:14 31:5, 11, 18

32:4, 9, 19 33:12

34:1, 9, 16, 18, 22

37:21 38:17 39:2,

5, 22 40:7 42:10

43:21 45:6, 13, 16

46:2, 15 47:17

48:11, 19 49:4, 12

50:19, 22 51:10, 20

52:5, 19 53:11, 21

54:9, 14, 19 55:6,

16 56:6, 13, 16

57:11, 14 58:1, 14

59:18, 20 61:7, 11,

18, 22 62:1, 8, 17

63:5, 14 64:2, 12,

16 65:18, 22 66:21

67:2, 12 70:2

77:15 79:9, 22

80:3, 14, 17, 21

81:1, 7, 13 82:11,

23 83:12

**amend** 68:23**amount** 8:20 17:6

27:22

**Anderson** 2:15, 17

67:17 69:8, 14, 17

70:5 74:10, 22

75:4, 7, 17, 19, 23

76:3, 7, 10, 14, 16

77:1, 9, 16 78:5, 17 81:17 <b>animal</b> 37:12 39:1 <b>announcement</b> 83:4 <b>answer</b> 47:18 60:20 61:19 66:3 67:23 73:4 <b>answers</b> 88:9 <b>antibiotics</b> 43:14 <b>anybody</b> 5:12, 19 60:12 84:2 <b>anyway</b> 5:8 17:16 <b>anywise</b> 88:16 <b>APPEARANCES</b> 2:1 <b>applicant</b> 53:4 <b>application</b> 18:9, 11 52:20 53:7 54:15 <b>applications</b> 17:15 27:20, 21 28:1 52:2 55:1 <b>apply</b> 16:18 37:4 52:20 56:13 69:2, 6 <b>applying</b> 53:18 <b>appreciate</b> 11:19, 21 <b>appropriate</b> 84:8 <b>approval</b> 23:6 34:14 79:12 <b>approve</b> 14:9, 15, 23 15:8 <b>approved</b> 15:16 17:7 40:3 <b>April</b> 51:7, 8 79:15 <b>area</b> 25:20 71:13 <b>arrests</b> 55:8 <b>asked</b> 16:20 29:19, 19 30:1 34:1 <b>asking</b> 8:8 32:21 48:2 68:12 <b>aspects</b> 6:16 <b>Association</b> 13:1, 3 68:23 <b>assume</b> 67:7 <b>Atlanta</b> 34:8, 10 <b>attest</b> 17:10 <b>attorney's</b> 46:4	<b>Auburn</b> 10:13 56:17 <b>audience</b> 40:5 <b>audit</b> 62:10 <b>August</b> 24:20 27:18 <b>auspices</b> 69:3 <b>authority</b> 69:3 <b>authorize</b> 73:18 <b>autoclave</b> 36:4, 10 <b>autoclaves</b> 36:5 <b>automatically</b> 66:10 71:16 72:2 <b>available</b> 9:18, 22, 22 10:2 25:15 31:12 57:6 72:4 73:2, 4, 7 <b>average</b> 58:18 <b>aware</b> 39:6 60:11 66:5 <b>awful</b> 65:23 <b>Aye</b> 4:8, 9 6:4, 5, 6 14:20, 21, 22 15:4, 5, 6, 12, 13, 14 87:9, 10, 11  < B > <b>back</b> 7:16, 20 8:2, 8 18:14 23:14 25:10 26:23 33:17 51:14, 14 52:3 61:21 81:19 83:21 85:3, 7 <b>backbone</b> 24:4 30:15 <b>background</b> 22:21 24:4 46:13 52:2, 9, 22, 23 53:9, 12 54:2, 6, 17 56:4, 11 57:22 58:6 <b>backgrounding</b> 55:3 <b>backing</b> 21:14 <b>bad</b> 4:18 9:11 61:4 <b>bad-mouth</b> 29:7 <b>balance</b> 5:20 <b>bankruptcies</b> 55:9 <b>Baptist</b> 12:11 13:6	<b>bar</b> 72:10 <b>base</b> 77:22 <b>based</b> 22:23 49:3 <b>basically</b> 5:17 28:3 43:4 56:15 67:20 <b>Bates</b> 3:2 12:23, 23 <b>beg</b> 5:3 <b>beginning</b> 66:7 <b>begins</b> 70:14 <b>begun</b> 30:6 <b>believe</b> 47:18 56:18 78:2 81:18 <b>benefit</b> 72:18 <b>benefits</b> 70:14 <b>best</b> 21:16 47:9 68:17 <b>Bethea</b> 3:6 13:9, 9 43:5, 5 61:12, 12, 20, 23 62:6 <b>better</b> 5:9 17:21 31:7 35:2 63:20 <b>big</b> 5:21 7:15 23:20 <b>bigger</b> 41:18 42:7 <b>biggest</b> 16:12 <b>bill</b> 72:1 75:10 <b>bills</b> 4:20 <b>bin</b> 72:9 <b>Birmingham</b> 10:14 <b>bit</b> 5:5, 9 35:4 68:19 74:15 <b>Blake</b> 2:17 <b>bleeding</b> 44:9 <b>blocks</b> 26:10 <b>BOARD</b> 1:2, 18 2:3 3:21 8:7 11:7, 11 12:8 13:19 14:4, 6, 16 15:8 21:23 22:3, 6 30:19 33:20, 21 35:14 36:22, 22 41:15 42:1 43:6, 22 46:18 47:3, 13, 18 48:15 50:10, 17 58:20 59:3 61:17 64:3 67:6 68:23 69:9 79:4, 12 83:20 87:13	<b>boards</b> 59:21, 22 66:9 <b>Board's</b> 10:17 48:1 <b>bone</b> 43:14 <b>bottom</b> 11:2 <b>box</b> 51:1 <b>boxes</b> 49:9, 13 <b>Braden</b> 2:12 15:19 22:13 25:17 55:13, 15, 21 56:1 <b>brag</b> 35:11 <b>bragging</b> 35:4 <b>brand</b> 71:10 72:5 <b>break</b> 25:21 84:23 <b>bring</b> 77:12 <b>bringing</b> 25:10 <b>broader</b> 57:18 <b>brochure</b> 75:15 <b>broke</b> 57:16 <b>brought</b> 73:22 <b>Brown</b> 2:18 12:13, 13 13:15 <b>Buddy</b> 2:5 4:11 28:7 85:17 <b>Buddy's</b> 5:11 <b>budget</b> 5:1 28:7 <b>budgeted</b> 5:2 <b>build</b> 52:7, 8 <b>building</b> 24:15 <b>built</b> 24:2 26:18 <b>Bunch</b> 2:5 4:5, 13 6:5 14:18, 21 15:2, 6, 10, 12 28:8 34:7 47:9 48:7, 17 49:6 52:16 54:2, 6, 12 56:3 57:4 64:4, 17 65:2, 6, 10, 15 76:18 77:3 80:11, 16 81:6 82:3, 16, 20 83:17 85:18 87:9 <b>Burgess</b> 3:7 13:11, 11 40:9, 9 42:12 <b>BUSINESS</b> 1:8 4:19 16:21 33:4 46:10 51:23 52:1 79:6 82:22 83:3 85:4 87:13 <b>businesses</b> 16:17, 19
--	--	--	--

<p>&lt; C &gt;</p> <p><b>cabinet</b> 71:9, 13, 15, 19, 19, 22 72:5, 12 74:11 80:7</p> <p><b>call</b> 10:3 31:14 37:21, 22 47:23 61:17 75:15, 16, 17, 21 80:8</p> <p><b>called</b> 21:16 38:1 43:9 48:13</p> <p><b>calling</b> 74:20</p> <p><b>CAPS</b> 13:20</p> <p><b>captive</b> 81:23 82:15</p> <p><b>capturing</b> 65:13</p> <p><b>Cara</b> 2:20 12:12</p> <p><b>card</b> 53:1</p> <p><b>Care</b> 13:5 64:6 68:8 70:14 71:12, 14 73:3, 5</p> <p><b>career</b> 62:5</p> <p><b>carefully</b> 43:8</p> <p><b>carry</b> 85:4</p> <p><b>case</b> 24:3 27:4 68:17 86:10, 10, 12, 12, 14, 16, 16, 18, 21, 22 87:2, 2, 4</p> <p><b>cases</b> 9:5, 6, 8, 9, 20 16:2 26:16 27:17 36:21, 23 43:23</p> <p><b>catch</b> 53:15</p> <p><b>caught</b> 16:2 17:18</p> <p><b>cause</b> 88:17</p> <p><b>CE</b> 62:9, 14 65:14</p> <p><b>cement</b> 43:14</p> <p><b>center</b> 7:6 13:10 43:6 68:14</p> <p><b>centers</b> 7:18 8:19 68:8</p> <p><b>Centrally</b> 71:12</p> <p><b>CEO</b> 21:19 29:3 34:5</p> <p><b>certain</b> 25:20 32:16</p> <p><b>certainly</b> 18:17 58:9 66:16 67:10</p> <p><b>CERTIFICATE</b> 88:1</p>	<p><b>Certified</b> 88:6</p> <p><b>certify</b> 88:7, 14</p> <p><b>CEs</b> 63:13</p> <p><b>cetera</b> 17:3</p> <p><b>chance</b> 83:7 84:13</p> <p><b>change</b> 30:13 31:3, 13, 17 32:1, 11 62:19 79:9, 16</p> <p><b>changed</b> 31:8, 9</p> <p><b>changes</b> 23:13 32:3</p> <p><b>charge</b> 31:14 32:1 59:3</p> <p><b>charged</b> 18:4</p> <p><b>charges</b> 27:1</p> <p><b>Charlie</b> 83:5, 15, 17 84:8, 14</p> <p><b>check</b> 52:22, 23 53:12 54:3, 7, 18 56:11 57:20, 22 58:5 81:19</p> <p><b>checked</b> 78:5</p> <p><b>checking</b> 55:4, 5, 8</p> <p><b>checks</b> 52:2, 9 53:9 56:4 57:22 58:6 64:6</p> <p><b>chemo</b> 43:11</p> <p><b>chemotherapy</b> 43:10</p> <p><b>Chief</b> 2:12</p> <p><b>child</b> 55:17</p> <p><b>choice</b> 82:12, 17</p> <p><b>chooses</b> 71:21</p> <p><b>chose</b> 24:17 27:19</p> <p><b>Chris</b> 3:7 13:11 40:7, 9</p> <p><b>Christmas</b> 10:23</p> <p><b>Cigna</b> 74:23 76:22</p> <p><b>circle</b> 27:12</p> <p><b>cities</b> 55:6</p> <p><b>city</b> 55:20, 22, 23</p> <p><b>claimed</b> 37:16</p> <p><b>clause</b> 69:1</p> <p><b>Clean</b> 6:8</p> <p><b>clear</b> 60:22</p> <p><b>close</b> 27:11</p> <p><b>closed</b> 27:14 87:2</p> <p><b>code</b> 72:10</p> <p><b>codes</b> 25:21</p> <p><b>collaborating</b> 78:9</p> <p><b>collect</b> 29:16 72:2</p>	<p><b>come</b> 7:14 10:13 23:15 26:15 27:4 29:1 36:21 47:13 48:4 58:4 60:8 68:15 85:3, 7</p> <p><b>comes</b> 26:23 77:10</p> <p><b>comfortable</b> 40:16</p> <p><b>coming</b> 7:19 40:18 59:4</p> <p><b>comment</b> 11:7 16:20 25:15 35:20 43:21 47:14 50:11</p> <p><b>comments</b> 23:1 26:19 49:22 50:10, 12, 12</p> <p><b>committee</b> 6:15 10:19</p> <p><b>communication</b> 47:2</p> <p><b>companies</b> 21:16 54:20 60:17 81:2</p> <p><b>company</b> 21:15, 16 22:10 23:23 29:13 31:7 35:6 38:4 44:22 47:7 54:20 57:9, 12 76:4, 5, 11 78:13, 16 80:18 86:23</p> <p><b>competencies</b> 84:19</p> <p><b>competition</b> 28:9</p> <p><b>complaint</b> 26:18</p> <p><b>complaints</b> 15:22 26:13, 14 32:15, 16 36:23</p> <p><b>complete</b> 70:13</p> <p><b>completed</b> 8:5 15:21, 22 16:3 63:12</p> <p><b>completely</b> 41:4</p> <p><b>compliment</b> 11:19</p> <p><b>component</b> 22:5, 5 24:16</p> <p><b>components</b> 24:17</p> <p><b>compound</b> 36:17 37:10</p> <p><b>compounded</b> 38:22</p> <p><b>Compounding</b> 13:12 38:13, 15, 18 40:10 41:9</p> <p><b>compounds</b> 41:22</p>	<p><b>computer</b> 17:4 20:4 31:3 52:7</p> <p><b>computer-aided</b> 88:11</p> <p><b>concentration</b> 43:17, 18</p> <p><b>concern</b> 40:12 41:19 42:7 86:11</p> <p><b>concerned</b> 41:12 68:19 69:21</p> <p><b>concerning</b> 10:10</p> <p><b>concerns</b> 73:8</p> <p><b>confidential</b> 73:21</p> <p><b>Connect</b> 70:9, 13, 19 71:1, 8 72:19, 23 73:9, 16, 22 74:5</p> <p><b>Connelly</b> 1:23 88:6, 20, 21</p> <p><b>consensus</b> 59:16 79:4</p> <p><b>consent</b> 27:1</p> <p><b>consider</b> 43:6, 7, 8</p> <p><b>constant</b> 37:15</p> <p><b>contact</b> 12:3 18:14 28:14, 15 48:6 83:7</p> <p><b>contacted</b> 28:19</p> <p><b>contacts</b> 28:13</p> <p><b>continue</b> 10:17 12:2 70:15</p> <p><b>continuing</b> 11:21</p> <p><b>contract</b> 6:22 23:7, 7, 8, 13, 14, 18 24:8 30:8, 9 31:19, 23 32:10 34:19, 23 54:22, 23 57:7 60:17, 22 80:18</p> <p><b>contracted</b> 33:17</p> <p><b>contracts</b> 6:20</p> <p><b>controlled</b> 69:12 71:15</p> <p><b>convenient</b> 73:11</p> <p><b>conversation</b> 50:17</p> <p><b>convert</b> 81:7</p> <p><b>converted</b> 81:13</p> <p><b>copies</b> 18:16</p> <p><b>copy</b> 18:14 87:1</p> <p><b>correct</b> 30:16</p>
--	--	--	--

60:15 72:11 88:12  
**corrected** 65:5  
**cost** 40:22 52:18  
 53:3  
**Council** 69:19  
**counsel** 88:15  
**counseling** 70:22  
 74:4, 20  
**counties** 55:7  
**county** 25:20 88:4  
**couple** 19:6 21:15  
 42:15  
**course** 23:9 31:11  
 37:5 39:23 49:19  
 52:12  
**court** 27:8, 9 33:6  
 88:7  
**create** 19:11 27:22  
 37:4  
**credit** 53:1 55:10,  
 11 57:15  
**criminal** 55:11, 13,  
 14 57:19 58:2  
**crises** 10:23  
**Cristal** 2:15 67:14  
**cross** 33:6  
**curious** 28:11  
**current** 79:13  
**currently** 41:11  
**customers** 40:23  
**CVS** 79:8, 9, 15  
**CyberBest** 21:17  
 23:4  
**cycle** 5:18  
**Cynthia** 3:9 13:14

## &lt; D &gt;

**damage** 44:10  
**Dan** 2:4 4:16  
 16:14  
**Dane** 3:1 12:21  
**danger** 38:11, 20  
**Dan's** 4:16  
**Darby** 2:6 4:3, 8  
 5:23 6:4, 12 14:15,  
 20, 23 15:4, 7, 14  
 26:9 31:16, 22  
 32:8, 12 38:10, 20  
 39:3, 10, 16 45:14  
 53:3, 8 55:4, 8

57:1, 5, 13, 20 58:2,  
 13 59:9 61:1 62:7,  
 21 63:4 76:13  
 77:5 78:21 79:1, 8,  
 13, 21 85:12, 15, 22  
 86:10 87:11  
**data** 21:8, 12  
 22:19 24:2, 21, 22  
 29:6, 15, 17, 19, 22  
 30:21 33:6, 7 35:8  
 47:7 63:20 64:22,  
 23 67:4 72:3  
**database** 60:23  
**date** 26:20 49:15  
 79:10, 13, 16, 18  
**David** 2:6 26:9  
 59:8 85:21 86:8  
**day** 4:19 35:13  
 82:16  
**days** 41:18, 18  
 45:3 49:19, 21  
 50:9, 14 81:12  
**December** 6:18  
 15:1, 8  
**decide** 24:12  
**decision** 21:13  
**deductible** 71:5  
**deeper** 60:7  
**define** 31:17, 21  
**defining** 43:7  
**delay** 31:10  
**deliver** 24:20 25:4  
**delivered** 27:18  
 73:13 74:1  
**delivery** 41:8 71:1  
 73:10, 15 74:2, 5  
**Delk** 2:14 14:4, 4  
**demonstration** 70:1  
**dentists** 8:23  
**Department** 35:15,  
 15 83:6 84:11  
**departments** 22:14  
**depends** 37:6  
**designed** 22:10  
 24:5 70:11  
**desired** 72:5  
**determine** 66:13  
**determined** 40:15  
**device** 41:8

**devices** 43:3  
**diagnostic** 6:22  
**difference** 46:20  
**different** 6:16  
 45:12  
**difficult** 48:22  
**difficulty** 71:5  
**dig** 60:6  
**diligence** 33:22  
**dings** 58:4  
**Director** 2:11  
 12:10  
**disciplinary** 17:13,  
 14, 20, 22 18:7  
 19:20 47:12  
**discipline** 18:10, 16  
**disciplined** 18:10  
**disconnect** 66:21  
**discovered** 22:9  
**discreet** 73:20  
**discuss** 30:19  
 51:10 56:6 84:21  
**discussed** 52:6  
 85:6  
**discussion** 10:17  
 51:1 82:19  
**dispense** 45:5  
**dispensed** 75:8  
**dispenses** 68:4  
**dispensing** 67:16,  
 20 68:1, 3 69:11  
 70:3 80:7  
**distance** 46:19  
 47:1  
**distributing** 74:18  
**diversion** 26:16  
**divorce** 29:9  
**doctor** 70:18 78:3,  
 9 81:10 82:1, 6  
**doctors** 69:2 80:2  
 82:1  
**documentation**  
 27:14 33:7 45:9  
**documents** 26:20  
**doing** 4:17, 22  
 30:11 37:6 46:14  
 47:1 48:14 53:9  
 54:17 56:17 57:9  
 66:8, 15 76:22  
 77:6 80:6 81:20

**Donna** 2:7 11:8  
 21:10 45:17 59:3  
 85:19  
**door** 72:7  
**doors** 84:10  
**doubt** 56:3 77:1  
**DR** 6:10, 13 11:10,  
 18, 23 16:10 18:20  
 19:2 20:19, 23  
 21:3 22:16 26:2  
 28:12 29:14 31:5,  
 11, 18 32:4, 9, 19  
 33:12 34:1, 9, 16,  
 18, 22 37:21 38:17  
 39:2, 5, 22 40:7  
 42:10 43:21 45:6,  
 13, 16 46:2, 15  
 47:17 48:11, 19  
 49:4, 12 50:19, 22  
 51:10, 20 52:5, 19  
 53:11, 21 54:9, 14,  
 19 55:6, 16 56:6,  
 13, 16 57:11, 14  
 58:1, 14 59:18, 20  
 61:7, 11, 18, 22  
 62:1, 8, 17 63:5, 14  
 64:2, 12, 16 65:18,  
 22 66:21 67:2, 12  
 70:2 77:15 79:9,  
 22 80:3, 14, 17, 21  
 81:1, 7, 13 82:11,  
 23 83:12  
**draft** 23:7 34:23  
**drawer** 11:2  
**driven** 8:17  
**drop** 28:22  
**Dropbox** 14:12  
 15:20  
**drug** 37:8 39:9  
 43:3 69:20  
**drugs** 69:12  
**dry** 42:13, 18  
**due** 7:14 30:7  
 33:22 52:17  
**duplicate** 86:20  
**duration** 44:18

## &lt; E &gt;

**early** 5:6

<p>easier 25:22  easily 53:22  Easter 3:5 11:2  13:6, 6 14:3  easy 29:5 44:15  71:18  Eddie 2:12 3:11  13:20 15:17 25:13  effective 50:14  efficient 59:12  eight 30:7 35:2  either 64:7 65:7  70:3  Ellenburg 2:11  12:8, 8 17:1 18:19  19:3, 17 20:10, 14  49:15 50:5, 8 51:8  56:10, 14, 19 63:3  64:19 65:4, 9, 12  79:14  email 10:9 29:21  35:4 61:20, 21  embolization 43:11  e-medicine 50:18  emergency 49:12  51:1  employer 61:13  employment 55:11  EMR 71:20  encourage 67:10  73:5  enforcement 21:19  enrolled 73:14  enter 17:7  entered 33:5  entire 72:17  equipment 41:2  ERs 68:7  e-script 81:21  e-scripting 81:18  et 17:3  evaluated 7:7  evaluations 10:20  even-numbered  16:15  eventually 29:1  everybody 12:6  18:18 21:10 29:16  35:6, 6 39:4 41:17</p>	<p>45:22 53:10 58:17  62:2 63:19 83:4  evidence 45:2  Exactly 82:13 83:2  Examiners 50:17  69:9 78:7  example 57:15  exception 3:22  exceptional 17:6  excessive 44:9  Executive 2:10  16:5 46:7 84:17,  22 85:6, 11 86:3, 7  exemption 51:17  74:18  expect 7:13  expecting 67:14  experience 31:20  35:9 40:6, 19  58:15  Expires 88:22  extended 43:16  extension 8:8  extern 58:20</p> <p>&lt; F &gt;  facilitating 10:20  facilities 17:11  38:14, 19 68:8  74:13 77:21 79:17  facility 8:16 45:8,  15 68:16 69:15  74:12 75:5, 8 76:8  81:17, 22 82:6  Facility-driven 8:17  fact 33:8 40:13  41:6  factors 37:8  fall 67:21  fame 83:23 84:6  far 4:23 34:17  39:16 49:10 56:4  68:19  fast 35:8  fatty 36:15  fault 4:18 29:9  favor 4:7 6:3  14:19 15:3, 11  60:13</p>	<p>FDA 37:19, 22  38:3 39:14, 21  45:14  February 10:12  49:20 50:2 83:5  federal 55:7 68:2  fee 24:18 32:2  53:7  feel 30:12 34:23  36:19 52:13 62:3  feeling 33:18 38:7  felt 40:16 51:12  63:18  field 25:8, 16  Fields 3:14 13:7  14:2, 2  figure 28:2  figuring 37:18  file 33:5, 8, 13  fill 20:17 47:23  48:8 49:2  filled 64:15  filling 48:5 52:23  final 20:13  Finally 72:16  financial 5:8 6:1  58:3 76:18  find 58:3, 7 69:22  77:2  fine 10:23 48:3  finish 27:9 50:23  finished 25:5 47:10  finishing 30:8  first 7:14 10:11  24:20 34:21, 23  39:15 46:15 51:11  56:12 71:18  five 22:1, 2, 6  56:14 58:15 62:16,  17 65:20  five-percent 62:10  fix 31:14 64:18  fixed 65:3  flex 67:10  Florida 34:11  flow 41:20, 22  folks 9:1 11:15  33:20 55:19  follow 16:22 27:16</p>	<p>79:5  following 70:8  follow-up 86:22  foregoing 88:8, 12  forever 23:22  forgiveness 5:3  form 18:23 31:3  formal 9:14  format 66:13  forms 25:7 29:17,  18  forth 49:22  forward 34:15  52:9  found 35:22  four 26:10 42:16  50:15 56:16, 21  65:22  free 24:10, 12 35:1  70:17 71:2, 10  72:21 73:21 74:3  freedom 82:12, 17  frequently 44:3  friends 29:10  frustrations 66:18  function 83:8  functioning 66:12  further 17:18 18:7  19:21 85:4, 10  88:14</p> <p>&lt; G &gt;  gain 9:10  gamma 40:15, 17,  20  garnishments 58:11  Garver 6:8, 10, 13  11:10, 18, 23  Gary 2:19 12:10  gather 81:2  general 79:4  generic 71:10 72:5  generics 71:3  gentleman 8:15  79:15  geographic 25:18  getting 9:13 17:18  20:8, 11 42:21  45:7 46:23 52:9</p>
---	---	---	---

71:5 76:19 80:11  
82:1, 3  
**give** 5:9 16:4  
18:12 22:20 33:21  
46:13 49:21 50:9  
60:22 63:7, 10  
72:14 81:5, 19  
84:22  
**given** 11:8  
**gives** 75:10  
**giving** 39:8 76:20  
81:10  
**GL** 17:4, 16  
**Glenn** 2:13 14:6  
68:11  
**glitch** 65:13  
**glitches** 21:5  
**GLS** 23:21, 21  
24:3 28:10, 13  
29:19 33:17 60:9  
65:15  
**GNC** 24:14  
**go** 8:19 19:15, 18  
20:1, 17 23:4, 9  
24:6 25:9 26:22  
30:5, 15 31:9  
32:15 50:10 51:14  
52:22 56:5 61:15  
64:21 76:10 84:21,  
23  
**goes** 26:21 28:6  
67:4 83:23  
**going** 3:20 5:14  
6:17 7:15, 19  
10:11, 12, 13, 15  
14:9, 12 19:9, 9  
21:13, 14 23:17  
24:12, 13 26:19  
28:18 30:4, 11  
31:6, 20 32:1, 23  
35:20 38:21, 23  
39:11 40:15, 23  
43:12, 16 44:7  
45:2 46:12, 23  
48:20 49:11 52:6  
58:23, 23 59:7  
60:1, 8 62:2, 19  
64:6 67:7, 14  
74:22 76:21 82:7

83:7, 22 84:17  
85:8 86:9  
**Good** 4:14, 16, 22  
5:8 6:13 11:10  
12:3, 4 16:8 27:7  
33:18 36:20 41:15  
56:22 59:10, 16  
60:4, 11 69:23  
77:17 83:17  
**gotten** 9:13 23:1  
35:7 62:4  
**granted** 42:16  
**grapevine** 42:18  
**great** 6:10 7:21  
22:18 43:21 59:6  
**greater** 39:12  
**ground** 36:20  
**group** 24:13  
**growths** 44:9  
**guess** 21:9 33:15  
48:7, 10 65:10  
66:4 83:3  
**guessing** 80:17  
**guys** 25:22  
  
< H >  
**hair** 44:12  
**half** 5:18  
**halfway** 7:5  
**hall** 83:23 84:5  
**hand** 72:21  
**handles** 79:11  
**handling** 21:21  
**happen** 5:7 8:11  
44:10 45:23 54:12  
56:21  
**happened** 16:12  
18:13 26:5 27:15  
77:19  
**happening** 37:17  
**happens** 82:16  
**happier** 74:7  
**Happy** 6:11, 12  
11:13 21:4  
**hard** 16:1 62:2  
**hardness** 41:3  
**health** 6:23 7:8  
8:21 9:23, 23 10:1  
13:7 35:15 68:8

71:5, 14 83:6  
84:10  
**Healthcare** 84:5  
**healthier** 74:7  
**Healthy** 68:13  
**hear** 26:17 28:19  
79:23  
**heard** 21:10 22:17  
42:17  
**hearing** 17:19  
18:6 19:21 49:19  
50:1 88:8, 13  
**hearings** 17:20  
52:12  
**heart** 71:8 76:23  
**heat** 42:14, 18  
**held** 7:3, 12  
**help** 70:11 73:17  
**helped** 4:16  
**helpful** 18:22  
52:13 72:13  
**helping** 80:6  
**helps** 73:10 74:5  
**hepatic** 43:10  
**Heritage** 13:11  
40:9  
**high** 15:23 71:4  
77:19  
**highly** 11:17 77:1  
**hire** 60:1  
**hiring** 60:2  
**history** 55:11, 13,  
14 60:6  
**hit** 25:8  
**hold** 19:22 41:17  
**holders** 84:19  
**holding** 75:12, 13  
**holdup** 18:12  
**home** 49:14 71:1  
73:9, 14, 15 74:2, 4  
**hoods** 41:20, 22  
**hook** 74:19  
**Hoover** 1:20  
**hopeful** 26:12  
**hopefully** 5:4 8:2  
14:11 23:15  
**hormone** 35:19  
43:23 44:6 45:3  
**hormones** 44:11  
**horrific** 44:2

**Hospital** 13:17  
81:4  
**hotline** 76:1  
**hour** 32:6  
**hourly** 32:6  
**hours** 63:11, 16, 23  
64:10, 12  
**house** 7:5  
**housed** 34:10  
**hub** 34:8  
**human** 37:13 39:1  
48:6  
**humans** 37:14  
**hundred** 65:22  
**Hunter** 3:8 13:13,  
13  
**Huntsville** 13:16  
**hurt** 62:4, 5  
**hurts** 35:10

< I >  
**idea** 38:5 56:22  
59:16 81:4  
**ideal** 65:6 71:4  
**identified** 9:5, 6  
**identifying** 86:20  
**imagine** 76:4  
**immediately** 61:2  
81:14  
**implant** 44:4  
**implantable** 35:18  
**implemented** 56:18  
**important** 57:16  
**improve** 70:11  
74:5  
**improving** 72:22  
**incentive** 76:19  
77:3  
**include** 6:23  
**includes** 6:21  
70:19  
**income** 4:23 5:19  
**Incorporated** 13:21  
**increase** 70:12  
74:6  
**individual** 32:16  
85:14  
**individuals** 6:21  
8:16, 19 41:21

63:11  
**inducted** 84:5  
**industry** 41:12  
**influx** 7:15  
**information** 16:4  
 18:23 35:7 41:7  
 42:13, 13 52:13  
 61:4 72:2, 13  
**ingredients** 36:14  
 37:7  
**initials** 46:16  
**inpatient** 7:1, 23  
**input** 40:6  
**inquiry** 67:18  
 86:23  
**inside** 36:6  
**insights** 28:10  
**inspected** 45:14  
**inspection** 25:6, 23  
 26:11 29:17  
**inspections** 15:20  
 25:5, 8 26:3  
**Inspector** 2:12, 13,  
 14 45:18  
**inspectors** 16:1  
 22:17 25:6 26:2  
**inspector's** 15:18  
**install** 24:9  
**installed** 27:20, 21  
**insurance** 60:16  
 74:23 86:23  
**integrated** 70:10  
**intention** 48:20  
**interested** 66:14  
 88:16  
**interfaced** 71:20, 23  
**intern** 58:20  
**Internet** 47:20  
 49:2  
**interview** 15:1  
**interviewing** 46:19  
**introduction** 6:11  
**inventory** 71:16  
 72:3 79:10, 16, 19  
**investigation** 7:17  
**Investigator** 68:11  
**involved** 10:4  
 83:19  
**issue** 19:8, 16 37:3  
 40:13, 22 41:3

42:6 44:17, 19  
 65:1 67:5 80:20  
**issued** 87:3  
**issues** 45:12 47:12  
**issuing** 20:9  
**item** 46:10 52:1  
 79:6  
**items** 85:5  
  
 < J >  
**Jack** 3:10 13:16  
**January** 1:10 3:20  
 66:8  
**Jim** 3:5 13:6 14:2  
 17:10 23:10 30:19  
 46:3 59:11  
**Jim's** 18:1  
**job** 45:23  
**Joe** 30:15, 19  
**Joe's** 23:10 30:5  
**join** 13:8  
**jointly** 77:14  
**joints** 43:15  
**Jones** 3:3 13:2, 2  
 66:4 67:1, 6 83:10  
 84:4  
**journal** 49:23  
**Julie** 3:8 13:13  
**jurisdiction** 68:15  
 79:18  
**justify** 41:1  
  
 < K >  
**keeps** 22:3  
**kickback** 76:20  
 80:20  
**kin** 88:15  
**kind** 4:14 6:17  
 10:18 19:8, 11  
 26:16 32:20 34:13  
 35:8 36:13, 14  
 75:12 77:22 81:2  
**kindness** 76:23  
**kinds** 29:18 37:7  
 44:12  
**kinetics** 38:4  
**kinks** 24:10  
**knew** 64:12  
**know** 4:11 10:15  
 11:21 20:15 23:19

24:13, 14 26:4  
 27:5, 6, 9, 10 28:20  
 29:23 30:17, 18  
 31:1, 13 32:14  
 35:19 36:5 38:8,  
 23 41:20 42:6, 10,  
 21 44:8, 11, 12  
 48:7, 11, 12 49:7  
 53:17 55:18 57:18  
 58:5, 7, 7, 12 60:14,  
 19 62:2 63:21, 22  
 64:4, 9, 10, 14, 17  
 66:10, 18 74:12, 15  
 75:14, 16 78:1  
 80:16 82:10 83:7,  
 9 84:12  
**knowing** 27:12  
 48:9 63:16 66:14  
**knowingly** 49:2  
**knows** 8:14 31:7  
 83:4  
**Koelz** 2:22 12:17,  
 17  
  
 < L >  
**label** 72:12  
**Lacey** 2:23 12:19,  
 19 63:7, 8 64:1  
**laminar** 41:20, 22  
**large** 52:10  
**late** 4:11  
**law** 47:19 50:23  
 51:12 69:4 74:18  
**Lawrence** 2:16  
 13:18, 18  
**lawyer** 30:22  
**lawyer's** 26:22  
**LCDs** 43:10  
**Leah** 3:12 13:22  
**leave** 49:3 72:21  
 80:8  
**leaves** 26:22  
**leaving** 29:2  
**left** 84:8  
**legal** 30:17 84:20  
**legally** 19:22  
**legislation** 68:19  
**Legislative** 49:16  
**Leos** 2:20 12:12,

12  
**LETS** 22:13  
**letter** 17:23 19:19  
 20:2, 8 30:5, 14, 15  
 86:11, 17, 23  
**letters** 29:18 60:21  
**level** 41:17  
**license** 16:16, 18,  
 19, 20 18:2 19:8,  
 13, 16, 22 20:9  
 24:12 53:14 58:21  
 75:2 76:6 87:3  
**licensed** 46:23  
 52:10 71:14 78:6  
**licensing** 21:18  
 24:14 33:8, 13  
**Life** 68:13  
**line** 5:1 18:7 19:5,  
 21 20:3 26:21, 22  
 27:2 29:1, 12  
 33:15 51:5  
**list** 61:21 63:8  
 71:22 72:4, 7  
**listed** 6:23 14:10  
**literature** 35:21  
**little** 4:11, 15 5:3,  
 5, 9 9:3 35:4  
 42:13 46:13 68:18,  
 19 69:20 74:15  
**live** 47:2 63:17, 17  
 64:9, 9  
**located** 71:12  
**LOCATION** 1:18  
 25:18  
**logged** 32:17  
**logs** 71:19 72:16  
**long** 10:5 28:2  
 43:12 49:11 70:15  
**longer** 42:7  
**look** 5:15 15:19,  
 22 21:14 23:12  
 28:4 40:10 59:12  
 62:8 80:20  
**looked** 14:11  
 21:15 23:3 25:23  
 38:5 40:21 42:16  
**looking** 5:13, 20  
 35:2 41:20 63:13  
 67:23

looks 5:21 74:20  
 loss 44:12  
 lot 5:15 7:14, 16,  
 18, 19 8:3 9:1  
 18:11, 17 35:18, 21  
 43:15 65:23 67:7  
 84:9, 9, 11  
 Louise 3:3 13:2  
 66:2 83:8  
 low 71:2 73:12  
 luck 12:4  
 lumped 8:23  
 Lynn 20:20, 20

< M >  
 machine 77:7  
 magazine 49:16  
 Maggie 3:14 13:7  
 14:2  
 mail 73:12 74:21  
 75:4 76:7, 15, 21  
 80:17 81:2, 8, 14,  
 21 82:6  
 mailed 49:22  
 main 26:6, 7  
 major 32:1, 3  
 60:16  
 making 36:1, 20  
 37:18 38:15 80:9  
 man 6:8  
 management 21:8,  
 12 70:10 71:20  
 manager 21:20  
 28:22, 23 32:5  
 manages 71:16  
 manufacturer  
 37:23 43:9  
 manufacturers  
 17:3 38:14  
 March 50:7  
 Mark 2:14 14:4  
 marketing 70:6  
 married 46:17  
 Martin 3:22  
 matters 84:20  
 Matthew 2:21  
 12:15  
 McConaghy 2:4  
 3:19 4:7, 10 5:11  
 6:3, 7 11:6, 11, 20

12:5 14:8, 19 15:3,  
 11, 15 16:6, 8 19:4  
 20:5, 12, 15, 22  
 21:2 28:6 29:11  
 33:15 34:12, 17, 20  
 40:4, 8 44:14  
 45:17 46:1, 3, 6, 9  
 47:16 48:23 49:7,  
 14 50:3, 6 51:2, 5,  
 22 53:6, 17 58:22  
 59:7, 15, 19 61:5, 9  
 62:15, 18 66:2  
 75:9 78:11 79:3  
 82:18, 21 83:2, 14,  
 19 84:7 85:13, 16,  
 19, 21, 23 86:7  
 87:8, 12  
 McDonald 45:18  
 McWhorter 12:19  
 63:8  
 mean 7:4 31:19  
 39:20 44:21 51:3  
 56:19 62:3 64:7  
 79:10 81:3  
 means 47:22  
 52:12 61:18 69:22  
 88:10  
 Med 78:13, 20  
 Medical 13:10  
 35:14 36:21 43:5,  
 22 50:17 54:23  
 68:23 69:9 78:7  
 medication 70:10,  
 11, 18, 21 71:4, 18  
 72:6, 7, 11, 14 74:3,  
 6 81:5  
 medication-related  
 73:4, 8  
 medications 71:11  
 72:4 73:6, 11, 13  
 medicinal 68:5  
 Medicine 47:14, 20  
 57:17  
 MedStart 70:9, 13,  
 19 71:1, 8, 9, 13, 14,  
 19 72:19, 23 73:9,  
 14, 16, 22 74:5  
 76:9 78:14, 21, 22,  
 23

MedVantx 73:22  
 76:13, 14 78:14  
 79:1  
 meet 8:20 10:14,  
 15, 16 28:17 33:20  
 38:3 50:6 77:13  
 MEETING 1:8  
 3:21 10:10, 12  
 12:3 14:17 15:8  
 18:21 35:12, 13  
 66:11 85:2, 3  
 87:13, 16  
 Member 2:6, 7  
 MEMBERS 2:3  
 3:23 47:3  
 mention 21:10  
 47:15  
 mentioned 47:10  
 mentor 9:18  
 mentors 9:16  
 met 21:18, 21  
 29:16 83:21  
 Mike 6:8  
 mild 26:15 44:11  
 millions 73:23 74:2  
 mind 51:18 61:10  
 81:1  
 minimal 37:12  
 68:2  
 minute 63:1  
 minutes 14:10, 16  
 15:1, 9  
 Mississippi 58:6  
 Mitzi 2:11 12:6, 8  
 16:20 19:2 21:12  
 49:8  
 mix 43:10, 16, 20  
 mixed 43:11  
 Mohawk 68:13  
 moments 13:7  
 money 4:20 5:16,  
 17 41:1 73:11  
 80:9, 12 82:7  
 monitor 69:15  
 monitored 69:10  
 monitoring 6:22  
 Montgomery 12:11  
 month 4:21 5:3, 4,  
 10 6:18 8:2 10:10  
 15:21, 23 16:1, 4,

11, 13 21:11 23:22  
 25:2 34:3, 6, 14  
 49:17, 18, 23, 23  
 Monthly 49:16  
 months 19:10 27:6  
 28:18 39:9 50:15  
 moot 79:20  
 morning 4:14 11:5  
 mother 10:22  
 motion 4:1 5:22,  
 23 14:9, 15, 23  
 15:7 34:13, 17  
 59:2 61:6 85:15,  
 16 87:6  
 Mount 2:19 12:10,  
 10  
 move 4:3 34:15  
 41:15 46:9 51:23  
 52:8 59:17 84:17  
 moved 14:14 52:11  
 moving 27:10  
 municipal 27:8  
 Muscato 2:21  
 12:15, 15  
 muscle 67:10

< N >  
 NABP 62:12 63:7,  
 10, 18 64:21 65:7,  
 13 66:22 67:4, 4  
 name 60:2 71:22  
 78:12, 15  
 national 54:22, 23  
 69:19  
 nationally 54:21  
 NCPDP 69:19  
 near 5:18  
 necessarily 48:2  
 necessary 73:19  
 need 4:1 14:9  
 19:10 25:22 27:16  
 29:12 32:20 34:12  
 43:1 44:17 61:1, 5  
 62:19 75:1, 2  
 84:21 85:5, 12  
 needed 20:16  
 needs 5:20  
 neither 88:14  
 net 9:10

<p><b>never</b> 33:18 35:5, 10 47:20</p> <p><b>New</b> 6:11, 12 9:5, 6 10:2 11:8, 17 16:18 24:12, 15 29:13 32:14 51:23 52:7 54:7, 15 56:20 59:1, 6 64:5 73:18 79:6 82:21 83:2</p> <p><b>nine</b> 9:7</p> <p><b>nobody's</b> 29:9</p> <p><b>nonpharmacy</b> 67:16, 19 68:1, 3</p> <p><b>nonresident</b> 46:11, 14 47:7</p> <p><b>Normally</b> 79:10</p> <p><b>northern</b> 45:7</p> <p><b>note</b> 33:1, 5</p> <p><b>November</b> 14:16</p> <p><b>NPI</b> 68:10 69:18 75:10</p> <p><b>nuclear</b> 40:18</p> <p><b>number</b> 6:21 15:23 17:11 21:22 23:20 36:23 40:22 46:10 47:11 52:1, 11 54:19 59:18, 19 62:22 63:2 64:21 65:7 73:6 75:10 76:1 82:4 86:10, 11, 12, 12, 14, 16, 16, 18, 21, 22 87:2, 4</p> <p><b>numbering</b> 64:5</p> <p><b>numbers</b> 85:8 86:9</p> <p><b>nurse</b> 77:9 78:6, 7</p> <p><b>nurses</b> 8:23</p> <p><b>Nursing</b> 22:1, 3, 7 49:14</p> <p>&lt; O &gt;</p> <p><b>occur</b> 16:15</p> <p><b>o'clock</b> 85:1</p> <p><b>offer</b> 72:19 73:11</p> <p><b>offering</b> 42:8</p> <p><b>offers</b> 71:2</p> <p><b>office</b> 10:17 16:11, 13 22:21 23:10 26:23 30:6 46:21 48:13 73:7 79:11</p>	<p><b>offices</b> 68:7 73:18 74:1</p> <p><b>official</b> 19:14</p> <p><b>Oh</b> 35:12</p> <p><b>okay</b> 10:22 15:15 16:10 19:1 20:5, 22 21:2 32:8 33:14 47:14 49:4 62:6 77:15 79:21 85:16</p> <p><b>old</b> 45:18 46:9 51:23</p> <p><b>Omnicare</b> 13:13</p> <p><b>once</b> 8:20 23:23 40:14 66:14 72:7 73:14</p> <p><b>one-on-one</b> 70:20 73:1</p> <p><b>ones</b> 17:20, 22 48:12</p> <p><b>ongoing</b> 24:18 73:15</p> <p><b>online</b> 17:14 20:18 27:20, 23 52:20, 22 55:20 64:21</p> <p><b>open</b> 3:20 25:22 72:8</p> <p><b>opened</b> 11:1 84:9</p> <p><b>operation</b> 77:7, 17</p> <p><b>Operations</b> 2:11</p> <p><b>opinion</b> 11:9 30:21 80:1, 3</p> <p><b>optional</b> 70:23 73:9</p> <p><b>options</b> 30:17</p> <p><b>order</b> 8:8 73:12 74:21 75:4 76:7, 15, 22 80:18 81:2, 8, 14, 21 82:6</p> <p><b>orders</b> 6:21 27:1</p> <p><b>originally</b> 28:17</p> <p><b>ought</b> 31:18, 21 37:18</p> <p><b>out-of-state</b> 16:17 45:15 79:17, 19</p> <p><b>outpatient</b> 8:5</p> <p><b>outreach</b> 70:19 73:1 74:4</p> <p><b>outside</b> 5:13, 19</p>	<p><b>outsourcing</b> 38:14, 19</p> <p><b>over-the-counter</b> 71:11 72:6</p> <p><b>owe</b> 23:21 24:1</p> <p>&lt; P &gt;</p> <p><b>packaging</b> 73:20</p> <p><b>page</b> 59:21, 23</p> <p><b>pages</b> 14:13</p> <p><b>paid</b> 23:20 32:6</p> <p><b>paper</b> 17:15 18:21 25:10</p> <p><b>par</b> 77:22</p> <p><b>parent</b> 76:11 79:2</p> <p><b>part</b> 9:14 10:6 16:21 35:10 53:6 56:7 66:21 81:15</p> <p><b>participated</b> 47:3</p> <p><b>particular</b> 8:6 32:17 74:12</p> <p><b>parties</b> 75:11 88:15</p> <p><b>partnered</b> 68:10</p> <p><b>passed</b> 53:3</p> <p><b>patient</b> 39:8 43:17, 17 70:12, 19 71:12 72:2, 14 73:1 74:3, 6 80:8 81:20 82:9, 12</p> <p><b>patients</b> 36:23 38:6 68:6 70:15, 16, 20 71:2, 4, 12, 17 72:18, 20, 21 73:5, 10, 14, 17 74:7 81:3 82:5</p> <p><b>patient's</b> 71:21 72:1</p> <p><b>pay</b> 4:20 24:16, 17 30:12 32:7 53:1 71:6</p> <p><b>payment</b> 24:19 82:3, 4</p> <p><b>PCCA</b> 36:16</p> <p><b>pellet</b> 36:8, 18 37:5, 9 40:11 41:23 43:8</p> <p><b>pellets</b> 35:16, 19, 23 36:1, 3, 11, 17 37:2, 10, 11 38:1, 4</p>	<p>40:11, 12 41:6, 8, 12 42:2, 2, 16, 21 43:7, 9, 23 44:4 45:8, 10</p> <p><b>pending</b> 19:12, 12 20:9</p> <p><b>people</b> 6:19 7:19 9:4, 10, 12, 22 10:3, 13 19:7 23:1 29:7 35:2, 7 37:17 45:21 46:22 48:3 58:4, 11, 15 60:10, 21 61:21 62:4 63:13, 22 68:20</p> <p><b>people's</b> 32:10</p> <p><b>percent</b> 5:13 58:8, 9 62:16, 17 65:20</p> <p><b>period</b> 37:16 39:12, 13 42:7 44:7 50:11</p> <p><b>periods</b> 43:13</p> <p><b>permanent</b> 86:15</p> <p><b>permission</b> 18:1</p> <p><b>permit</b> 84:19</p> <p><b>permitted</b> 18:4</p> <p><b>Permutt</b> 13:15</p> <p><b>person</b> 8:6 26:21, 21 28:15 32:5 33:4 34:5, 9 35:3 58:21</p> <p><b>petitioning</b> 67:8</p> <p><b>pharm</b> 33:4</p> <p><b>pharmacies</b> 17:2, 11 20:21 25:19 38:13, 15, 18 42:17 46:11 47:8, 11</p> <p><b>pharmacist</b> 7:1 16:18 32:18 53:19 60:18 66:10 67:18 68:12 75:22 86:19</p> <p><b>pharmacists</b> 7:2 8:22 9:7, 17, 19 10:2 16:16, 22 19:7, 18 20:21 47:12, 22 48:21 53:11 54:7, 7, 8 56:5, 20 61:14 62:9, 13 64:23 65:16, 19 73:3 75:13 83:23</p>
--	--	--	---

<p><b>PHARMACY</b> 1:2, 18 3:21 7:20 9:17 10:1, 3 12:9, 11, 16, 18, 20 13:1, 3, 5, 12, 19, 23 14:5, 7 26:7 27:20 36:1, 13 40:10, 12, 19 45:7 46:14 53:12, 14, 16 54:21 56:7, 11 57:9 59:21, 22 63:9 66:9 68:4, 22 69:5, 7 71:6 72:16 73:2 80:8 81:4 83:22 84:11 86:18 87:1</p> <p><b>PharMedCo</b> 12:22</p> <p><b>phone</b> 61:19 70:20 73:1</p> <p><b>physician</b> 68:6, 7 69:3, 10, 11 71:18, 21, 23 72:3, 16 73:7, 18 74:1 77:6, 10 78:3, 10</p> <p><b>physicians</b> 8:23 70:2, 6 72:18, 19 76:19 80:5</p> <p><b>picked</b> 17:8</p> <p><b>piece</b> 25:10</p> <p><b>pieces</b> 18:21</p> <p><b>Pierce</b> 3:12 13:22, 22</p> <p><b>pitch</b> 33:21 35:10</p> <p><b>place</b> 27:6 34:7 51:11 76:16</p> <p><b>plan</b> 71:5 86:19 87:4</p> <p><b>please</b> 34:23</p> <p><b>pleased</b> 11:12</p> <p><b>plus</b> 16:16</p> <p><b>pocket</b> 71:6</p> <p><b>point</b> 40:14 56:10 70:14 79:20</p> <p><b>police</b> 22:11</p> <p><b>policy</b> 19:11 59:4</p> <p><b>popped</b> 41:13</p> <p><b>populated</b> 24:22</p> <p><b>position</b> 36:18 51:16</p> <p><b>possible</b> 47:4</p>	<p><b>powder</b> 36:11</p> <p><b>power</b> 67:8</p> <p><b>practice</b> 25:2 41:10 47:19 68:22 69:5, 18 71:20</p> <p><b>practices</b> 74:8</p> <p><b>practicing</b> 41:11 78:8</p> <p><b>practitioner</b> 47:21 77:10 78:6</p> <p><b>precancerous</b> 44:8</p> <p><b>prefer</b> 37:13</p> <p><b>preparations</b> 68:5</p> <p><b>prepared</b> 5:4</p> <p><b>preparing</b> 30:14</p> <p><b>prescription</b> 47:23 48:9, 16 49:2 69:20 81:21</p> <p><b>prescriptions</b> 48:4 71:7 73:19 74:2</p> <p><b>PRESENT</b> 2:9 3:23 7:2, 12 46:12</p> <p><b>presentation</b> 57:12</p> <p><b>presented</b> 82:9</p> <p><b>presenting</b> 7:9</p> <p><b>presently</b> 6:19</p> <p><b>presents</b> 11:1</p> <p><b>President</b> 2:4 28:20</p> <p><b>press</b> 4:15 40:11</p> <p><b>pressure</b> 37:4</p> <p><b>pressurized</b> 36:5</p> <p><b>pretty</b> 5:1 7:20 28:4 44:15 51:6 69:23 77:17, 17</p> <p><b>prevents</b> 7:9</p> <p><b>previous</b> 11:16 26:3</p> <p><b>price</b> 23:17 73:12</p> <p><b>prices</b> 71:2</p> <p><b>primarily</b> 16:11</p> <p><b>primary</b> 17:2</p> <p><b>principal</b> 38:11</p> <p><b>print</b> 61:16 72:13</p> <p><b>printed</b> 5:6</p> <p><b>printout</b> 47:6 62:12 63:10, 15</p> <p><b>probably</b> 27:7 42:16 51:7 61:17</p>	<p>82:4 85:1</p> <p><b>probation</b> 60:5, 10</p> <p><b>problem</b> 7:8, 8 21:11 31:2 48:9 49:5 53:8 55:23 64:18, 19 68:21</p> <p><b>problems</b> 17:2, 5, 14 28:11</p> <p><b>procedure</b> 43:18, 18</p> <p><b>proceed</b> 78:1</p> <p><b>process</b> 7:17 8:4 9:13 17:4 21:1, 4 49:21 54:5 72:17</p> <p><b>processed</b> 9:12 52:21</p> <p><b>processes</b> 37:13</p> <p><b>product</b> 39:11 40:3 42:4, 9</p> <p><b>products</b> 38:22 40:17 41:2</p> <p><b>profession</b> 84:14</p> <p><b>professionals</b> 6:23 8:21 9:23 10:1, 1 84:19</p> <p><b>program</b> 6:20 8:9 11:13, 15, 16, 17 22:10 24:2 70:10, 13, 16, 23 72:19 73:15, 23</p> <p><b>Programs</b> 69:20</p> <p><b>prohibition</b> 69:4</p> <p><b>project</b> 21:20 28:22, 23 32:5 51:14, 19, 21</p> <p><b>projects</b> 30:2, 7, 9, 10</p> <p><b>promised</b> 31:12</p> <p><b>proper</b> 10:18</p> <p><b>proportion</b> 62:13</p> <p><b>propose</b> 35:16</p> <p><b>protected</b> 23:11</p> <p><b>protocol</b> 10:18 67:21</p> <p><b>prove</b> 38:3 40:2</p> <p><b>provide</b> 58:20 71:10</p> <p><b>provided</b> 46:22 73:23 76:3</p> <p><b>provider</b> 66:6, 17</p>	<p>67:9 71:14</p> <p><b>providers</b> 70:11</p> <p><b>provides</b> 70:23 71:15 73:16</p> <p><b>providing</b> 44:23 45:1 71:17</p> <p><b>proving</b> 43:2</p> <p><b>public</b> 42:8 45:1 50:5, 9 85:3</p> <p><b>published</b> 49:23 50:13</p> <p><b>publishing</b> 49:15</p> <p><b>pull</b> 22:19 26:3 60:2 64:21</p> <p><b>purpose</b> 84:18</p> <p><b>pursue</b> 57:8</p> <p><b>put</b> 8:18 18:22 20:23 22:2 23:19 25:11 26:8, 19 31:18, 23 32:9 37:7, 9 43:14 44:3 59:3 84:2</p> <p><b>puts</b> 33:5</p> <p><b>putting</b> 38:6</p> <p>&lt; Q &gt;</p> <p><b>quarter</b> 7:14</p> <p><b>question</b> 19:5 31:15 58:8 61:10 62:11 66:3</p> <p><b>questioning</b> 67:19</p> <p><b>questionnaires</b> 48:5</p> <p><b>questions</b> 11:5 16:6 42:11 60:20 70:21 73:4, 8 78:11 85:10 88:9</p> <p><b>quick</b> 10:4 59:12 61:12</p> <p><b>quickly</b> 44:6</p> <p><b>quite</b> 32:19</p> <p><b>quorum</b> 3:22</p> <p><b>quotes</b> 45:19</p> <p>&lt; R &gt;</p> <p><b>radiating</b> 45:10</p> <p><b>radiation</b> 35:23 36:2, 19 40:15, 18, 20 42:1, 4</p> <p><b>radioactivity</b> 40:21</p> <p><b>ran</b> 67:13</p>
---	---	---	--

<p><b>random</b> 62:22 63:19 64:6 <b>Ransburg</b> 13:14 <b>Ransburg-Brown</b> 3:9 13:14 <b>rare</b> 9:20 <b>rate</b> 32:2, 7 37:1, 15 38:3, 6 39:8 40:2 41:5, 18 44:2 58:3 <b>read</b> 6:17 14:12 20:7 35:18 36:20 44:1 74:17 86:9 <b>reading</b> 62:23 <b>reads</b> 83:15 <b>ready</b> 4:12 7:18 <b>real</b> 11:12, 13 61:12 <b>really</b> 16:1 17:9 19:18 27:16 44:9 47:4, 11 59:22 68:14 74:21 <b>reason</b> 7:3, 4 27:7 66:8 <b>reasons</b> 7:4, 13 <b>receive</b> 52:21 54:5 70:21 72:15 73:15 <b>received</b> 63:14 67:18 <b>receiving</b> 70:17 <b>recess</b> 86:3 <b>reciprocating</b> 53:20 <b>reciprocity</b> 54:16 56:8 <b>recommend</b> 35:16 36:16 <b>recommendations</b> 8:6 87:7 <b>record</b> 58:4 60:19 <b>records</b> 55:17 <b>recovering</b> 9:23 10:2 <b>recovery</b> 10:5 <b>Reference</b> 49:16 <b>referred</b> 16:14 <b>refill</b> 73:16 <b>refills</b> 71:3 <b>refuse</b> 60:17 <b>refused</b> 8:5 18:5</p>	<p><b>refuses</b> 36:16 <b>regardless</b> 41:19 <b>register</b> 61:15 <b>registered</b> 68:9 69:18 <b>registrants</b> 25:19 84:20 <b>regulate</b> 44:15 <b>regulating</b> 68:20 <b>regulation</b> 67:20 68:2 <b>reject</b> 50:12 <b>relapsed</b> 8:12 <b>relate</b> 37:1 <b>related</b> 44:2 <b>relatively</b> 21:6 <b>release</b> 37:1, 13, 15 38:3, 6 39:7 40:2 41:5, 18 43:3 44:2 <b>released</b> 37:8 39:11 42:6 43:12 44:7 45:3 <b>releases</b> 43:16 44:5 <b>relicensure</b> 7:10 <b>rely</b> 23:2 <b>remarkable</b> 35:9 <b>remember</b> 36:12 <b>reminders</b> 73:17 <b>removed</b> 72:8, 12 <b>renew</b> 17:13 19:7 20:1 25:3 <b>renewal</b> 28:4 54:8, 10 <b>renewals</b> 16:13, 14 25:1 27:23 28:4 <b>renewed</b> 16:16, 19, 19 47:8 <b>renews</b> 20:20 <b>replace</b> 43:15 <b>report</b> 4:12 5:10, 12 6:1, 9, 18 15:18 16:9 20:13 21:7 27:4 28:22, 23 29:2 46:4 66:7 67:8, 15 <b>REPORTER</b> 1:23 88:7 <b>reporting</b> 66:17 <b>reports</b> 42:19</p>	<p><b>represent</b> 12:7 <b>represents</b> 88:12 <b>reputable</b> 44:22 45:20 <b>require</b> 18:10 38:23 40:1 53:19 87:4 <b>required</b> 18:15 66:7 77:20 <b>requirement</b> 37:10 38:2 39:10 <b>requirements</b> 38:22 64:15 66:12 <b>requires</b> 58:6 61:14 <b>research</b> 51:13, 19, 20 <b>researched</b> 80:23 <b>response</b> 16:7 <b>responsible</b> 24:14 <b>responsive</b> 22:23 <b>rest</b> 27:23 <b>result</b> 88:17 <b>results</b> 86:9 <b>resume</b> 85:2 <b>resuming</b> 86:8 <b>retail</b> 83:21 <b>retire</b> 84:3 85:10 <b>retired</b> 86:1 <b>retiring</b> 83:5 84:1 <b>return</b> 29:6 <b>returned</b> 8:14 <b>revenue</b> 5:14 <b>revert</b> 19:18 <b>Rick</b> 3:4 13:4 <b>ridiculous</b> 67:11 <b>right</b> 3:19 4:10, 22 6:7 20:14, 19 21:3 23:11 24:7, 15, 18, 23 27:15 30:23 31:1 32:4 33:12 34:8, 9, 16, 22 36:15 39:2, 20 44:14 45:13, 22 46:15 51:22 52:3 53:21 54:14 55:15 56:2 58:1 59:20 60:8, 21, 22 62:16 63:5 64:13, 16 65:9, 22 67:1, 1</p>	<p>73:13 80:21 81:6, 13 84:16 85:13 <b>risk</b> 38:7 <b>Roanoke</b> 68:14 69:22 <b>Roger</b> 3:2 12:23 <b>Ronda</b> 2:23 12:19 63:8 <b>rotation</b> 12:14 <b>Roth</b> 3:13 14:1, 1 <b>RPR</b> 1:23 88:6, 21 <b>rule</b> 19:11, 14 49:9 59:1 62:16, 19, 23 <b>rules</b> 43:7 45:20 <b>ruling</b> 58:19 <b>run</b> 4:19, 19 19:6 38:21 <b>running</b> 25:1 66:23 <b>rural</b> 68:8  &lt; S &gt; <b>safe</b> 41:9 <b>sain</b> 21:6 <b>salary</b> 32:10 <b>sales</b> 33:21 35:10 <b>Samford</b> 10:16 13:8 56:16 58:15 <b>sample</b> 63:19 70:17 71:16, 17 72:3, 8, 10, 15, 21 75:20 76:21 80:7 81:11, 19 <b>samples</b> 70:4 71:10 74:1, 3, 18 <b>sanction</b> 33:11 <b>satisfaction</b> 70:12 72:22 74:7 <b>save</b> 73:10 <b>saw</b> 51:16 77:18 <b>saying</b> 22:4 29:21 30:6 32:22 35:5 44:23 54:2, 4, 6 64:8 <b>says</b> 20:8 35:21 39:14, 21 52:20 53:1 78:3 <b>scan</b> 25:11</p>
---	--	--	---

scanned 72:11	service 46:22 71:1 72:20 73:10, 12	situations 55:22 60:23 62:3	standard 73:21 77:19
scans 71:23	session 16:5 46:8 84:17, 22 85:7, 11	six 9:7 35:2 74:13 77:20	standardized 37:5
scenario 68:17	86:4, 8	six-month 31:10	standards 69:17 75:12
school 8:3, 9, 13 12:20 36:13 53:13, 16 54:23 56:11, 12 63:8	set 28:3 33:19 49:20 66:15	sketchy 74:15	standing 26:6 60:4, 11
schools 10:10 54:21 57:10	setting 17:19	slow 17:3, 5	start 6:17 12:6 28:21 29:12 53:12 56:12 70:16
scope 78:8	seven 68:9	slowed 17:9, 17, 17	started 49:9
screen 47:21	shape 4:16 6:14	slows 17:16	starting 42:7 64:5
screening 6:20	SHELBY 88:4	small 9:21 24:11 31:13, 17	starts 49:21
screw 4:18	Sheri 1:23 88:6, 20, 21	snafu 4:15	STATE 1:2, 18 3:21 9:18 14:4, 6 17:12, 21 18:3 19:9 22:12, 15 23:2 35:14, 15 41:13 42:3 45:8 55:6 66:9 67:6, 13 74:13 77:21 83:20 88:3
screwed 60:9, 23	ship 18:5 37:11 42:2	so-called 76:20	stated 30:16
scripted 81:16	shipping 71:2 73:21	sold 43:4	statement 36:20
searches 22:21	shock 60:9	Solutions 17:4	statements 26:23 88:10
Second 4:5, 6 6:2 14:18 15:2, 10 59:8, 9 85:15 87:8	shocked 47:11	solves 49:4	States 37:23 41:14 52:11 53:18 57:21 68:3
seconded 85:17	short 44:7	Somebody 12:1 22:22 24:6 40:5 60:1	statistic 9:4
seconds 9:15 72:17	show 9:4 20:3 25:18 37:12, 14 42:3 44:22 45:2, 4 66:23 70:1	somebody's 62:5	statutes 39:17
Secretary 2:10	showed 25:17	someone's 25:11	stay 73:17
secretary's 16:9	shown 60:11 72:4	someplace 25:12 44:5	stealing 57:17
see 6:13 8:10 12:4 15:20 22:20 25:22 27:2 29:15, 19 32:16 39:14, 21 43:1 45:11 47:20 48:15 56:23 57:5, 21, 22 67:23 68:16 81:10, 10, 20 84:22	shows 21:1 26:18, 20	soon 7:20	steam 36:5
seen 42:14, 19 44:3, 8	shut 45:6	Sorry 51:4 52:5 61:11, 18 62:1	stearic 36:12
sees 77:11	side 21:18, 19 59:3	sort 80:20	stenotype 88:9
selected 72:6, 7	sign 7:18 23:7, 18 57:1	sorts 7:13	step 26:19
self-administration 68:6	signed 6:20	sounds 23:20 58:22	Stephanie 3:15
sell 57:17	signing 34:18	South 12:11 13:10 61:13	Stephens 3:4 13:4, 4
send 17:15 18:2, 10, 12 19:19 20:2 23:9, 14 29:21, 22 34:22 87:1	silent 69:4	speak 6:14 8:15 9:15 11:7, 17 69:8	steps 27:13
sending 29:20 30:4 82:5	similar 50:23 51:12 72:15	speaking 11:14	sterile 42:9
Senior 13:4	simple 67:22	speaks 35:6	sterility 40:13, 16, 20 41:19 44:19
sent 10:9 18:1	single 71:23	specialists 73:3, 5	sterilization 42:14, 19
separate 29:10 44:18, 20 82:19	single 36:1	specific 62:22 63:1	sterilize 35:23 36:2, 7, 9, 18 41:2, 23 42:4
September 25:3	sir 15:19 46:5 51:9 65:5	specified 8:19	
	Sirote 13:15	speed 18:8, 17	
	site 26:4 68:3, 4, 12 77:6	spell 32:21	
	sites 67:16, 20 68:1, 10	spending 41:1	
	sitting 84:11	stab 4:13	
	situation 5:9 21:21 48:22 60:2	staff 7:16 8:14 48:3 73:3, 7	
		stamp 84:9	
		stance 39:23 48:1, 18	
		stand 12:6	

<b>sterilized</b> 42:22 44:16	<b>Susan</b> 2:10 8:3 10:9, 18 16:8 17:23 19:4 41:12 46:1 50:16 52:4 57:15 63:7 65:17 80:2	<b>technician</b> 24:23 27:19 32:18 53:5 66:11	44:15, 21 45:17 46:21 47:17 48:17, 23 51:2, 6 52:3, 16 54:9 55:16 56:3, 8, 22 57:5 58:5 59:15 61:1 62:15, 21, 23 63:1, 21 64:18 74:19 75:1, 2, 11 79:3, 11 82:18 83:8 84:1
<b>sterilizing</b> 36:7	<b>Susan's</b> 41:4	<b>technicians</b> 16:15, 22 25:2 52:3, 10 53:9 56:4 63:15, 18 64:20 65:1	<b>thinking</b> 20:6 26:7 39:5
<b>Steve</b> 3:6 13:9 43:5 61:12	<b>sync</b> 44:11	<b>Technology</b> 21:17 74:14	<b>third</b> 75:11
<b>stick</b> 41:5 62:9, 19 63:5 69:1	<b>System</b> 13:7 21:8, 12 22:3, 11, 18, 22 23:3, 19 24:22 25:4, 9, 12 26:11, 13, 18 27:11 28:3 32:14 33:1, 3 47:1 52:7 60:10, 14 65:6 66:7 67:8 71:21 72:1	<b>techs</b> 7:11, 12 9:7, 17, 19 10:3	<b>Thomas</b> 83:5
<b>stop</b> 22:20 30:1 75:21	<b>systems</b> 22:14 33:6	<b>tells</b> 11:2, 7 12:7 18:5, 20 19:20 20:2 28:13 46:20 49:8 58:14 60:3 62:12	<b>thought</b> 46:16 64:4 67:22
<b>stopped</b> 40:17	< T >	<b>ten</b> 7:12 44:4 58:9	<b>three</b> 23:16 26:10 27:6 39:8 50:15
<b>store</b> 26:10 60:18	<b>tables</b> 84:12	<b>ten-minute</b> 84:23	<b>three-month</b> 37:15 39:7
<b>stores</b> 24:15	<b>tablet</b> 25:8	<b>Tennessee</b> 36:22 53:19	<b>ticket</b> 22:20
<b>Street</b> 1:19 26:6, 8	<b>tablets</b> 25:7, 16	<b>ten-percent</b> 36:9	<b>Tim</b> 3:22
<b>strictly</b> 8:18	<b>take</b> 4:13 10:7 24:4, 5 30:18, 20 35:17 38:9 48:20 49:11 61:2 64:6 85:12, 14	<b>terms</b> 34:18	<b>time</b> 8:20 10:4 12:5 14:8 17:6 18:15 25:4 26:5 27:2, 3 29:12 30:3 31:2 33:15 39:9 43:13 44:4, 8 50:11 51:5 66:19 68:22 73:10 77:10 83:15 84:16 85:2
<b>student</b> 7:22, 23 8:4, 12 9:8 12:14 13:8	<b>take-home</b> 81:5	<b>Terry</b> 2:16 13:18	<b>times</b> 19:6 21:22
<b>students</b> 10:21	<b>taken</b> 11:13 28:2 36:17 39:23 86:4 88:8	<b>testing</b> 39:1, 1 42:14 43:2	<b>tissue</b> 44:10
<b>studies</b> 37:12, 13 42:20 43:2	<b>takes</b> 18:15 45:3 72:17	<b>testosterone</b> 38:1	<b>today</b> 6:9 34:13 83:10 85:1
<b>stuff</b> 41:10 58:12	<b>talk</b> 10:2 20:19 28:9 30:17 34:20 57:8 77:23	<b>thank</b> 11:18, 23 46:6, 18 47:4 61:23 62:6 64:1 66:4 84:13	<b>told</b> 21:12 23:5 28:21 30:4 32:4 51:13 66:6 79:18
<b>sub</b> 77:22	<b>talked</b> 23:5 25:13 79:14	<b>Thanks</b> 19:2	<b>toll-free</b> 73:6
<b>submit</b> 18:16 25:9	<b>talking</b> 38:12, 13, 15, 17 41:4 50:14 51:7 84:18	<b>therapy</b> 43:19 44:18 70:15 86:20	<b>tomorrow</b> 35:14
<b>submittal</b> 20:12	<b>Tammie</b> 2:22 12:17	<b>thereto</b> 88:10	<b>top</b> 4:10
<b>substance</b> 36:13	<b>task</b> 48:21	<b>thing</b> 16:12 17:9 18:8 32:21 46:14 81:9 83:17	<b>total</b> 9:9, 16 59:16
<b>suggest</b> 38:7 59:2	<b>tech</b> 65:13	<b>things</b> 18:17 20:13 22:7 26:15, 16, 17 28:2, 16 29:8, 12, 17, 18 31:20 37:14 43:10, 11, 15, 20 44:10, 13, 21 45:19 54:12 69:6 84:9	<b>touch</b> 77:22
<b>Suites</b> 17:16	<b>technical</b> 4:15 28:14 32:5	<b>think</b> 4:23 7:20 19:13 23:2 34:14 35:12 36:14 38:4, 11, 20 39:20 40:4 41:3, 8, 14 43:22	<b>town</b> 9:21 26:6
<b>summer</b> 24:21			<b>track</b> 16:3 26:13 32:15 73:17
<b>sums</b> 51:6			<b>tracked</b> 27:1
<b>super</b> 72:1			<b>transcribed</b> 88:10
<b>supervising</b> 86:19			<b>transcript</b> 88:13
<b>supervision</b> 68:5			
<b>supplies</b> 73:13			
<b>support</b> 47:19 48:4 51:15 70:20 73:2, 16			
<b>supportive</b> 50:20			
<b>supposed</b> 28:15, 17 39:7 67:3			
<b>supposedly</b> 62:13			
<b>sure</b> 23:10 30:16 31:18 32:19 34:4 41:7 42:23 46:11 47:22 48:3, 14 61:8 69:1 77:18, 20 80:22 83:22			
<b>surprise</b> 83:11, 12, 14			
<b>surprised</b> 66:5			
<b>surrender</b> 86:15			

transcription 70:8 88:11	user-friendly 22:19, 23 25:23	58:12 61:7, 8 62:9, 10 67:9 85:8	22 64:19 65:12 68:21 70:6 72:13 74:17 75:1 76:5 82:8 84:7
transfer 33:8	usually 8:20 36:12 53:2 60:1 68:7	wanted 21:7 24:6 26:4 29:14 34:4 43:22 47:18 56:23 69:23 77:22 79:9	Wellness 6:9, 14, 15 10:19
Treasurer 2:5	utilize 22:14	wanting 79:16	Wells 2:13 14:6, 6 68:11
treasurer's 4:12	utilizing 74:14	wants 48:15	went 10:23 16:21 18:1 27:12 51:11 68:11 77:18
treating 39:3	< V >	WARD 18:8 19:1 30:23 31:6 37:19 39:14, 19 46:5, 7 52:18 54:17 55:2, 5, 10, 14, 18, 23 56:2, 8, 22 57:15 58:11 59:13 65:16, 20, 23 68:21 69:12, 16 74:17 75:1, 6, 14, 18, 20 76:2, 5, 15 77:12 78:2, 12, 15, 19, 23 80:1, 5, 13, 19, 22 81:9, 15, 23 82:10, 14	We're 3:19 4:16, 17, 22 5:1, 8, 14 7:15, 19 8:9, 15 10:3, 6, 11, 12, 15 14:8, 12 16:3 17:18, 19 20:9 21:11 23:11 24:1, 12, 13 27:8 30:2, 4 34:5, 9 38:6 41:8 45:2 46:13 48:14 51:6 52:3, 6 58:23, 23 62:18 68:19 82:23 84:17 85:8, 23 86:7
treatment 7:2, 6, 11, 17, 23 8:1, 5, 18 9:13, 19	valid 48:15	waste 30:3 66:19	whatsoever 35:20 36:11 48:6
treatments 10:21	value 35:20	water 36:6, 9, 10	willing 10:7
tremendous 27:22	value-added 72:20	waxy 36:13	wise 51:5
tried 47:8	Vanderver 3:11 13:20, 20	way 24:7 27:17 31:16 32:13 33:19 35:22 37:6 40:16 41:23 43:3 48:8 51:14 52:8, 16, 17 63:12, 16 66:20 67:3, 9 81:1 82:12	wish 24:11
tries 68:23	variations 26:15	ways 42:21 81:3	withdrawn 8:13
Tristano 3:15	various 14:10	website 20:16 59:23 60:3 61:16	women 44:9
true 88:12	vary 43:17	Wednesday 1:10	wonderful 22:7
trusted 73:23	verification 59:21, 23 60:14	week 4:21 8:21 10:11 23:8, 12 35:13 49:9 77:11	wondering 33:16 80:19
try 8:10 9:20 25:11	verify 61:14 72:11	weeks 23:16 28:18	wondering 33:16 80:19
trying 5:6 12:1 19:7 42:18 48:20	version 18:13	welcome 19:3 70:9 85:7	word 51:15
Tuesdays 26:17	vice 28:20	well 10:8 11:18, 23 17:1 19:17 22:4 25:13 28:21 29:14 36:5, 10 39:22 42:12 45:6 50:22 51:2, 2, 6 55:18 56:19 58:8,	wording 20:6 49:1 59:4, 11
Turenne 12:21	video 70:8 74:9 77:8 78:2, 20	well 10:8 11:18, 23 17:1 19:17 22:4 25:13 28:21 29:14 36:5, 10 39:22 42:12 45:6 50:22 51:2, 2, 6 55:18 56:19 58:8,	work 7:16, 16 8:4 18:17 24:10 27:22 29:8 30:1, 6 36:5 37:18 42:23 62:5 66:1, 16 73:18
turns 36:7	Village 1:19		
twice 77:11	violation 86:13, 21		
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3	violations 19:23		
Tuesdays 26:17	visit 70:18		
Turenne 12:21	visited 78:18		
turns 36:7	vote 15:16 48:2 50:11 85:5, 9, 12, 14, 18		
twice 77:11	voted 85:6		
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3	< W >		
Tuesdays 26:17	wait 34:13		
Turenne 12:21	waiting 7:6 27:8		
turns 36:7	Waldo 3:13 14:1		
twice 77:11	Walgreens 12:16, 17		
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3	Wal-Mart 13:22		
Tuesdays 26:17	want 9:15 10:6 11:20 15:17 23:13 25:14 27:4 28:8 30:5, 16, 20 31:2, 8 35:1 39:21 41:6 42:23 43:1, 19 45:5 47:15, 22 48:2, 14 50:23 51:3, 14 53:23 54:9 56:6 57:18		
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12 58:3 59:18, 19 68:3			
Tuesdays 26:17			
Turenne 12:21			
turns 36:7			
twice 77:11			
two 8:20 9:15 11:1 17:1 28:18, 18 44:20 45:11 54:10, 12			

<p><b>worked</b> 10:19 16:1 17:8 35:5 <b>working</b> 8:9, 15 21:23 30:2, 3, 11 34:5, 10 66:19, 22 83:21 <b>workload</b> 46:21 <b>works</b> 65:2 <b>world</b> 41:10 <b>worth</b> 39:9 44:6 58:8, 10 <b>wrapping</b> 16:13 <b>write</b> 43:19 60:20 <b>written</b> 17:23 <b>wrong</b> 31:21 60:12</p> <p>&lt; Y &gt;</p> <p><b>y'all</b> 14:11 67:7 77:23, 23 84:13 <b>Yarbough</b> 3:1 12:21 <b>YARBROUGH</b> 12:21 <b>yea</b> 85:18, 19, 20 <b>Yeah</b> 20:10 28:8 31:22 32:12 38:20 39:16, 19 40:8 44:14 48:23 49:6 52:15 53:5, 6, 8 58:13 61:1, 3 62:7 69:14, 16 75:6, 18, 23 76:11 78:19 79:3 80:13, 16 82:13 <b>year</b> 5:2, 14, 17 6:11, 12 16:2 17:10 21:9 24:9, 10 30:8, 9, 10 58:19 64:20 <b>years</b> 4:17 8:20 16:15 22:1, 2, 6 42:15, 17 54:11, 13 56:15, 16, 21 58:15 <b>year's</b> 44:6 <b>Yeatman</b> 2:7 4:6, 9 6:2, 6 14:14, 22 15:5, 13 32:13 33:10, 14 39:17 41:16 44:20 45:11, 22 50:16, 20 51:4,</p>	<p>18 52:15 53:5, 23 54:4, 15 57:3, 7 59:6, 10 61:3 64:10, 14 76:9 78:14, 22 82:8, 13 85:20 87:10 <b>yesterday</b> 8:1 35:5</p> <p>&lt; Z &gt;</p> <p><b>Zac</b> 2:18 12:13 <b>zero</b> 45:9 <b>zip</b> 25:21 <b>Zoopharm</b> 14:1</p>		
---	--	--	--